The Effect of Background Experience on School Counselor Self-Efficacy When Working with Students with Disabilities

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Abstract of Dissertation

The Effect of Background Experience on School Counselor Self-Efficacy When Working with Students with Disabilities

Licensure requirements for school counselors vary across the United States. Some states require school counselors to have prior teaching experience before they are eligible for licensure. With the limited literature, it is currently unknown if this requirement is needed for successful school counselors.

Bandura's self-efficacy theory was the base of this study as it compared school counselor self-efficacy and attitudes toward students with disabilities of school counselors who have taught and those who have not taught. Participants included 240 professional school counselors with at least one year of counseling experience. Participants were asked to complete the School Counselor Self-Efficacy Scale (SCSE) developed by Bodenhorn and Skaggs (2005) which is made up of five subscale: Personal and Social Development, Leadership and Assessment, Career and Academic Development, Collaboration, and Cultural Acceptance as well as the Educators Attitudes Toward Disabilities (EADS) scale developed by Freer (2018).

Analysis of the data using a one-way MANOVA and *t*-Tests of independent samples showed no significant differences between school counselors with and without teaching experience on their self-efficacy in the school counselor role when supporting students with disabilities. An independent samples *t*-test was conducted to determine the relationship between counselors who have prior teaching experience and those who do not have prior teaching experience and their attitudes toward individuals with disabilities and found to not be statistically significant. A Pearson *r* showed that the attitude toward

working with students with disabilities and school counselor self-efficacy were moderately positively correlated. Finally, a model using years of experience as a teacher as a mediating variable of the link between school counselor self-efficacy and attitudes toward students with disabilities as the outcome variable did not reveal a significant relationship. Results of the data analysis are discussed and implications and opportunities for future research are presented.

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Chapter One: Overview

Introduction

Historically school counselors have served primarily as academic, testing, and vocational guidance specialists in the school setting, but within the last decade, the school counseling profession has experienced a transformation to focus on the growing needs of students in schools. The need for schools to be proactive in addressing the mental health demands of its students because of the impact on academic performance and social-emotional development has grown. Roughly 70% of school aged-children diagnosed with a mental health disorders do not receive the mental health they require (Hanchon & Fernald, 2013). The disparity grows for poor, minority, and/or children with special needs. Most children who do access mental health services do so in the school setting, therefore it is essential that school counselors are adequately trained to support all students.

It is imperative to explore school counselor self-efficacy when working with students with disabilities because of the growing population of children requiring special education services. From school year 2000 – 2001 to school year 2017 – 2018 the population of children receiving special education services grew from 6.3 million to 7.0 million (National Center for Education Statistics, May 2019). Academic standards are used to drive instruction. These standards have changed to focus on educational mastery with high rigorous standards with the aim to prepare students to be college and career ready (Morgan et al., 2013). With the increasing stress of growing academic expectations in the classroom, it is beneficial to explore how the mental health and psychological well-being needs are being supported with direct services in school settings.

Statement of the Problem

Although the literature base concerning school counselors is growing, no studies have investigated how prior teaching experiences influences school counselor self-efficacy when working with students with disabilities. The knowledge base and research are also scarce regarding how self-efficacy affects professional school counselors in their training, performance, and job satisfaction (Bodenhorn & Skaggs, 2005). There is a clear gap in the literature concerning the relationship between school counselor self-efficacy when working with students with disabilities and background teaching experience.

To be a licensed school counselor in 48 states and the District of Columbia, it is required to have at least a master's degree and specialized training in the school counselor setting while under the supervision of a licensed school counselor, while two states require at least post baccalaureate hours. Some states require that school counselors have prior classroom experience as a state certified teacher as a requirement to become a school counselor. Table 1 below represents the educational requirement, classroom experience requirement, and examination requirement for school counselor licensure across the United States. Six states have a mandatory requirement of classroom experience before an applicant is eligible for licensure, 12 states and the District of Columbia have a requirement of classroom experience, but allow it to be satisfied in another way, and 32 states have no prior teaching requirement (American School Counselor Association: State Certification Requirements, n.d.). Thirty-four states have an examination requirement in order to qualify for school counselor licensure (American School Counselor Association: State Certification Requirements, n.d.). As early as 1931, states selected school counselors from educators that had teaching experience, but

changes in school counselor criteria to exclude prior teaching experience has been implemented because of the conclusion that it was an unfair and unwise certification criterion that excluded capable and qualified individuals (Baker, 1994). This requirement has not been adequately researched to determine that prior background teaching experience is unneeded or if teaching experience benefits school counselors in some way (Baker, 1994).

Table 1

School Counselor Licensure Requirements by State

State	Educational Requirement	Classroom Experience	Examination
Alabama	Masters	Two years	Yes
Alaska	Bachelors or higher	None	No
Arizona	Masters	Three years*	No
Arkansas	Masters	Two years*	Yes
California	48- Post baccalaureate hours	None	No
Colorado	Masters	None	Yes
Connecticut	Masters	30 Months*	Yes
Delaware	Masters	None	Yes
District of Columbia	Masters	Two years*	Yes
Florida	Masters	None	Yes
Georgia	Masters	None	Yes
Hawaii	Masters	None	Yes
Idaho	Masters	None	No
Illinois	Masters	None	Yes
Indiana	Masters	None	No
Iowa	Masters	None	No
Kansas	Masters	None**	Yes
Kentucky	Masters	One year*	No
Louisiana	Masters	None	Yes
Maine	Masters	None	Yes
Maryland	Masters	Two years*	Yes
Massachusetts	Masters	None	Yes
Michigan	Masters	None	Yes
Minnesota	Masters	None	No
Mississippi	Masters	One-year internship	Yes
Missouri	Masters	None	Yes
Montana	Masters	None	Yes
Nebraska	Masters	Two years	Yes
Nevada	Masters	None	Yes

New Hampshire	Masters	None	No
New Jersey	Masters	None	No
New Mexico	Masters	None	Yes
New York	Masters	None	No
North Carolina	Masters	None	Yes
North Dakota	Masters	Two years	No
Ohio	Masters	Two years*	Yes
Oklahoma	Masters	None	Yes
Oregon	Masters	Two years	Yes
Pennsylvania	Masters	None	Yes
Rhode Island	Masters	None	No
South Carolina	Masters	None	Yes
South Dakota	Masters	None	No
Tennessee	Masters	Two years*	Yes
Texas	Masters	Two years	Yes
Utah	Masters	Two years*	No
Vermont	Masters	None	Yes
Virginia	Masters	Two years*	No
Washington	Masters	None	Yes
West Virginia	Masters	None	Yes
Wisconsin	Masters	Two years*	No
Wyoming	Masters	Two years*	Yes

* Years teaching can be satisfied in another way.
** Teacher certificate required, but no teaching years required.

Purpose and Potential Significance of the Current Study

The purpose of this current quantitative study is to examine if there is a relationship between school counselors with prior teaching experience and school counselors that do not have prior teaching experience and their attitudes toward students with disabilities. The examination of background information was important to this study because it was hoped it would be possible to identify characteristics and factors contributing to significant differences in self-efficacy of school counselors. The first part of this study will measure if there is a significant difference in the relationship between school counselors with prior teaching experience and school counselors that do not have prior teaching experience and their self-efficacy. Self-efficacy is measured by five subscales identified in the School Counselor Self-Efficacy Scale. These five subscales

are: personal and social development; leadership and assessment; career and academic development; collaboration; and cultural acceptance. The second part of this study will measure if there is a significant difference between school counselors who have prior teaching experience and those who do not and their attitudes toward students with disabilities. Attitudes toward students with disabilities is measured by the Educators' Attitudes Toward Disabilities scale.

According to Stoep, Weiss, Kuo, Cheney, and Cohen (2003), it is estimated that over half of students who drop out of high school have a diagnosable psychiatric disorder. Understanding how school counselors support students with disabilities can help decrease these drop out numbers. Currently, the American School Counselor Association (ASCA) and Council on Accreditation of Counseling and Related Educational Programs (CACREP) do not require any specialized training for school counselors working with individuals with disabilities.

There is a gap in the literature between the relationship of background experience and school counselor self-efficacy. To date, most empirical research has focused on teaching students with disabilities, attitudes toward persons with disabilities, and counselor self-efficacy, neglecting to explore the relationship between background teaching experience and school counselor self-efficacy. The aim of this study is to contribute to the existing counseling literature.

Research Questions and Hypothesis

The researcher poses the following research questions with corresponding hypotheses below. Additional information on the rationale for these hypotheses is presented in Chapter Two.

1.) Is there a significant difference in the self-efficacy scores between counselors who have teaching experience and those who do not have teaching experience?

H_1: Counselors who have teaching experience will show significantly higher self-efficacy scores than counselors who do not have teaching experience as shown by the School Counselor Self-Efficacy Scale.

2.) Is there a significant difference between counselors who have prior teaching experience and those who do not and their attitudes toward students with disabilities?

H_2: Counselors who have teaching experience will show significantly higher scores than counselors who do not have teaching experience as shown by the Educators' Attitudes Toward Disability Scale.

3.) Is there a significant relationship between school counselor self-efficacy and attitudes toward individuals with disabilities?

H3: There is a significant relationship between school counselor self-efficacy and attitudes toward individuals with disabilities.

4.) Does school counselors' self-efficacy predict their attitude of working with students with disabilities, and if so, are years of experience as a teacher a mediator in this relationship?

H_4: There is a significant relationship between school counselors' self-efficacy and their attitudes toward working with students with disabilities and years of experience as a teacher is a significant mediator between this pathway.

Theoretical Framework

The theoretical model to be tested in the current study is derived from self-efficacy. Self-efficacy originates from Bandura's (1986) Social Cognitive Theory. Self-efficacy beliefs impact school counselor behavior. Self-efficacy is not an individual's confidence level in a given task, it is the perceived level of strength in the ability to complete said task (Bandura, 1995). The impact of school counselor behavior is dependent upon how strong their belief is in their own self-efficacy. Bandura (1995) found that students of teachers with higher teaching self-efficacy performed better than students of teachers with lower self-efficacy. Self-efficacy assessment has been a valuable addition to literature linking personal attributes with career performance and satisfaction (Bandura, 1995).

Methodology

The research question for this proposed study will be analyzed using inferential statistics: both correlational and between subjects testing. Research question one will be analyzed using a One-Way MANOVA and *t*-Tests of independent samples to determine if there are significant differences between counselors who have background teaching experience versus those who do not and school counselor self-efficacy when working with students with disabilities. The second question will be analyzed using an independent samples *t* test to determine if there is a significant difference between counselors with prior teaching experience and those who do not and school counselors' attitudes toward persons with disabilities. The third research question will use a Pearson r correlation to examine whether there is a significant relationship between a counselor's self-efficacy and attitudes toward working with students with disabilities. The fourth

research question will examine if there is a linear relationship between school counselor self-efficacy and school counselor attitudes toward working with students with disabilities. Both of these variables will be analyzed through the use of multiple linear regression and a Hayes model 4. Self-efficacy will be treated as the predictor variable and attitudes toward students with disabilities will be treated as the outcome variable. Years will be treated as a continuous variable and a mediating process approach will be used to explore years of experience as a school counselor as a mediating variable.

Limitations and Delimitations

Limitations and delimitations are inherent in the designs of research studies and it is the responsibility of the researcher to report these limitations to ensure the findings are valid (Price & Murnan, 2004). Though the current study provides insights about the relationship between prior background teaching experience and school counselor self-efficacy when working with students with disabilities, several limiting factors were present in this study. First, this researcher is a novice researcher who is inexperienced with conducting and analyzing data, which is a limitation in this study and a limitation found in the literature (Price & Murnan, 2004).

Incomplete data is a concern for this study. Data will be collected with purposeful sampling though ASCA listservs and newsletters, state school counselor associations, and Counselor Education and Supervision Network Listserv (CESNET-L). This passive data collection brings the limitation that there may not be enough responses to provide a large enough sample size for adequate power. Low survey return rates effect the sample size and a small sample size impacts the generalizability of the study. Survey measures were self-report, which creates the possibility that responses were catered

toward socially acceptable responses and are inaccurate due to the perception of the respondents. Another limitation of this study is that the Educators' Attitudes Toward Disabilities scale has only been validated using a relatively small sample size from Ontario, Canada which limits generalization (Freer, 2018). One delimitation of this study is that survey responses will be collected through an email list maintained by ASCA. This email list may not be completely representative of all school counselor population as it narrows possible participants, but as there is no complete national database with school counselor contact information, this is the most thorough way to collect data with participants mirroring the demographic's of ASCA's membership and practicing school counselors.

