ACADEMIC PROGRAM REVIEW

2011

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Department of Human Development Counseling
University of Illinois Springfield
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I. PROGRAM OBJECTIVES AND STRUCTURE

Date of Initiation.

Housed in the College of Education and Human Services, the Department of Human Development Counseling (HDC) offers a Master of Arts degree in Human Development Counseling and was initially approved in 1972.

Conceptual Design.

The Department of Human Development Counseling prepares students to provide professional counseling and consulting services in community and government agencies; schools; hospitals; inpatient and outpatient treatment facilities emphasizing mental health, chemical dependence, corrections, social welfare, rehabilitation, and human relations; and in private practice. Opportunities for employment include: teachers; individual, marriage, family, and career counselors; administrators; therapists; and chaplains. Students learn a variety of theoretical approaches and how to use “self as instrument” to facilitate changes sought by people in systems facing the decisions and concerns of everyday living. The Department bases its educational curriculum on a belief in the inherent worth and dignity of each person; in the importance of developing self-awareness and continuing personal growth throughout the life-span; in the need to enhance skills in self-expression, self-management, and interpersonal relations; in deepening and enriching core attitudes of authenticity, congruence and non-judgment; and in the need to understand and experience diversity across cultures and subcultures. The Department prepares graduates to be able to help people—as individuals, couples, members of a family system or in groups—to cope successfully with life tasks in our pluralistic society.

The Department of HDC offers three areas of study: Community Counseling, School Counseling and Marital, Couple and Family Counseling (MCFC). All three areas of study are accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). The HDC curriculum prepares Community Counseling students for eventual licensure as a Clinical Professional Counselor (LCPC). The School Counseling area of study is approved by the Illinois State Board of Education and prepares candidates for Type 73 School Service Personnel certification. The Marital, Couple and Family Counseling area of study prepares students for eventual licensure and certification as a Marriage and Family Therapist, including membership in
the International Association of Marriage and Family Counselors (IAMFC) and the American Association for Marriage and Family Therapy (AAMFT).

Program Objectives.

The Department of HDC's goals and objectives are consistent with those of the University of Illinois Springfield, in which commitment to academic excellence, enriching individual lives and making a difference in the world are strongly emphasized. The University supports professional development as a blend of traditional liberal arts and practical experience and the Department of HDC strives to maintain and strengthen this unique approach to excellence.

The Department of HDC endorses the standards and objectives promulgated by the Council for Accreditation of Counseling and Related Educational Programs (CACREP) and has designed the curriculum to be consistent with that body's standards and objectives as well as those of the Illinois State Board of Education. Graduates of HDC demonstrate their competence through active utilization of knowledge and skills acquired within eight common core areas required by CACREP: 1) Professional Identity; 2) Social and Cultural Diversity; 3) Human Growth and Development; 4) Career Development; 5) Helping Relationships; 6) Group Work; 7) Assessment; and 8) Research and Program Evaluation. Competence demonstration is determined by faculty through the use of role plays, research papers, examinations, advanced multimedia technologies and supervised practice with real clients.

In addition to the eight common core curriculum areas, HDC students within each area of study, Community Counseling, School Counseling and Marital, Couple and Family Counseling, must demonstrate knowledge and understanding of an extensive number of CACREP Specialty Standards unique to the environment in which they intend to practice. These Specialty Standards include the foundational elements, contextual dimensions, specialized skills, and the attitudes required for their particular setting or client population (given space considerations, a detailed listing of these Specialty Standards is not included in this document).