Key Terms

Definitions of key terms utilized throughout the current study have been provided below to facilitate clarity and decrease confusion.

Students with Disabilities

A student with a disability is an individual with "mental retardation, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities; and who, by reason thereof needs special education and related services" (IDEA 2004).

Professional School Counselor

The American School Counselor Association defines the role of the school counselor as a certified/licensed educator with a minimum of a master's degree in school counseling, making them uniquely qualified to address all students' academic, career, and

social/emotional development needs by designing, implementing, evaluating, and enhancing a comprehensive school counseling program that promotes and enhances student success (American School Counselor Association [ASCA], n.d.).

Self-Efficacy

Self-efficacy is the perceived belief of strength an individual has regarding their ability to perform a particular activity (Bandura, 1986, 1995).

School Counselor Self-Efficacy

School counselor self-efficacy is a counselor's belief in his or her capacity to effectively counsel a particular student or group (Larson & Daniels, 1998).

Years School Counselor Experience

For the purpose of this study, years of experience are the number of years that school counselors have worked with students in the school setting as a school counselor.

Years of Teaching experience

For the purpose of this study, years of experience are the number of years that school counselors have worked with students in the classroom as a teacher.

Prior Teaching Experience

This study defines prior teaching experience to be a school counselor that served as a full-time classroom teacher in a pre-kinder through 12th grade classroom.

Chapter II: Literature Review

Introduction

This chapter reviews the literature related to this study's research questions concerning school counselor self-efficacy and background experience as a classroom teacher when working with students with disabilities. This chapter first reviews the role of the school counselor and the ambiguity surrounding the expectations of the individuals fulfilling this role with the impacts of the National Model and the findings of the New Freedom Commission. Then the chapter reviews students with disabilities in the public education system and the services provided to them by school counselors while maintaining No Child Left Behind (NCLB) compliant. Next the chapter reviews self-efficacy as it relates to school counselors and the current view of the literature. The chapter then discusses school counselor training programs as it relates to ensuring proper preparation of counselors to work with students with disabilities. Finally, the chapter concludes with inferences for the current study.

The research collected and analyzed for this literature review consisted of qualitative and quantitative studies focused on fundamentals that impact school counselors. Numerous studies were examined related to the role, influence, and activities of the school counselor and the challenges and barriers school counselors encounter. The following topics emerged using individual key words or words with term connectors: school counselor, self-efficacy, training, background experience, students with disabilities. Collection of the literature occurred through ProQuest, ERIC (EBSCO), Google Scholar, and The George Washington University Library databases to identify full text, empirical and peer-reviewed articles from 1986 to 2019. The objective of this

study is to contribute to the existing literature on the effect of background experience on school counselor self-efficacy when working with students with disabilities.

Traditional Role of School Counselor

School counselors have existed for over 100 years (Cinotti, 2014). In that time, the role and responsibilities of the school counselor has undergone a multitude of changes adding to the confusion of what is expected and attainable for the school counselor.

School counselors are professional counselors working in the educational setting which blurs their role requiring them to act as both a counselor and an educator. This results in competing and conflicting role requirements (Cinotti, 2014). School counselors provide a wide and varied range of roles and responsibilities. For example, school counselors are expected to establish programs designed to meet the academic, social, and emotional needs of students and function as agents for change in school environments (Sumerlin & Littrell, 2011). In both public and private schools, school counselors are expected to advocate for students, increase academic self-efficacy, develop school programs that mediate the barriers to student education, ensure student graduation, assist in successful post-secondary career and/or educational transition, address and decrease the achievement gap in special populations, and esure equitable services to all students (Rust, 2016). Additionally, school counselors are expected to advocate for all students, be champions of social justice, act as social change agents, and counsel to empower marginalized populations (Mitcham, Portman, & Dean, 2009). All while continuing to provide academic and personal/social counseling services for students, families, and teachers, if needed (Rust, 2016; Sumerlin & Littrell, 2011). School counselors embrace

an identity in which they and the community view themselves as both educational leaders and mental health professionals (Leaf et al., 1996).

According to the American School Counselor Association (ASCA), school counselors are certified, or licensed professionals with at least a master's degree and uniquely trained to support all students' social/emotional, academic, and career needs by designing, implementing, evaluating, and enhancing comprehensive school counseling programs that promote and support student success (American School Counselor Association [ASCA], n.d.). School counselors work in a variety of school settings, elementary, middle, junior high, and high schools, in numerous capacities, such as direct supervisory, leadership, and counselor education positions (ASCA, n.d.).

In order for school counselors to be considered highly qualified in their role in 48 states and the District of Columbia they must have at least a master's degree and specialized training in the school counselor setting while under the supervision of a licensed school counselor. Additionally, school counselors are obligated to uphold the ethical and professional standards of ASCA and state licensing boards to promote the development of school counseling programs and student success. School counselors are guided by school counselor ethical guidelines. American School Counselor Association's (ASCA) ethical standards specifically address that professional school counselors must extend their services to include students with disabilities (Janson, Miller, & Rainey, 2007).

The role of the school counselor differs from school to school, district to district, and state to state. School counselors are not always sure of how to implement direct services within their working day given all the other responsibilities they have. Some of

this role confusion has existed concerning how to best manage the role of the school counselor (Cinotti, 2014). Hanchon and Fernald (2013), found two studies that reported school counselors spend their time on psychometric testing, report writing, and teacher consultation. Hanchon and Fernald (2013) also reported on two studies on the attitudes of counselors and school psychologists and their attitudes around spending more time with students and that providing direct services is of concern.

Counselors are narrowly used in special education and their role primarily focuses on eligibility determination. Hanchon and Fernald (2013) found counselors' professional roles are tied up with individual assessments, attending multidisciplinary meetings, and writing reports. Hanchon and Fernald (2013), found that counselors reported feeling that although they are providing services, those services only account for a small fraction of their day (Hanchon & Fernald, 2013). Participants further reported their time spent on assisting students with disabilities were geared toward identification. Two thirds of their time spent with students with disabilities were engaged in identification and placement of students into special education programs (Hanchon & Fernald, 2013). They are too limited to become involved with intervention service delivery, collaborating with teachers, and working with counselors to address the mental health needs of students. With the various legislative implementations and professional school counseling organizations' position statements, school counselors now serve a larger role relative to fostering successful inclusion of students with disabilities (Webb, Webb, & Fults-McMurtery, 2011).

Counselors are now expected to act as an educational leader and advocate for student success which has altered the traditional role of the school counselor creating

change at a systemic level and promoting access to opportunities for all students, general education and special education as well as children living below the poverty level and minority status students (Clark & Breman, 2009). Schools are a primary access point for students to receive services for mental health related issues (Hanchon & Fernald, 2013). School counselors are an important part of coordinating and delivering services designed to address students' mental health and psychological well-being needs.

All articles reviewed in this literature review provided suggested roles for counselors to give a guideline of what a good, high-quality comprehensive school counseling program should have to reach and support all students.

National Model for School Counselors

This lack of understanding the role of the school counselor sparked the American School Counselors Association (ASCA) creation of the National Model and its initial implementation in 2001 (American School Counselor Association [ASCA], 2003). ASCA's National Model is the most implemented model currently in the country and focuses on prioritizing the school counselor's role, student-to-counselor ratio, time management, and student activities to support all student needs with a comprehensive counseling program (Cinotti, 2014). This model has certainly helped to standardize the role of school counselors for many in the community (Rust, 2016).

The National Model has four components that drive the development and support of school counselor programs and all students: (a) *foundation*- establishes program focus with the creation of a vision statement and mission statement that align the school's mission and develop program goals that define how the vision and mission will be measured; (b) *management*- incorporation of organizational assessments and tools that

are concrete, clearly delineated, and reflective of the school's needs; (c) *delivery*- the direct and in-direct services school counselors provide to students, parents, school staff, and the community through prescribed school counseling curriculum, individual student planning, and responsive services; (d) *accountability*- school counselors analyze data to ensure school counseling programs are meeting the needs of the students they service. (ASCA, n.d.)

The National Model guides school personnel in creating and implementing comprehensive programs to assist students in meeting the competencies outlined in the standards (Forbes, 2004). The school counselor program is responsible for the whole development of the entire school community. Development of a comprehensive school counseling program that advances the cognitive, intellectual, and academic abilities, while supporting emotional, moral, social, spiritual, physical, and aesthetic growth as well of the whole school community. Entire school community encompasses teachers, administrators, parents, and staff in addition to every student. The foundation of a good comprehensive school counseling program rests on clearly defined goals, beliefs, a philosophy statement, and standards set for student success (Randick & Dermer, 2013).

Program personnel must develop a system to assist with resource management, while continuing to support student success and development (Randick & Dermer, 2013). School counselors must manage how they will identify student needs, service delivery of education and interventions, and the evaluation of outcomes.

Program personnel must then determine a successful delivery system for the activities, interventions, interactions, and methods needed to carry out the program's set

mission and goals (Randick & Dermer, 2013). Personnel must ensure that all the school community is supported.

Finally, school personnel must use evaluation data to assess the effectiveness of the program and ensure it is accountable for the desired outcomes laid out during the foundation of the program (Randick & Dermer, 2013). School personnel must continually reevaluate their program to ensure the program continues to meet the needs of the entire school community.

Students with Disabilities

Students with disabilities require extra supports. They may need additional assistance in the classroom, modified curriculum, or accommodations that allow for them to access the general education curriculum. Education looks different for each student with a disability because each student has an individualized education plan that is tailored to their individual strengths and weaknesses allowing them to participate in the educational setting that is the least restrictive environment for them. Special education services in schools vary based on the needs of the students assigned to that particular school. These supports can range from low-intensity services such as individualized support in the inclusive general education classroom to self-contained programs where students spend a majority of their day in special education classrooms with specialized support.

There are 6,904,232 students between the ages of three and 21 that are served under the Individuals with Disabilities Education Act (IDEA) in the United States (https://www2.ed.gov/programs/osepidea/618-data/static-tables/index.html). Historically, the number of students with disabilities served under IDEA has increased.

Between 2011 – 2012 and 2017 – 2018 school years, the number has risen from 6.4 to 7.0 million ("Children and Youth," 2019). National data estimates that 14 percent of the population of students in public school receive special education services under IDEA ("Children and Youth," 2019). Despite this growing need, only a fifth of all children who should receive mental health services actually do get these services (Burns et al., 1995; Goodman et al., 1997) and for those that do get these services access them in the school setting (Leaf et al., 1996; U.S. Department of Health and Human Services [USDHHS], 1999; Rones & Hoagwood, 2000). Children spend more than six hours a day, for at least 180 days a year at school; it is the perfect place for children to receive services.

The reviewed articles suggest there is a deficit within the research on counselors that work with students with disabilities. The research related to school counselors, mental health, and special education reflected various methodologies. Most studies sought to address attitudes or current roles of school counselors. Three articles focused on the direction general mental health in schools need to go in the future and did not report qualitative or quantitative data. Four utilized interviews, transcribed sessions, and coded the information collected during the interviews. Two articles reported both qualitative and quantitative data. One study presented a strategy for schools to utilize, but presented no data concerning its efficacy. One study explored the role of school psychologists in relation to special education and how they collaborate with counselors.

Elementary schools are the first line in identifying and treatment of academic and psychological problems. (Bradshaw, Buckley, & Ialongo, 2008) acknowledge that elementary schools provide the perfect opportunity for early identification and treatment of academic and mental health issues, but realize that little is known about the types and

symptoms being serviced and addressed in schools. Little is known about the types of mental health and educational needs that are being met by school counselors (Bradshaw et al., 2008).

Children that display externalizing behaviors are more likely to receive services associated with mental health. Disruptive behavior is the most common form of mental health problems experienced by school- age children (Kessler et al., 2005). Externalized behaviors are associated with reduced school attendance, poor academic performance (Davis, Kruczek, & Mcintosh, 2006), and are at a greater risk for educational difficulties and placement into special education programs (Wagner, 1995).

Literature review supports that school counselors work with teachers on assessment, testing, and behavior accommodations of students in special education, but lack a discussion of school counselor self-efficacy and training of working with students with disabilities. Literature focuses on the mental health needs of these students, but lacks focus on their academic and social/emotional needs. Most school-based counseling programs target children's behavior (Rones & Hoagwood, 2000).

A study by Mitcham et al. (2009) focused on the advocacy efforts of school counselors on behalf of students with disabilities. Here, Mitcham et al. explored how school counselors advocated for their students with disabilities by utilizing individual planning to create goals to meet their students' individual needs, including these students in schoolwide counseling programs as well as counseling activities for students with disabilities, monitoring student areas of concern, and putting together teams of professionals who were able to assist the counselors with meeting students' needs. School counselors may be important in meeting the personal and social needs of students

with disabilities. "School counselors could be instrumental in specific ways such as providing individual and group counseling, facilitating collaborative meetings with family members, and acting as a student advocate" (Mitcham et al., 2009, p. 475). This study neglected to mention if data about prior teaching experience of these school counselors had been collected.

No Child Left Behind

The passing of The Education for all Handicapped Children Act (EAHCA) in 1975 significantly impacted how students with disabilities in public schools in the United States are educated. One of the primary mandates for EAHCA was the implementation of free and appropriate public education (FAPE) and the least restrictive environment (LRE) for children with disabilities. More recent legislation The Individuals with Disabilities Education Improvement Act of 2004, The Individuals with Disabilities Education Act [IDEA] of 1990, and No Child Left Behind (NCLB) implemented in 2001has placed emphasis on the educators and school counselors who are direct service providers for children with disabilities to ensure successful inclusion of students with disabilities (Webb et al., 2011).

The No Child Left Behind Act of 2001 (NCLB) was in effect from 2002 – 2015. It replaced the Elementary and Secondary Education Act. The goal of NCLB was to provide disadvantaged students with equal educational opportunities (Lee, n.d.). It was created to hold schools accountable for how students learn and achieve. It aimed to have all students, including those serviced through special education, score within the proficient range on standardized testing. States were required to set goals for improvement called adequate yearly progress. Adequate yearly progress targets were

designed to push schools to improve services and instruction for struggling students, mainly children in special education.

The achievement gap that exists in the educational system in the United States is being addressed by the No Child Left Behind (NCLB) Act implemented in 2001. The implementation of NCLB has influenced the academic classroom, but has also had ramifications on the roles and responsibilities of school counselors. NCLB has been the main motivator for how school counseling programs are managed and carried out. The strict academic influence has allowed for social and emotional development to take a backseat to academic achievement. NCLB forces academic institutions to focus on building relationships with students' immediate and extended support systems in hopes that these relationships would greatly improve a student's performance in school.

Counseling Students with Disabilities

Outcomes for students with disabilities differ from their nondisabled peers. The prospect of a young adult who has graduated from the special education system being able to find and keep employment, enroll in a postsecondary education program, or live independently has become more common. Even with the progress students with disabilities have made, there are still disparities between them and their nondisabled peers. Employment is, in many cases, less than 50 percent for these students up to eight years after high school (Morgan & Riesen, 2016). For those that do work, wages are lower than their peers. On average they make nearly four dollars an hour less than former general education students (Mader & Butrymowicz, 2017). Their total hours worked are less than full time and they receive fewer insurance and other benefit options (Morgan & Riesen, 2016).

Transition from school to adulthood for youth with disabilities can be one of the most multifaceted and challenging of all educational endeavors. Young adults are going from an environment where the day is dictated to them to an environment where they are in charge of their day. Students leave a highly structured environment with individualized education programs and set goals that clearly state what they should learn and how they will be supported by staff to a postsecondary environment with little to no structure or support (Mader & Butrymowicz, 2017). Although there has been an increase in enrollment in postsecondary schools for students with disabilities, completion rates remain low. There has been a rise to 67 percent of students with disabilities enrolling in postsecondary schools, but only 40 percent of these students successfully complete their program (Newman, Madaus, Lalor, & Javitz, 2019). Students with disabilities that enroll in a four-year university do not graduate in the same time frame as their nondisabled peers. A third of students with disabilities who enroll in a four-year college or university graduate within eight years (Mader & Butrymowicz, 2017). Many blame the public education system for inadequately preparing students with disabilities beyond high school. Mader & Butrymowicz (2017), found students with disabilities lack certain skills that equate to student success in higher education. Too often, students with disabilities were taught only what was required of their individualized education plans and skills such as how to study, time management, and self-advocacy were neglected. Students and parents both feel that faculty and staff either underestimate or overestimate their abilities and therefore were neglected in being adequately prepared for transition from high school.

School Counselor Training Programs

Although many counselor education programs address the importance of working with students with disabilities, none offer courses that require the development of strategies and skills to work with this unique population. Counselor educators agree there is a great importance of building knowledge and skills in vital curricular areas such as human development and learning, testing and measurement, research methods, theories of counseling, ethics of counseling, special education, and multicultural counseling (Cimsir & Carney, 2017).

According to the Council for Accreditation of Counseling and Related Educational Programs (CACREP), the leading counselor education accrediting body, 2016 standards do not require CACREP accredited programs in school counseling to necessitate students complete a class in special education or disability awareness (Council for Accreditation of Counseling and Related Educational Programs, n.d.).

One study reviewed reported that counselors received opportunities to provide direct services during their practicum and internship experiences (Hanchon & Fernald, 2013), but they neglected to define how much was exclusively devoted to students with disabilities. This same study asked counselors to rank how prepared they perceived themselves when working with students with disabilities and found "approximately 40% of respondents perceived themselves as less than "sufficiently" prepared" (Hanchon & Fernald, 2013, p. 658).

Cimsir and Carney (2017), explored school counselor training and its relationship with the attitudes and perceptions of preparedness in providing services to students with disabilities. They found that counselor educators support receiving specialized training in special education, but there is not adequate implementation because this area is based on

the competency for teachers. School counselor training lacks adequate preparation for counselors to work with students with disabilities. Cimsir and Carney (2017) examined counselors' feelings and attitudes when working with students with disabilities and discovered negative attitudes can lower the quality of services provided to students with disabilities and these negative attitudes lead to counselors spending less time with these students. Furthermore, it appears that school counselors receive, at best, inconsistent training concerning students with disabilities, some participants indicated not having received any training at all prior to working in schools (Cimsir & Carney, 2017). Cismir and Carney (2017), highlight the importance of specialized classes related to disability for school counselors as well as practical experiences to gain competency in working with students with disabilities.

Another study, (Bradshaw et al., 2008), examined current school counselors' experiences with students with disabilities. Participating school counselors reported contributing in IEP meetings, 504 meetings, multidisciplinary team meetings, consulting with teachers and/or parents of students with disabilities, and providing individual counseling to a student with a disability. The participants of this study reported participating in these experiences even though it was not a program requirement.

Despite school counselors becoming more involved with special education by serving on teams that assist with disability identification and implementation of services (Studer & Quigney, 2004), counselor education programs are not adequately training future school counselors to deal with the changing roles and responsibilities included in servicing students with special needs (Hall, 2015). Hall (2015), urges in an effort to produce more confident and competent school counselors, it is imperative for school

counselor education programs to collaboratively revise, standardize, and redefine program requirements.

School Counselor Self-Efficacy

Self-efficacy has been linked to positive career performance. Self-efficacy has been shown to be an important aspect of successful teaching and counseling (Bandura, 1995). Self-efficacy, defined as beliefs about one's own ability to successfully perform a given behavior, involves "a generative capability in which component cognitive, social, and behavioral skills must be organized into integrated courses of action to serve innumerable purposes" (Bandura, 1986, p. 122). Self-efficacy beliefs influence how people think, feel, motivate themselves, and act in many aspects of their lives. Self-efficacy plays a significant role in successful teaching, counseling, and coping with change. Counselor self-efficacy beliefs are the primary casual factor in carrying out effective counseling. Individuals that have a stronger sense of self-efficacy, set higher goals for themselves and display stronger commitment, enthusiasm, determination, and resiliency toward achieving their goals (Bandura, 1986).

One study identified the lack of literature on school counselor efficacy because no scale existed to measure this. Bodenhorn and Skaggs (2005), developed the school counselor self-efficacy scale to address this deficit in the literature. Bodenhorn and Skaggs (2005), found the knowledge base and research are scarce regarding how self-efficacy affects professional school counselors both in their training and their performance.

One study reported finding a positive relationship between counselor self-efficacy and counselor performance. Higher self-efficacy translates to individuals viewing their

anxiety as a beneficial challenge as opposed to detrimental to their success, set realistic and moderately challenging goals, and to have thoughts that are self-aiding (Larson & Daniels, 1998). Counselor self-efficacy is indispensable in counselor training and supervision because counselor self-efficacy beliefs are the fundamental source of effective counselor skills. Focusing on counselor self-efficacy during counselor training can facilitate training. This study stressed the importance of examining counselor self-efficacy to determine the deficits and effectiveness of counselor training programs.

Inferences for Current Study

The number of students with disabilities is not projected to decrease in the future (Parpia, 2019). The need to ensure students with disabilities are properly supported by school counselors with evidence-based research is increasingly important. Although there has been some improvement with the incorporation of the findings from the New Freedom Commission, more is needed to safeguard how school counselors support students with disabilities.

Cimsir and Carney (2017), recommend a change to the design and delivery of school counselor training programs to include training and opportunities to gain experience working with students with disabilities. In addition, providing more courses and of higher quality that specialize in a comprehensive focus on students with disabilities will help the attitudes and perceptions of lack of preparedness on the part of school counselors. Similarly, Hall (2015), recommends implementing more consistent school counselor education programs across institutions that include coursework and experiences in special education that are in alignment with the standards of ASCA, ethical and legal obligations, and daily counselor roles.

Chapter III: Methodology

The purpose of the current study is to examine if background teaching experience is associated with positive school counselor self-efficacy when working with students with disabilities. All data collected was obtained by self-report measures and collected through an internet survey of school counselors. Direct relationships between self-efficacy, background experience, and training programs were assessed. The contribution of specific demographic variables to include years of experience, years of experience in the classroom, and training model were analyzed. Chapter three includes research questions, participant descriptions, measures, research methods and design, and a chapter summary.

Research Questions and Hypothesis

The following are the primary research questions and hypotheses for the current study:

5.) Is there a significant difference in the self-efficacy scores between counselors who have teaching experience and those who do not have teaching experience?

H_1: Counselors who have teaching experience will show significantly higher self-efficacy scores than counselors who do not have teaching experience as shown by the School Counselor Self-Efficacy Scale.

6.) Is there a significant difference between counselors who have prior teaching experience and those who do not and their attitudes toward students with disabilities?

H_2: Counselors who have teaching experience will show significantly higher scores than counselors who do not have teaching experience as shown by the Educators' Attitudes Toward Disability Scale.

7.) Is there a significant relationship between school counselor self-efficacy and attitudes toward individuals with disabilities?

H3: There is a significant relationship between school counselor self-efficacy and attitudes toward individuals with disabilities.

8.) Does school counselors' self-efficacy predict their attitude of working with students with disabilities, and if so, are years of experience as a teacher a mediator in this relationship?

H_4: There is a significant relationship between school counselors' self-efficacy and their attitudes toward working with students with disabilities and years of experience as a teacher is a significant mediator between this pathway.

Research Methods and Design

Participants

Sample

The population for this study consisted of school counselors who agreed to have their email addresses included in a national database maintained by ASCA, have their email addresses included in a statewide database maintained by the differing state school counselor associations, or are subscribers to CESNET listerv. Participants are school counselors with at least one year of experience. The sample for this study was predominantly female (96.25%) and Caucasian (76.67%), which is consistent throughout

school counseling research. National demographics has school counselors as 85 percent female and 15 percent male and 81 percent white, 14 percent African American, 3 percent Asian, and 1 percent American Indian or Alaska Native (American School Counselor Association [ASCA], 2018).

Response Rate

Participants of this quantitative study are school counselors that have had at least one year of experience as a school counselor in the United States of America. After receiving permission from the American School Counselor Association, a recruitment flyer was posted in their newsletter. A recruitment listing was also posted in ASCA's online community forum. To increase participation, subsequent recruitment listings were sent again at two weeks, four weeks, and two days before the survey was closed. After receiving permission from CESNET-L, a recruitment flyer was posted on their listserv. Subsequent recruitment listings were sent out again at two weeks, four weeks, and two days before the survey was closed out. Originally 387 responses were recorded by *Qualtrics.* One hundred thirty-four surveys were incomplete, and 13 survey participants did not answer one or both of the control questions correctly. These individuals were removed from the sample. Consequently, this made the number of usable surveys 240.

Professional Demographic Characteristics

Professional demographic characteristics of the participants are presented in Table 2. School counselors who did not teach represented over half (60.42%) of the sample while counselors with 3-5 years of teaching experience is the most represented category in this demographic (12.08%). School counselors with 3-5 years of experience were the

most represented category in this demographic (29.58%). The sample was comprised primarily of school counselors employed in a public-school setting (44.58%).

The most common level of degree earned by participants was a master's degree (95.83%). The most common degree held by participants was a master's in school counseling and guidance (56.67%). The majority of participants (82.08%) reported school counseling as a specialization area of their degree. School counselors were asked to identify their credentials. School counselors often hold more than one credential. A majority (89.17%) reported having a school counselor license while half (50.83%) reported only having a school counselor license. The data below is presented with each participant in each category. Participants were asked to identify how they earned their school counselor license. A majority of the sample earned the credential through a traditional master's program (92.08%).

Table 2

Professional Demographic Characteristics

Variable		N = 240	Percent
Teaching Experience			
	Did not teach	145	60.42%
	1 – 2 years	17	7.08%
	3 – 5 years	29	12.1%
	6 – 10 years	23	9.57%
	11 – 15 years	14	5.83%
	16 – 20 years	9	3.75%
	More than 20 years	3	1.25%
Counseling Experience			
	Less than one	11	4.58%
	1 – 2 years	46	19.17%
	3 – 5 years	71	29.58%
	6 – 10 years	39	16.25%
	11 – 15 years	28	11.67%
	16 – 20 years	25	10.42%
	More than 20	20	8.33%
Setting			

	Charter	9	3.75%
	Public School	107	44.60%
	Rural	50	20.82%
	Rural and Public School	29	12.08%
	Urban	20	8.33%
	Urban and Charter	3	1.25%
	Urban, Charter, and Public School	1	.42%
	Urban and Public	19	7.92%
	Urban, Rural, and Public	2	.83%
Degree Level			
	Bachelor's Degree	2	.83%
	Master's Degree	231	96.25%
	Ph.D.	7	2.92%
Degree Earned			
	School Counseling & Guidance and Administration & Leadership	7	2.92%
	School Counseling & Guidance and Counselor Education & Supervision	3	1.25%
	School Counseling & Guidance and Curriculum and Administration & Leadership	1	.42%
	School Counseling & Guidance and Other	12	5%
	School Counseling & Guidance and Psychology	12	5%
	School Counseling & Guidance and Psychology and Social Work	1	.42%
	School Counseling & Guidance and Rehabilitation Counseling	1	.42%
	School Counseling & Guidance and Social Work	1	.42%
	School Counseling & Guidance and Social Work and Administration & Leadership	1	.42%
	Social Work	7	2.92%
	Other	17	7.08%
	School Counseling & Guidance and Clinical Mental Health	19	7.92%
	School Counseling & Guidance and Clinical Mental Health and Curriculum	1	.42%
	School Counseling & Guidance and Clinical Mental Health and Counselor Education and Supervision	1	.42%
	School Counseling & Guidance and Clinical Mental Health and Rehabilitation Counseling	1	.42%

	Counselor Education and Supervision	7	2.92%
	Psychology	4	1.67%
	School Counseling & Guidance	136	56.62%
	Clinical Mental Health	7	2.92%
	Administration and Leadership	1	.42%
Credentials			
	State Board Certified Professional Counseling License	17	7.08%
	School Counselor License	122	50.83%
	School Counselor License and State Board Certified Professional Counseling License	23	9.59 %
	Teacher License	8	3.33%
	Teacher License and State Board Certified Professional Counseling License	1	.42%
	Teacher License and School Counselor License	57	23.75%
	Teacher License and School Counselor License and State Board Certified Professional Counseling License	12	5%
Route to Licensure			
	Alternative certification with a masters in another subject	19	7.92%
	Traditional master's program	221	92.08%

Personal Demographic Characteristics

As shown in Table 3, the sample consisted primarily of females (96.25%) similar to findings from other studies conducted from school counselor participants (CITE), while ASCA demographics report 85% of their members are female (American School Counselor Association [ASCA], 2018). Notably, 76.67% of the participants reported that they were Caucasian, 7.08% reported that they were African American, 1.25% reported that they were Asian, 10% reported that they were Latino, .42% reported that they were Native American, 1.67% reported they were other or unknow, and 1.25% reported that they preferred not to respond. The participant's ages ranged from 24 to 71. The mean

age for this study is 39 and the SD is 9.948. Most participants were between the ages 30 and 39 (32.92%) with ages 40 to 49 close behind (30.83%).

Table 3

Personal Demographic Characteristics of Participants

Variable		*N* = 240	Percent
Gender			
	Female	231	96.25%
	Male	9	3.75%
Race			
	Caucasian	184	76.67%
	African American	17	7.08%
	Asian	7	2.91%
	Latino	24	10%
	Native American	1	.42%
	Other/Unknown	4	1.67%
	Prefer Not to Respond	3	1.25%
Age			
	24	3	1.25%
	25	5	2.08%
	26	5	2.08%
	27	10	4.17%
	28	11	4.58%
	29	13	5.42%
	30	9	3.75%
	31	6	2.5%
	32	7	2.92%
	33	12	5%
	34	14	5.81%
	35	4	1.67%
	36	12	5%
	37	7	2.92%
	38	2	.83%
	39	6	2.5%
	40	6	2.5%
	41	9	3.75%
	42	9	3.75%
	43	7	2.92%
	44	13	5.42%
	45	11	4.58%
	46	3	1.25%
	47	7	2.92%
	48	4	1.67%
	49	5	2.08%

50	3	1.25%
51	5	2.08%
52	4	1.67%
53	4	1.67%
54	3	1.25%
55	1	.42%
56	4	1.67%
57	1	.42%
58	5	2.08%
59	1	.42%
60	5	2.08%
63	1	.42%
65	2	.83%
71	1	.42%

State Demographic Characteristics

As shown in Table 4, the sample consisted of participants with experience in 41 different states in the United States, two United States Territories, Puerto Rico and Northern Mariana Islands, and four mis entered zip codes. The most participants (8.75%) came from Texas while the second most participants came from New York (8.33%). Figure 1 shows the zip code location disbursement of respondents.

Table 4

State Demographic Characteristics

Variable		*N* = 240	Percent
State			
	Alabama	1	.42%
	Arkansas	4	1.67%
	Arizona	3	1.25%
	California	12	5.00%
	Colorado	5	2.08%
	Delaware	1	.42%
	Florida	10	4.17%
	Georgia	11	4.58%
	Hawaii	1	.42%
	Iowa	3	1.25%
	Idaho	1	.42%
	Illinois	5	2.08%
	Indiana	3	1.25%

	Kansas	3	1.25%
	Kentucky	2	.83%
	Louisiana	2	.83%
	Massachusetts	8	3.33%
	Maryland	14	5.83%
	Michigan	4	1.67%
	Minnesota	1	.42%
	Missouri	5	2.08%
	Mississippi	3	1.25%
	North Carolina	10	4.17%
	North Dakota	1	.42%
	Nebraska	1	.42%
	New Hampshire	3	1.25%
	New Jersey	7	2.92%
	Nevada	1	.42%
	New York	20	8.3%
	Ohio	14	5.82%
	Oklahoma	3	1.25%
	Oregon	1	.42%
	Pennsylvania	12	5.00%
	Tennessee	4	1.67%
	Texas	21	8.75%
	Utah	1	.42%
	Virginia	10	4.17%
	Vermont	5	2.08%
	Washington	7	2.92%
	Wyoming	7	2.92%
	West Virginia	4	1.67%
United States Territories			
	Northern Mariana Islands	1	.42%
	Puerto Rico	1	.42%
	Mis entered zip code	4	1.67%

Note: Zip codes entered incorrectly, no way to validate mis entered zip codes.

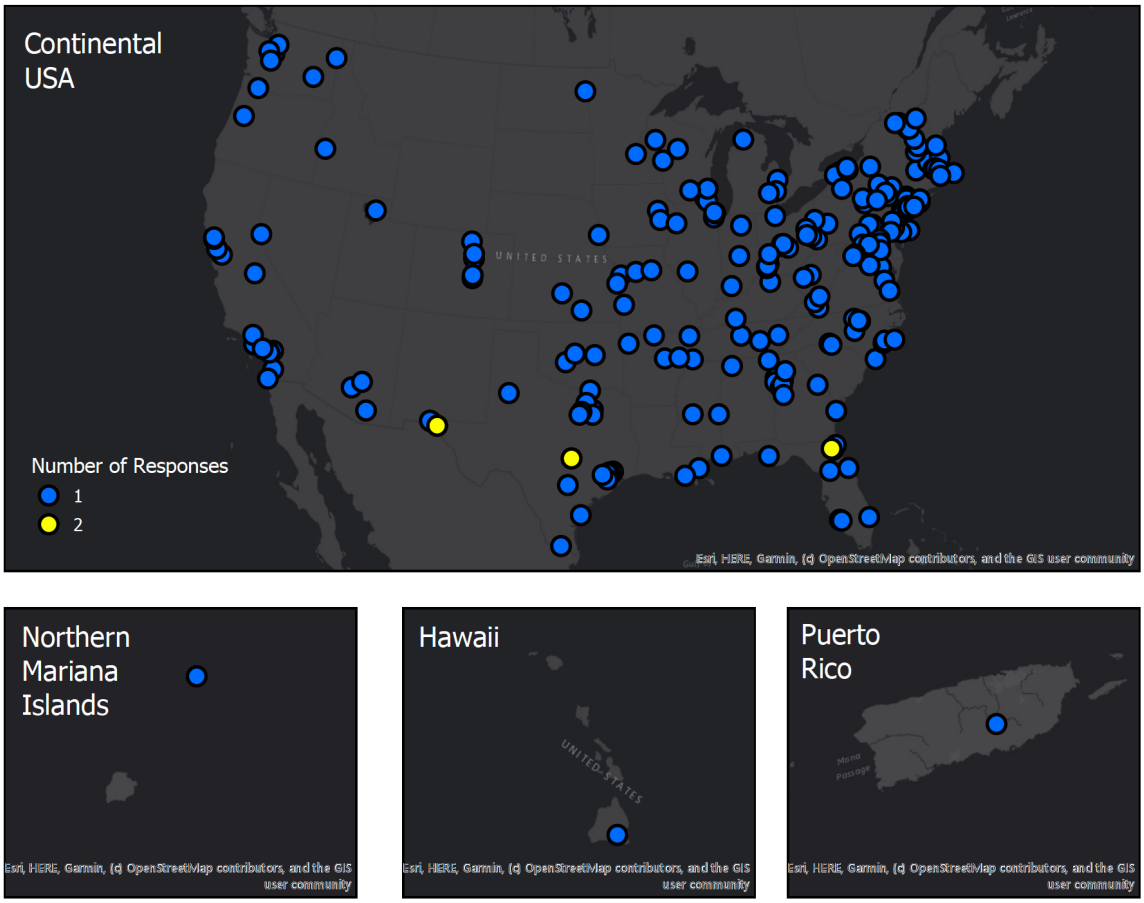

Figure 1. Zip code location disbursement.

Measures

This study utilized two instruments in order to address the abovementioned research questions: The School Counselor Self-Efficacy Scale (SCSE; Bodenhorn & Skaggs, 2005), and The Educators' Attitudes Toward Disability Scale (EADS; (Freer, 2018). The SCSE was not changed from its original form. Three items were modified on the EADS to meet the school counselor perspective. Permission for use was obtained from authors of both instruments. A detailed description of each instrument as well as its psychometric properties is discussed below.

Demographic Questionnaire

The Demographic Questionnaire was designed to collect information relevant to this study and consisted of 17 items. Data was collected requesting specific information about participant age, gender, ethnicity, education level, recruitment strategy, degree held, location, licensure and certification, years of experience as a school counselor, years of experience as a teacher, classroom grades taught, classroom subjects taught, type of school servicing (e.g. private/public), number of schools serviced, grade levels serviced, and Title I status. Additionally, information regarding how school counselors became school counselors with regards to their training programs was collected.

Reliability

Reliability refers to an instruments ability to be duplicated with results being trustworthy across multiple environments (Creswell & Creswell, 2018). Both instruments are widely used and accepted throughout the social sciences and have been cited multiple times. Typically, reliability for standardized instruments include, but are not limited to: test-retest, internal consistency (i.e., Cronbach's alpha), and equivalent form reliability (Lodico, Spaulding, & Voegtle, 2006).

School Counselor Self-Efficacy Scale

The School Counselor Self-Efficacy Scale (SCSE; Bodenhorn & Skaggs, 2005) was developed to measure school counselor self-efficacy. Prior to the development of this scale, scales widely used to measure self-efficacy focused only on individual and career counseling (Bodenhorn & Skaggs, 2005). This scale was developed to assess the effectiveness of the education process in school counseling programs, as well as provide insight into the relative success of the practicing school counselor (Bodenhorn & Skaggs, 2005). The School Counselor Self-Efficacy Scale is a 43-item scale where the school

counselor indicates their confidence level in their ability to perform the activity listed. The SCSE uses a five-point Likert Scale to measure participant responses (i.e. not confident, slightly confident, moderately confident, generally confident, and highly confident) of five subscales: personal and social development; leadership and assessment; career and academic development; collaboration; and cultural acceptance. A composite mean is calculated to demonstrate the overall level of self-efficacy, along with mean subscale scores, while this study used sum scores to calculate overall self-efficacy.

The SCSE was developed over four individual studies to ensure reliability and validity are met by the scale: initial item development, item analysis, validity study, and factor analysis. Item development was established through a professional review by five content experts using criteria from ASCA's National Standards and CACREP career expectations of school counselors. This team of experts worked to establish content validity through deleting, refining, and adding additional items. The second study utilized the updated scale and demographic information. This version was distributed to practicing school counselors. Participant responses were analyzed to determine reliability, omission, discrimination, and group differences (Bodenhorn & Skaggs, 2005). The samples were regarded as demographically representative of school counselors. An Analysis of Variance (ANOVA) was utilized to determine if group differences were present among the respondents. Analysis for different racial/cultural groups was conducted, including individual groups as well as combined groupings. Analysis revealed that the items were highly reliable with a .95 alpha coefficient and that racial groupings were found to have no significant difference (Bodenhorn & Skaggs, 2005). The alpha coefficient for the five subscales was not reported. The alpha coefficient for

the current study is .96. The alpha coefficient of the subscales for the current study is: personal and social development (.82); leadership and assessment (.83); career and academic development (.81); collaboration (.82); and cultural acceptance (.74).

The third study collected data from master's students in their final year in a counseling program and compared the SCSE scale with other preexisting instruments to examine construct validity. Construct validity was found through correlation of the SCSE and these preexisting instruments that measure self-efficacy with coefficients ranging from .16 to .49. The fourth study was to determine factor structure for the item responses. This was conducted through factor analysis (principal component analysis). Retaining items with eigenvalues greater than 1, five distinct factors were identified. The alpha coefficient for the subscales in the fourth study were as follows: personal and social development (.91); leadership and assessment (.90); career and academic development (.85); collaboration (.87); and cultural acceptance (.72) (Bodenhorn & Skaggs, 2005).

The Educators' Attitudes Toward Disability Scale

The EADS was developed to measure educators' attitudes toward persons with disabilities. This instrument has a history of being modified to meet different professional areas. For example, the EADS was adapted from the Social Workers' Attitudes Toward Disability scale (SWADS). Each statement in the SWADS was reviewed and keywords were changed to reflect an educator's context. For the purpose of this study, three items were modified from the EADS to meet the school counselor perspective (i.e. classroom/office, teaching/counseling). Of the original 27 items on the SWADS, six items were removed because they did not correlate well with the other items on the scale. The Educators' Attitudes Toward Disability Scale (EADS) was developed

based on the social model of disability. The social model of disability states that disability is a result of societal barriers rather than a deficiency within a person that needs to be fixed (Freer, 2018).

The EADS is a 21-item unidimensional scale where the respondent is asked to rate the degree of agreement for each statement presented on a six-point Likert scale (where 1 = I disagree very much, 2 = I pretty much disagree, 3 = I disagree a little, 4 = I agree a little, 5 = I pretty much agree, 6 = I agree very much). Three major statistics were run in order to test the validity and reliability of the EADS. A Confirmatory Factorial Analysis (CFA), Cronbach's alpha, and a Pearson's Correlation. A CFA was run to determine if the three proposed subscales were distinct categories. The initial CFA did not support a multidimensional model, but it did support a unidimensional model. Cronbach's alpha was calculated to determine internal reliability. Cronbach's alpha was calculated for both the overall EADS. The Cronbach's alpha for all 21 items was above .70 ($\alpha = .89$), indicating a strong internal reliability. The alpha coefficient for the current study is .80. A Pearson's correlation between the EADS and the Attitudes Toward Disabled Persons (ATDP-B) tested the scale's convergent validity. The EADS and ATDP-B were moderately correlated ($r = .49$, $p = \leq .01$). This suggests that the EADS and ATDP-B are measuring a similar construct of attitudes toward disability.

Study Procedures

According to Fowler (2014), one of the most important decisions a researcher can make is how the data will be collected. The following study procedures were used by the researcher. Prior to collecting any data, the researcher obtained Institutional Review Board (IRB) approval from The George Washington University. Second, the researcher

reached out to possible participants using purposeful sampling though ASCA listservs and newsletters, and CESNET. The researcher combined the two instruments and the demographic questions by using The George Washington University's online survey software *Qualtrics*. *Qualtrics* allows for a researcher to create a user-friendly survey that is of minimal cost to the researcher. The researcher included a GWU informed consent form at the start of the survey as well as a confidentiality statement and reminder that their participation was voluntary, and their responses are anonymous. Recruitment emails were sent out three times to ensure multiple contacts to ensure the most exposure to the survey. To maintain a moderate effect size at an alpha level of .07, a minimum of 185 participants must be recruited. There was a total of 240 participants recruited for this survey. As shown in Table 5, most participants were recruited through their state school counselor association (51.25%) and the least amount of participants were recruited through CESNET (8.33%).

Table 5

Recruitment Data

Recruitment Location	*N* = 240	Percent
State School Counselor Association	123	51.25%
ASCA Newsletter	97	40.42%
CESNET	20	8.33%

Data Collection and Analysis

The research questions for this study are quantitative in nature and intended to explain possible relationships among variables. All data was analyzed using SPSS version 25. Prior to analysis, the data was organized and cleaned. Missing data was addressed through listwise deletion.

Research question one focused on the differences between the self-efficacy scores of counselors who have teaching experience and those who do not have teaching experience. The independent variable (IV) is prior teaching experience and is dichotomous in nature with two levels: prior teaching experience and no prior teaching experience. The dependent variable (DV) is continuous in nature with five subscores. Subscores were treated as continuous data. In order to control Type I error, a One-Way MANOVA was performed to examine the mean between group difference for the IV by the five DVs. This type of analysis is the most appropriate analysis when examining between group differences for one IV and multiple DVs (Field, 2010). A *t*-Test of independent samples was also used to explored differences between prior teaching experience and no prior teaching experience for the total self-efficacy score.

Research question two focused on the differences between counselors who have prior teaching experiences and those who do not and their attitudes toward students with disabilities. The independent variable (IV) is prior teaching experience and is dichotomous in nature with two levels: prior teaching experience and no prior teaching experience. The dependent variable, the educators' attitudes toward disability (DV) is continuous in nature. An independent samples *t* test was performed to examine the mean between group differences for the IV by DVs. This type of analysis is the most appropriate analysis when examining between group differences for one IV and DV (Field, 2010).

Research question three focused on the relationship between school counselor self-efficacy of counselors and counselor attitude of working with students with disabilities. For this research question both variables were treated as continuous data and

a Pearson *r* correlation was performed in order to determine the strength and direction of this relationship. A Pearson *r* correlation is the most appropriate analysis for this type of data (Field, 2010).

Research question four first examined if there is a linear relationship between counselor self-efficacy and counselor attitudes towards working with students with disabilities. Both of these variables were continuous in nature and were analyzed through the use of a multiple linear regression and a Hayes Process macro (model 4). Hayes model 4 is a statistical analysis that is used in a situation where the effect of the independent variable on the dependent variable can best be explained using a third variable, a mediator. The independent variable and the mediating variable are a cause for the dependent variable. Self-efficacy was treated as the predictor variable and attitudes toward students with disabilities were treated as the outcome variable. In addition, the teaching experience was tested as a potential mediator of the link between self-efficacy and attitudes toward working with students with disabilities using the Hayes Process macro (Hayes, 2013). In order to explore years of experience as a counselor as a mediating variable, years was treated as a continuous variable and analyzed through a mediating process approach (Hayes, 2013).

Ethical Assurances

This researcher completed Institutional Review Board training and obtained approval through The George Washington University's Institutional Review Board (IRB). Upon approval, this researcher sought out participants and provided the informed consent with research information and confidentiality procedures. Participants were notified that participation is voluntary and they could choose to quit at any time of the

data collection process. Identifying information of the participants were removed. SPSS was used to analyze and organize collected data. All data collected is stored on a password protected computer that is stored at this researcher's private residence. Digital data files will be stored for three years.

Summary

Chapter three described the research questions and hypothesis, participants, measures, data collection procedures, and data analysis. This study explores school counselor self-efficacy between counselors that have background teaching experience and counselors that do not have background teaching experience when working with students with disabilities. This study also explores the attitudes of counselors with background teaching experience when working with students with disabilities to counselor attitudes who do not have prior background teaching experience. A One-Way MANOVA was conducted to determine if there is a significant difference in the self-efficacy of counselors with prior background teaching experience to counselors with no prior background teaching experience when working with students with disabilities. An independent samples *t*-test was performed to examine if there are significant differences between school counselors with and without teaching experience and their attitudes toward students with disabilities. A Pearson *r* correlation was conducted to determine the strength and direction of this relationship between school counselor self-efficacy and school counselor perception of working with students with disabilities. A multiple regression was used to determine the degree to which teaching experience predicts school counselor self-efficacy. Self-efficacy will be treated as the predictor variable and attitudes toward students with disabilities will be treated as the outcome variable.

Additionally, a Hayes model 4 was also conducted using self-efficacy as a predictor variable and attitudes toward students with disabilities as the outcome variable with years of experience as a teacher as a mediating variable to determine if years teaching is a variable that impacts attitudes toward students with disabilities. Results and data analyses will be presented in Chapter Four.

Chapter IV: Results

The purpose of this quantitative study was to examine the self-efficacy of school counselors when working with students with disabilities. Descriptive statistics, one-way MANOVA, independent *t*-test, Pearson *r* correlation, a multiple linear regression, and mediator analysis were conducted and are presented in this chapter. This chapter will discuss the results of the study, which are organized by research questions, their corresponding hypothesis, and their summarized findings.

Descriptive Statistics for Sample

The descriptive statistics of the SCSE scale had a mean score of 179.36 (SD = 19.796) with a range of 43 – 215 and the EADS scale had a mean of 116.25 (SD = 8.926) with a range of 21 – 126. The descriptive statistics of the five subscales: personal and social development (1); leadership and assessment (2); career and academic development (3); collaboration (4); and cultural acceptance (5) can be found in Table 1. There are no prior studies published with mean outcomes for the SCSE scale to determine if these means are similar to previous studies. The mean for the EADS is 5.22. In comparison to the mean found in table 1, this study's mean is higher than that of the instrument when it was developed. The mean for the SCSE is 4.2. In comparison to the mean found in table 6, this study's mean is lower than that of the instrument when it was developed.

Table 6

Descriptive Statistics

Scale	Mean	Standard Deviation	Kurtosis	Skew	Range of Scores
Total EADS Score	116.25	8.926	3.111	-1.6	75 - 126
Total SCSE Scale	179.36	19.796	1.010	-.666	105 - 215

Personal and Social Development	50.71	5.582	1.066	-.753	32 - 60
Leadership and Assessment	37.22	4.777	.621	-.593	20 - 45
Career and Academic Development	31.06	3.327	1.565	-1.118	18 – 35
Collaboration	43.87	5.959	.378	-.418	22 – 55
Cultural Acceptance	16.50	2.504	-.242	-.543	9 - 20

Research Questions and Analysis of Data

Self-Efficacy

Q1: Is there a significant difference in the self-efficacy scores between counselors who have teaching experience and those who do not have teaching experience?

Teaching experience was considered the independent variable with two levels (teaching experience/no teaching experience). Self-efficacy was the dependent variable and consisted of five subscales: personal and social development; leadership and assessment; career and academic development; collaboration; and cultural acceptance. In order to control for Type 1 Error a One-Way MANOVA was conducted to determine if there was a significant difference between self-efficacy and teaching experience. Examination of the MANOVA revealed that there was no significant difference between school counselor self-efficacy and teaching experience as measured by the SCSE scale ($F(5,234 = .852$, $p = .514$; Wilks' Lambda = .982; partial eta squared = .018). Because the multivariate test is not significant, further examination of univariate testing was not warranted. An independent samples *t*-test was conducted to determine the relationship between counselors who have prior teaching experience and those who do not have prior teaching experience and their self-efficacy scores. The independent samples t-test did not

find a statistically significant relationship between the scores of school counselors who have taught (M = 181.07; SD = 18.012) and those who have not taught (M = 181.47; SD = 17.615) and their self-efficacy scores (t(224), -.164, p = .870) (see Table 7).

Table 7

Multivariate Tests[a]

Effect		Value	*F*	Hypothesis *df*	Error df	Sig.	Partial Eta Squared
Intercept	Pillai's Trace	.990	4464.685[b]	5.000	234.000	.000	.990
	Wilks'Lambda	.010	4464.685[b]	5.000	234.000	.000	.990
	Hotelling's Trace	95.399	4464.685[b]	5.000	234.000	.000	.990
	Roy's Largest Root	95.399	4464.685[b]	5.000	234.000	.000	.990
Teacher	Pillai's Trace	.018	.852[b]	5.000	234.000	.514	.018
	Wilks' Trace	.982	.852[b]	5.000	234.000	.514	.018
	Hotelling's Trace	.018	.852[b]	5.000	234.000	.514	.018
	Roy's Largest Root	.018	.852[b]	5.000	234.000	.514	.018

a. Design: Intercept + teacher
b. Exact statistic

Attitudes Toward Students with Disabilities

Q2: Is there a significant difference between counselors who have prior teaching experience and those who do not and their attitudes toward students with disabilities?

To answer research question two, participants were asked to complete the EADS in order to determine if a difference exists between counselors who have prior teaching experience and those who do not and their attitudes toward individuals with disabilities. An independent samples t-test was conducted to determine the relationship between counselors who have prior teaching experience and those who do not have prior teaching

experience and their attitudes toward individuals with disabilities. The independent samples *t*-test did not find a statistically significant relationship between counselors who have prior teaching experience (M = 116.75; SD = 8.99) and those who do not have prior teaching experience (M = 115.94; SD = 8.88) and their attitudes toward individuals with disabilities ($t(238)$, -.683, p = .495).

Relationship between School Counselor Self-Efficacy and Attitudes Toward Individuals with Disabilities

Q3: Is there a significant relationship between school counselor self-efficacy and attitudes toward individuals with disabilities?

A Pearson *r* correlation was conducted to determine the strength and direction of a relationship between school counselor self-efficacy and attitudes toward individuals with disabilities. The Pearson *r* showed that the EADS and Total SCSE and all five sub scores for the SCSE scale and the total score of the SCSE scale were moderately positively correlated. All were significant at $p < .01$ alpha level, indicating a possible predictive relationship (see Table 8).

Table 8

Correlations

	N	1	2	3	4	5	6	7
1. Total EADS	240	---						
2. Personal and Social Development	240	.352**	---					
3. Leadership and Assessment	240	.315**	.806**	---				
4. Career and Academic Development	240	.320**	.715**	.763**	---			
5. Collaboration	240	.355**	.715**	.800**	.737**	---		

6. Cultural Acceptance	240	.306**	.663**	.710**	.657**	.751**	---	
7. Total SCSE	240	.375**	.896**	.927**	.859**	.915**	.794**	---

** $p < .01$

Self-Efficacy Predict Attitudes of Working with Students with Disabilities

Q4: Does school counselors' self-efficacy predict their attitude of working with students with disabilities, and if so, are years of experience as a schoolteacher a mediator in this relationship?

Research question four was answered using the SCSE scale and the EADS scale with years of experience gathered from the demographic questionnaire. A multiple linear regression was conducted using self-efficacy as a predictor variable and attitudes toward students with disabilities as the outcome variable. Descriptive statistics are presented in Table 9 and correlations in Table 10. An examination of the model summary table revealed an adjusted R^2 of .142 (see Table 11).

A Hayes model 4 was also conducted using self-efficacy as a predictor variable and attitudes toward students with disabilities as the outcome variable with years of experience as a teacher as a mediating variable. In order to determine if years of experience was indeed a mediator, indirect effects of X and Y were examined. BootLLCI were -.0093 and BootULCI were .0039, thus the relationship was not significant for being a mediator.

Table 9

Descriptive Statistics

	Mean	Std. Deviation	*N*
Total EADS	116.25	8.926	240
Total SCSE	179.36	19.796	240
Years Taught	1.0958	1.59601	240

Table 10

Correlations

	N	1	2	3
1. Total EADS	240	---	---	---
2. Total SCSE	240	.375	---	---
3. Years Taught	240	.011	-.070	---

Table 11

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	R Square Change	Change Statistics F Change	df1	df2
1	.377[a]	.142	.135	8.304	.142	19.573	2	237

Table 12

Coefficients[a]

Model		Unstandardized Coefficients B	Unstandardized Coefficients Std. Error	Standardized Coefficients Beta	t	Sig.
1	(Constant)	85.510	4.947		17.285	.000
	Total SCSE	.170	.027	.377	6.254	.000
	Years Taught	.210	.037	.037	.621	.535

a. Dependent Variable: Total EADS

Summary

The descriptive characteristics of the participants and the results of this quantitative survey study were presented in this chapter. A One-Way MANOVA determined that a relationship is not present between school counselor self-efficacy and prior teaching experience. An independent samples *t*-test determined there is no relationship between counselors who have prior teaching experience and those who do not have prior teaching experience and their self-efficacy scores. An independent samples *t*-test determined there is no relationship between counselors who have prior

teaching experience and those who do not have prior teaching experience and their attitudes toward students with disabilities. A Pearson *r* correlation did show that the EADS and all five sub scores of the SCSE scale and the total score of the SCSE scale were moderately correlated. A multiple linear regression conducted found that the SCSE scale was a significant predictor of EADS. Years of teaching experience was also found to be a significant predictor, more specifically those who had taught 11 to 15 years. Chapter five includes a discussion of these results as well as recommendations for research and practice.

Chapter V: Discussion

This quantitative survey research was conducted to determine the influence of prior teaching experience on school counselor self-efficacy when working with students with disabilities. The sample consisted of 240 participants who have at least one year of school counselor experience. Participants completed the SCSE scale and the EADS through The George Washington University's *Qualtrics*, a secure website for instrument creation and data collection. A One-Way MANOVA and an independent t-test was used to respond to research question one. An independent t-test was conducted to answer question two. Research question three was answered using a Pearson r correlation. Finally, research question four was addressed using a multiple linear regression and a Hayes Process macro (model 4).

This chapter begins with an interpretation of the analysis of the quantitative survey results presented in chapter four. Then, limitations of the study are discussed. Finally, implications for school counselors and counselor education programs as well as suggestions for future research are introduced.

Discussion of Findings

Research Question One: School Counselor Self-Efficacy

Results analyzing the first research question suggested that there is not a statistically significant difference in the self-efficacy scores between counselors who have prior teaching experience and those who do not have prior teaching experience. This finding aligns with Baker's (1994), findings against suppositions that school counselors with previous teaching experience are superior to school counselors that do not have previous teaching experience. Self-efficacy scores on subscales also showed no

relationship between school counselors with prior teaching experience and school counselors with no prior teaching experience and school counselor self-efficacy.

Shaw (1972) identified three factors influencing modern education: teaching, administration, and guidance. Guidance is the newest factor as it was introduced well after teaching and administration had been established. In the beginning, school counselors came from the ranks of teachers. They engaged in a "selection through tryout" where their qualifications were evaluated (Baker, 1994). Baker (1994) states that in early school counselor work, it was desirable to have practice working with students in groups as that was much of the school counselor role at the time. Thus began the basis and bias for the need to have teacher experience prior to becoming a school counselor, but Baker (1994) states this is an antiquated approach to licensure standards as teacher experience is no longer a positive contributing factor to school counselor success, but in fact can hold back individuals that would otherwise be qualified candidates.

In the 1960s and 1970s, counselor educators began questioning the validity of having teacher experience as a requirement for school counselor licensure (Baker, 1994). In three separate studies, it was found that counselors with and without experience did not score statistically significantly different when asked about their experiences on several broad dimensions: acceptance in schools, understanding of school procedures and policies, and ability to perform significant guidance activities (Peterson & Brown, 1968). Baker (1994), states that the research does not support assumptions that counselors with teaching experience are more remarkable to those school counselors who do not have teaching experience, and the current study suggests that modern school counselors do not

benefit from teaching experience in terms of self-ratings of school counselor self-efficacy.

Research Question Two: Attitudes Toward Students with Disabilities

Research question two explored the relationship between school counselors who have prior teaching experience and school counselors who do not have prior teaching experience and their attitudes toward students with disabilities. This study did not find a significant relationship between school counselors who had prior teaching experience and school counselors who did not have prior teaching experience and their attitudes toward students with disabilities. A possible explanation for this lack of relationship may be the role that practicum, internship, and curriculum play on the development of the school counselor. It could be postulated that this specific experience in school counselor training is adequate in providing school counselors with and without prior teaching experience a sense of confidence when working with this population.

The school counselors that participated in this study reported very positive attitudes toward students with disabilities. Due to a ceiling effect resulting from the small range of values within the instrument and the simplicity of the instrument's questions (Dillman, Smyth, & Christian, 2014), it is difficult to discern the differences between groups in their attitudes toward students with disabilities at the top of the scale. More sophisticated methods of assessing attitudes toward students with disabilities may be needed in the future, or it may be that school counselors do in fact have very positive attitudes toward working with students with disabilities.

Research Question Three: Relationship between School Counselor Self-Efficacy and Attitudes Toward Individuals with Disabilities

While the professional literature focusing on school counselor self-efficacy is limited (Bodenhorn & Skaggs, 2005) and there is a clear gap in the literature focusing on school counselor self-efficacy and attitudes toward students with disabilities, this study did find a relationship between school counselor self-efficacy and attitudes toward students with disabilities. The current study provided support for the hypothesis that there is a moderate positive relationship between school counselor self-efficacy and attitudes toward individuals with disabilities. School counselors with higher levels of self-efficacy in their work also held more positive beliefs toward students with disabilities.

One reason for the relationship found in this study could be based on Bandura's (1986) theory of self-efficacy and what he characterized as a contributing factor to the influence of self-efficacy, mastery experience. Mastery experiences are based on past successes or failures. These mastery experiences of school counselors could be responsible for the moderate relationship found between school counselor self-efficacy and attitudes toward students with disabilities. It could be suggested that the longer school counselors worked with this population, the more experience they gained, learned what worked and what did not, and their confidence to continue working with the population continued to grow. The continued exposure to students with disabilities allowed for school counselors to grow their self-efficacy when working with them. Support for such a contention might be found if years of experience as a counselor were related to attitudes toward working with students with disabilities, but that was not the case in the current study ($r = .12, >.05$)

Research Question Four: Self-Efficacy Predict Attitudes Toward Students with Disabilities

The current study analyzed if school counselor self-efficacy is a predictor to their attitudes toward working with students with disabilities and if years of experience as a teacher was a mediator in this relationship. Results indicated that school counselor self-efficacy is a predictor of their attitudes toward working with students with disabilities although years of experience was not found to be a mediator in this relationship. This could suggest school counselor's attitudes toward students with disabilities are formed in a manner that is independent of a teaching career. For example, experiences with a childhood friend or family member with disabilities could more likely be a contributing factor toward their comfort level when working with students with disabilities. Additionally, while not a research question in the current study, years working as a school counselor was used as a potential mediating variable for the link between self-efficacy and attitudes toward students with disabilities and no mediating relationship was found for this variable either. Though interestingly, counselors with more years of counseling experience reported higher self-efficacy.

Strengths & Limitations

There are many strengths to the current study. First, the survey research is reliable because surveys are standardized in that the questions are phrased in the exact same way for every participant. This consistency offers a reliable method of inquiry (Dillman et al., 2014). Another strength of this study is the geographic distribution. The participating population was an even distribution from states that require teaching experience for licensure; ten percent of the sample had the prior teaching experience

qualification which is consistent with the percentage of states that require teaching experience for licensure. A strength of this study is the age distribution of participants. Participants ranged in ages from 24 to 71. Almost every age in between is represented in the population sample providing adequate coverage of all ages of practicing school counselors. Participants also varied widely in terms of their experience as a school counselor.

As with any type of research, there are limitations to consider. First, the answers to this survey were self-reported and therefore open to interpretation by the participant. School counselors who completed the survey may be biased toward their own profession and/or their individual counselor experiences. These differences, among school counselors may result in varying beliefs about self-efficacy and attitudes toward students with disabilities. Participants may have differed in how they interpreted the questions on the survey.

Another limitation is related to response bias, specifically social desirability, which must be considered. Social desirability is the propensity to provide answers that make one look good; it is frequently motivated by the desire to make a good impression or avoid a negative one (Dillman et al., 2014). It is possible that the participating school counselors engaged in socially desirable responding to appear to have more positive attitudes toward students with disabilities or possess a higher self-efficacy than is factual. In this particular study, school counselors may feel ashamed or even embarrassed for having less than desirable feelings towards students with disabilities. Indeed, scores for both self-efficacy and attitudes toward students with disabilities were very high,

suggesting that social desirability may be at play limiting the validity of the findings and the ability to detect hypothesized effects.

This study of 240 participants, had merely a handful of male participants (9). This data does not accurately reflect ASCA's demographics for school counselors in the United States which is 15% male (American School Counselor Association [ASCA], 2018), which limits the generalizability of the study's findings. Furthermore, ASCA member ethnic demographics differ from the demographics of the participants of this study. There is a clear lack of minority representation among the participants in this study, which again limit the generalizability of the study's findings. Future studies should maximize recruitment of these underrepresented groups, that is, a greater range of gender and minority participation would strengthen the findings and maximize the generalizability to the greater school counselor population.

Data for this study was collected in the midst of the 2020 Covid-19 Pandemic. Most educators made the shift from in-person learning to virtual environments. With the increased hours spent on the screen, many school counselors may have felt too burnt-out to devote any additional time to answering survey questions. This could have contributed to the amount of school counselors that were willing to participate. Data for this study was also collected shortly after the death of George Floyd. His death may have impacted the amount of minority participants in this study. As people at the time were concerned about their safety and wellbeing, participating in surveys that do not directly support their needs at the current time was not a priority. This event could have impacted the amount of minority participants at the time.

Implications for Current Practice

Findings from this quantitative study, may serve school counselor educators as they prepare and deliver preparation programs in terms of curriculum and intern and practicum experiences that are robust in working with students with disabilities. The role of the school counselor is to promote the whole development of all school community members (Mitcham, Agahe Portman, & Dean, 2009), which includes students with disabilities. Unfortunately, currently CACREP standards neglect to address students with disabilities specifically. In turn, universities do not offer a class specific to counseling students with disabilities. While school counselors may have very positive attitudes toward working with students with disabilities their skill level for working with such students is unknown. School counselors would benefit in specialized training tailored to counseling students with disabilities at the formative educational level. The educational experiences could be hands on experience in special education classrooms or internship experiences at specialty schools that primarily focus on supporting students with disabilities. Diagnosis and treatment planning are typically one class in most school counseling training programs (Council for Accreditation of Counseling and Related Educational Programs, n.d.). School counselors may benefit from separating diagnosis and treatment planning into two classes to have one class that focuses on diagnostic criteria and one that focuses on treatment planning and understanding the execution of the treatment plan in a meaningful way for students with disabilities.

For students attending school counselor programs they must attend both a practicum and an internship. Each student must meet a minimum number of hours in specific areas in order to graduate and be eligible for licensure in most states. Although students must have hours completed in specific areas, specialized training in working

with students with disabilities is not addressed. It would be beneficial for students to have hours dedicated to this population in order to develop their efficacy in working with them. It would also be pertinent to have student input in their practicum and internship experiences to tailor the experience to their specific needs and deficits.

Currently, the licensing process for school counselors is controlled at the state level. Each state has their own requirements for licensure. This makes for vastly different requirements across states. A person may be considered highly qualified in one state and ineligible for licensure in another state. The profession would benefit from national licensure standards. A national licensure board would regulate all states' requirements making these requirements the same across the United States. With this continuity, CACREP and universities would be able to have similar curricula that allow for school counselors to be eligible for licensure and considered highly qualified in every state. This would also provide the opportunity to see where deficits in training programs are because, theoretically, all counselors would lack in the same areas. This would also allow for CACREP, licensing board, and universities to work cohesively to train school counselors at the highest efficacy possible.

Recommendations for Future Research

Though the present study found that school counseling self-efficacy was positively associated with attitudes toward working with students with disabilities the findings should be considered preliminary as further research investigating school counselor self-efficacy while working with students with disabilities is necessary. Future research opportunities exist to examine the specific qualities within the teaching experience that influence school counselor self-efficacy. Results from these future

endeavors could be used to inform school counselor preparation programs and school counselor licensure requirements to ensure that programs are appropriately preparing school counselors for the experiences they will encounter in practice and that licensure requirements line up with professional expectations. In addition, research is needed that examines skill of efficacy that school counselors report in terms of working with students with disabilities. It is one thing to have positive attitudes toward working with such students, but many school counselors may feel ill-prepared to do that work.

A topic for future research could be why school counselor self-efficacy is associated with attitudes toward students with disabilities. For example, quantitative research could select school counselors who have low and high self-efficacy and examine their attitudes toward students with disabilities. Additionally, a focus on school counselor behaviors might also be informative rather than simply relying on self-reports of attitudes and self-efficacy. Additionally, implicit attitude testing toward students with disabilities might be used to get at more unconscious bias against students with disabilities. It is imperative to understand attitudes, stereotypes and other hidden biases that influence awareness, judgement, and actions toward students with disabilities with the goal to improve school counselors' skills when working with this population.

Qualitative inquiry into these topics might also shed light on the lived experiences of school counselors, their self-efficacy, their attitudes toward students with disabilities, and their behaviors toward students with disabilities. School counselor self-efficacy is understudied. Further studies in school counselor self-efficacy may yield further findings as to how and what influences self-efficacy. Research looking at school counselor self-efficacy in working with students with disabilities is also needed. With a population that

is projected to increase in size over time (*Report on new freedom commission*, 2003), it is imperative to ensure the needs of this growing population is adequately supported.

Additionally, the current study focuses on school counselor self-efficacy and its relation to attitudes when working with students with disabilities. It is important for future studies to utilize other measures. This would ensure reliability and validity across instruments and resolve any issues related to politically correct responses. Future studies would benefit from a mixed-methods approach thus inquiring about the context in which participants have worked with students with disabilities. This will enable researchers to dive deeper into the experiences and issues school counselors face when working with students with disabilities. This will also allow for the voices of school counselors to be heard and discover their story on how they got to where they are and give researches the knowledge on their prior experiences to becoming a school counselor, especially in regard to their efficacy to work with students with disabilities. With the push to implement ASCA's National Model, future research would benefit from inquiring about the level of program implementation and participants' comfort with the program and how it impacts their work with students with disabilities.

Future research would benefit from an instrument that is tailored toward attitudes toward students with specific disabilities. A school counselor may report positive self-efficacy when working with students with mild learning disabilities, but more negative self-efficacy when working with students with more severe and profound disabilities. Having an instrument that examines attitudes toward students with disabilities within each disability could provide more insight on what is lacking to prepare school counselors for practice in schools. Finally, it would be interesting to look at school

counselor self-efficacy working with students with disabilities. School counselors may hold positive attitudes toward working with students with disabilities but may not feel that they are prepared or efficacious in doing that work.

Summary and Conclusion

The current study demonstrated that positive school counselor self-efficacy is related to school counselor attitudes toward students with disabilities. These results are consistent with previous research findings that highlights the importance of positive school counselor self-efficacy (Larson & Daniels, 1998). Years of teaching was not associated with school counselor self-efficacy, yet the influence of prior teaching experiences on school counselor self-efficacy should continue to be explored because teaching experience is still required in many states to be certified as a school counselor (American School Counselor Association: State Certification Requirements, n.d.).

The current study had many strengths and limitations. It made use of a varied and large sample that included comprehensive data on multiple dimensions (Dillman et al., 2014) and analyzed information across many data points. Additionally, varied statistical analyses were utilized to investigate the self-efficacy between school counselors who taught and did not teach, attitudes of school counselors who taught and did not teach toward individuals with disabilities, the relationship between school counselor self-efficacy and attitudes toward students with disabilities, and if school counselor self-efficacy is a predictor of attitudes toward individuals with disabilities with years of teaching as a mediator for the relationship. Research was limited by data that was self-reported.

Overall, the current study's findings suggest that there is a moderate relationship between school counselor self-efficacy and attitudes toward individuals with disabilities. The researcher recommends training school counselors with specialized training and curriculum tailored to counseling students with disabilities that include robust practicum and internship experiences that include working with students with disabilities. The current research makes several recommendations for future research to support and strengthen its findings that positive self-efficacy promotes positive attitudes toward individuals with disabilities. Future research tailored to the current study's recommendations may enable school counselors to provide students with disabilities that support their diverse needs in schools. School counselors can more effectively support individuals with disabilities by continuing to expand their knowledge and understanding of this diverse population.

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APPENDIX A

School Counselor Concept Scale

Below is a list of activities representing many school counselor responsibilities. Indicate your confidence in your current ability to perform each activity by circling the appropriate answer next to each item according to the scale defined below. Please answer each item based on one current school, and based on how you feel now, not on your anticipated (or previous) ability or school(s). Remember, this is not a test and there are no right answers.

Use the following scale:

1 = not confident,
2 = slightly confident,
3 = moderately confident,
4 = generally confident,
5 = highly confident.

Please circle the number that best represents your response for each item.

1. Advocate for integration of student academic, career, and personal development into the mission of my school.	1	2	3	4	5
2. Recognize situations that impact (both negatively and positively) student learning and achievement.	1	2	3	4	5
3. Analyze data to identify patterns of achievement and behavior that contribute to school success	1	2	3	4	5
4. Advocate for myself as a professional school counselor and articulate the purposes and goals of school counseling.	1	2	3	4	5
5. Develop measurable outcomes for a school counseling program which would demonstrate accountability.	1	2	3	4	5
6. Consult and collaborate with teachers, staff, administrators and parents to promote student success.	1	2	3	4	5
7. Establish rapport with a student for individual counseling.	1	2	3	4	5
8. Function successfully as a small group leader.	1	2	3	4	5
9. Effectively deliver suitable parts of the school counseling program through large group meetings such as in classrooms.	1	2	3	4	5
10. Conduct interventions with parents, guardians and families in order to resolve problems that impact students' effectiveness and success.	1	2	3	4	5
11. Teach students how to apply time and task management skills.	1	2	3	4	5
12. Foster understanding of the relationship between learning and work.	1	2	3	4	5
13. Offer appropriate explanations to students, parents and teachers of how learning styles affect school performance.	1	2	3	4	5

14. Deliver age-appropriate programs through which students acquire the skills needed to investigate the world of work.	1	2	3	4	5
15. Implement a program which enables all students to make informed career decisions.	1	2	3	4	5
16. Teach students to apply problem-solving skills toward their academic, personal and career success.	1	2	3	4	5
17. Evaluate commercially prepared material designed for school counseling to establish their relevance to my school population.	1	2	3	4	5
18. Model and teach conflict resolution skills.	1	2	3	4	5

19. Ensure a safe environment for all students in my school.	1	2	3	4	5
20. Change situations in which an individual or group treats others in a disrespectful or harassing manner.	1	2	3	4	5
21. Teach students to use effective communication skills with peers, faculty, employers, family, etc.	1	2	3	4	5
22. Follow ethical and legal obligations designed for school counselors.	1	2	3	4	5
23. Guide students in techniques to cope with peer pressure.	1	2	3	4	5
24. Adjust my communication style appropriately to the age and developmental levels of various students.	1	2	3	4	5
25. Incorporate students' developmental stages in establishing and conducting the school counseling program.	1	2	3	4	5
26. I can find some way of connecting and communicating with any student in my school.	1	2	3	4	5
27. Teach, develop and/or support students' coping mechanisms for dealing with crises in their lives – e.g., peer suicide, parent's death, abuse, etc.	1	2	3	4	5
28. Counsel effectively with students and families from different social/economic statuses.	1	2	3	4	5
29. Understand the viewpoints and experiences of students and parents who are from a different cultural background than myself.	1	2	3	4	5
30. Help teachers improve their effectiveness with students.	1	2	3	4	5
31. Discuss issues of sexuality and sexual orientation in an age appropriate manner with students.	1	2	3	4	5
32. Speak in front of large groups such as faculty or parent meetings.	1	2	3	4	5
33. Use technology designed to support student successes and progress through the educational process.	1	2	3	4	5
34. Communicate in writing with staff, parents, and the external community.	1	2	3	4	5
35. Help students identify and attain attitudes, behaviors, and skills which lead to successful learning.	1	2	3	4	5

36. Select and implement applicable strategies to assess school-wide issues.	1 2 3 4 5
37. Promote the use of counseling and guidance activities by the total school community to enhance a positive school climate.	1 2 3 4 5
38. Develop school improvement plans based on interpreting school-wide assessment results.	1 2 3 4 5
39. Identify aptitude, achievement, interest, values, and personality appraisal resources appropriate for specified situations and populations.	1 2 3 4 5
40. Implement a preventive approach to student problems.	1 2 3 4 5
41. Lead school-wide initiatives which focus on ensuring a positive learning environment.	1 2 3 4 5
42. Consult with external community agencies which provide support services for our students.	1 2 3 4 5
43. Provide resources and guidance to school population in times of crisis.	1 2 3 4 5

APPENDIX B

Educators' Attitudes Toward Disability Scale (EADS)

The scale below provides a number of statements to which there are no right or wrong answers. Please indicate the extent to which you agree or disagree with these statements by circling a number, 1 to 6 (where 1 = I *disagree very much, 2= I pretty much disagree 3= I disagree a little, 4= I agree a little, 5, I pretty much agree, and 6= I agree very much*). Based on your experience or, if you have relatively little experience, as you believe you would feel, think, or act in a given situation please try to choose the item that best reflects your opinion.

For the purpose of this survey, *disability* is defined, in accordance with provincial legislation as (AODA, 2005):

(a) any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical co-ordination, blindness or visual impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device,

(b) a condition of mental impairment or a developmental disability,
(c) a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,

(d) a mental disorder, or

(e) an injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997 ("handicap").

1) It is our profession's responsibility to teach students with disabilities.
2) Education of students with disabilities helps these students to reach their fullest potential
3) I have respect for my students who have disabilities
4) I can learn a lot from my students with disabilities.
5) Teaching students with disabilities takes up a disproportionate amount of time I could use to help other students. (R)
6) Understanding my students with disabilities are (or will be) very important to me, as an educator.
7) My working with students who have disabilities is unfair to my other students, as it requires additional time and resources. (R)
8) When a student with a disability is in my classroom, I feel uneasy. (R)
9) I often feel irritated when I must make time-consuming accommodations for a student with a disability. (R)
10) I feel uncomfortable communicating with students who have disabilities. (R)

11) I feel proud to advocate for accommodations for students with disabilities.
12) I feel empathetic toward my students with disabilities
13) I feel nervous when teaching students who have disabilities. (R)
14) When presented with an opportunity to work with a student who has disabilities, I feel hopeful that I can provide meaningful education.
15) I advocate for my students with disabilities to be included within the classroom.
16) I don't hesitate to make accommodations for my students with disabilities who need them.
17) I welcome students with disabilities into my classroom.
18) If working within a school or organization that was inaccessible to students with disabilities I would bring this to the attention of those in power.
19) I avoid working with students with disabilities whenever possible. (R)
20) I actively seek opportunities to assist students with disabilities.
21) When I am too busy with other students, I don't want to take the time to provide special accommodations for my students with disabilities. (R)

Scoring Instructions: Following reversal for indicated items (R), all item responses may be averaged to create a global attitude toward disability score. Higher scores indicate more positive attitudes toward disability. Scores are out of 126 (21 items x 6 point Likert scale).

APPENDIX C

REVISED Educators' Attitudes Toward Disability Scale (EADS)

The scale below provides a number of statements to which there are no right or wrong answers. Please indicate the extent to which you agree or disagree with these statements by circling a number, 1 to 6 (where 1 = I *disagree very much, 2= I pretty much disagree 3= I disagree a little, 4= I agree a little, 5, I pretty much agree, and 6= I agree very much*). Based on your experience or, if you have relatively little experience, as you believe you would feel, think, or act in a given situation please try to choose the item that best reflects your opinion.

For the purpose of this survey, *disability* is defined, in accordance with provincial legislation as (AODA, 2005):

(a) any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical co-ordination, blindness or visual impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device,

(b) a condition of mental impairment or a developmental disability,
(c) a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,

(d) a mental disorder, or

(e) an injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997 ("handicap").

1) It is our profession's responsibility to teach students with disabilities.
2) Counseling of students with disabilities helps these students to reach their fullest potential
3) I have respect for my students who have disabilities
4) I can learn a lot from my students with disabilities.
5) Working with students with disabilities takes up a disproportionate amount of time I could use to help other students. (R)
6) Understanding my students with disabilities are (or will be) very important to me, as a school counselor.
7) My working with students who have disabilities is unfair to my other students, as it requires additional time and resources. (R)
8) When a student with a disability is in my office, I feel uneasy. (R)
9) I often feel irritated when I must make time-consuming accommodations for a student with a disability. (R)
10) I feel uncomfortable communicating with students who have disabilities. (R)

11) I feel proud to advocate for accommodations for students with disabilities.
12) I feel empathetic toward my students with disabilities
13) I feel nervous when working with students who have disabilities. (R)
14) When presented with an opportunity to work with a student who has disabilities, I feel hopeful that I can provide meaningful counseling services.
15) I advocate for my students with disabilities to be included within the school counseling program.
16) I don't hesitate to make accommodations for my students with disabilities who need them.
17) I welcome students with disabilities into my school counseling program.
18) If working within a school or organization that was inaccessible to students with disabilities I would bring this to the attention of those in power.
19) I avoid working with students with disabilities whenever possible. (R)
20) I actively seek opportunities to assist students with disabilities.
21) When I am too busy with other students, I don't want to take the time to provide special accommodations for my students with disabilities. (R)

Scoring Instructions: Following reversal for indicated items (R), all item responses may be averaged to create a global attitude toward disability score. Higher scores indicate more positive attitudes toward disability. Scores are out of 126 (21 items x 6 point Likert scale).

APPENDIX D

Demographic Questionnaire

1.) What is your gender?
- o Male
- o Female

2.) Age

_____

3.) Please specify your ethnicity.
- o Caucasian
- o African-American
- o Latino or Hispanic
- o Asian
- o Native American
- o Native Hawaiian
- o Other/Unknown
- o Prefer not to say

4.) Where are you located (Zip Code):

_____

5.) What is your education level?
- o Bachelor's Degree
- o Master's Degree
- o Ph.D. or Higher

6.) What degree do you hold:

_____

7.) How were you recruited?
- o ASCA Newsletter
- o CESNET
- o State Counselor Association
- o Facebook

8.) What licensure do you hold?
- o Teacher licensure
- o School Counselor Licensure
- o Professional Counselor Licensure (state board certified)
- o Certified Rehabilitation Counselor
- o Registered Play Therapist

9.) Years of Experience as a School Counselor
- o Less than 1
- o 1-2
- o 3 - 5
- o 6-10
- o 11-15
- o 16-20
- o More than 20

10.) Years of Experience as a Teacher

- I did not teach
- Less than 1
- 1-2
- 3 - 5
- 6-10
- 11-15
- 16-20
- More than 20

11.) Classroom grades taught (Select all that apply):

- I did not teach
- Pre-Kinder
- Kindergarten
- First Grade
- Second Grade
- Third Grade
- Fourth Grade
- Fifth Grade
- Sixth Grade
- Seventh Grade
- Eighth Grade
- Ninth Grade
- Tenth Grade
- Eleventh Grade
- Twelfth Grade

12.) Classroom Subjects Taught (select all that apply):

- I did not teach.
- Science
- Social Studies
- English Language Arts
- Mathematics
- Special Education
- Art
- Band
- Orchestra
- Elective Course: _____

13.) Type of School Currently Servicing:

- Urban
- Rural
- Charter
- Public School

14.) Current Grade Levels Servicing (Select all that apply):

- Pre-Kinder
- Kindergarten
- First Grade
- Second Grade
- Third Grade

- Fourth Grade
- Fifth Grade
- Sixth Grade
- Seventh Grade
- Eighth Grade
- Ninth Grade
- Tenth Grade
- Eleventh Grade
- Twelfth Grade

15.) Is your school Title One Status:

- Yes
- No

16.) Number of Schools Servicing:

17.) What was your route to school counselor licensure?

- Traditional master's program
- Alternative certification with a masters in another subject

APPENDIX E

May 21, 2019

Chelse R. Malone
The George Washington University
Graduate School of Education and Human Development
2136 G Street NW
Washington, DC 20052

Dear Sir/Madam:

I am a doctoral student from The George Washington University writing my dissertation titled *School Counselor Self-Efficacy When Supporting Students with Disabilities,* under the direction of my dissertation committee chaired by Dr. Richard Lanthier, who can be reached at 202-994-1608 or lanthier@gwu.edu. The George Washington IRB Committee Chair, Prema Chaudhari, can be contacted at pchaudhari@email.gwu.edu or by mail at 1922 F Street NW, 4th Floor, Washington, DC 20052.

I would like your permission to use the School Counselor Self-Efficacy Scale in my research study. I would like to use and print your survey under the following conditions:

- I will use the surveys only for my research study and will not sell or use it with any compensated or curriculum development activities.
- I will include the copyright statement on all copies of the instrument.
- I will send a copy of my completed research study to your attention upon completion of the study.

If these are acceptable terms and conditions, please indicate so by replying to me through e-mail: crmalone@gwu.edu

Sincerely,

Chelse R. Malone

February 5, 2020

Chelse R. Malone
The George Washington University
Graduate School of Education and Human Development
2136 G Street NW
Washington, DC 20052

Dear Mr. Freer:

I am a doctoral student from The George Washington University writing my dissertation titled *The Effect of Background Experience on School Counselor Self-Efficacy when Working with Students with Disabilities,* under the direction of my dissertation committee chaired by Dr. Richard Lanthier, who can be reached at 202-994-1608 or lanthier@gwu.edu. The George Washington IRB Committee Chair, Prema Chaudhari, can be contacted at pchaudhari@email.gwu.edu or by mail at 1922 F Street NW, 4th Floor, Washington, DC 20052.

I would like your permission to use The Educators' Attitudes Toward Disability Scale (EADS) instrument in my research study. I would like to use and print your survey under the following conditions:

- I will use the surveys only for my research study and will not sell or use it with any compensated or curriculum development activities.
- I will include the copyright statement on all copies of the instrument.
- I will send a copy of my completed research study to your attention upon completion of the study.

If these are acceptable terms and conditions, please indicate so by replying to me through e-mail: crmalone@gwu.edu

Sincerely,

Chelse R. Malone