HDC faculty have also formulated seven specific achievable and measurable program objectives that fully complement its endorsement of CACREP standards and objectives. These objectives, presented on the Department web page, are:

1. Instill a strong sense of professional identity consistent with Professional Counseling philosophy and literature;

2. Cultivate student counseling skill competencies necessary for working with individuals, groups, couples, and families;

3. Facilitate student self-growth and understanding through class assignments and feedback;
4. Foster an environment conducive to healthy and appropriate risk-taking necessary for development;

5. Promote student understanding of the diversity of views and cultures within our profession and the environment in which counselors practice;

6. Teach and conduct research applicable to the practice of counseling; and

7. Aid students in the process of becoming certified and/or licensed.

These objectives are woven into every aspect of the Department curriculum, figuring prominently in admissions protocols, orientation meetings, advising, mentoring, modeling, course design and delivery, assignments, experiential learning activities, clinical training and supervision, and closure processes. Inextricably linked and repeatedly reinforced, these objectives serve as a lens through which HDC faculty strive to perceive, evaluate and refine the HDC curriculum. Toward this end, the Department of HDC expects to continually revisit, review and revise these objectives over time as an integral part of its commitment to excellence and to meeting the evolving needs of its students.

Curricular Requirements and Coherence.

HDC students prepare for a Master of Arts degree in Human Development Counseling by taking the required minimum of 50 semester hours of graduate credit. As noted previously, the Department endorses the standards and objectives promulgated by the Council for Accreditation of Counseling and Related Educational Programs (CACREP), and has designed the curriculum to be consistent with that body's goals and objectives as well as those of the Illinois State Board of Education.

Regardless of area of study (Community Counseling, School Counseling or Marital, Couple and Family Counseling), all HDC students enroll in a total of 45 credit hours:

- HDC 501 Fundamental Issues and Ethics in Counseling (3 credit hours)
- HDC 511 Theories of Counseling (3 credit hours)
- HDC 512 Prepracticum (3 credit hours)
- HDC 513 Group Counseling and Psychotherapy (3 credit hours)
- HDC 515 Multicultural Counseling (3 credit hours)
- HDC 521 Developmental Counseling (3 credit hours)
- HDC 524 Career/Lifestyle Counseling (3 credit hours)
- HDC 525 Alcoholism and Substance Abuse (3 credit hours)
- HDC 534 Introduction to Family Therapy (3 credit hours)
- HDC 546 Psychopathology and the DSM-IV-TR (3 credit hours)
- HDC 575 Appraisal Techniques in Counseling (3 credit hours)
- HDC 577 Research Methods (3 credit hours)
HDC 587 Professional Experience: Practicum (3 credit hours)
HDC 590 Professional Experience: Internship (6 credit hours)

Students must also complete a minimum of 3 credit hours of coursework within a declared area of study:

**Community Counseling**

HDC 530 Community Counseling (3 credit hours)

**School Counseling**

HDC 531 Developmental School Counseling (3 credit hours)

Students who do not possess a teaching certificate in the State of Illinois are also required to enroll in additional coursework in Teacher Education (TEP) and Educational Leadership (EDL) to become eligible for Type 73 certification. These supplemental requirements are aligned with the Illinois State Board of Education (ISBE) standards and include the following:

TEP 201 Introduction to Education (3 credit hours)
TEP 222 Child Development for Teachers
* or TEP 223 Adolescent Development for Teachers (3 credit hours)
TEP 322 Teaching, Learning, and Assessment (for elementary level)
* or TEP 314 Curriculum and Instruction (for secondary level)
(3 credit hours)
EDL 575 Legal Aspects of Special Education (2 credit hours)

**Marital, Couple and Family Counseling**

HDC 558 Theories of Counseling (3 credit hours)
HDC 545 Sexual Dysfunction and Family Violence (3 credit hours)
HDC 536 Divorce Counseling or HDC 537 Couples Counseling (3 credit hours)
HDC 567 Models and Methods in Marriage and Family Therapy (3 credit hours)
HDC 530 Community Counseling (3 credit hours)

Finally, all HDC students are required to complete a 2-credit hour closure process before they are eligible for graduation. HDC students can select between a Comprehensive Examination or a Master's Project/Thesis. A determination is made on this issue following completion of HDC 577 Research Methods. Students who elect to complete a project/thesis enroll in HDC 582 Research Colloquium (2 credit hours) after successfully completing HDC 577. During the Colloquium, students continue to build upon research proposals drafted in the Research Methods course. Typically, the student's advisor serves as project/thesis chair. Each student, in
collaboration with the Advisor, selects a committee comprised of another HDC faculty member and an outside member. A formal proposal meeting is held once the literature review and methodologies components have been developed. Upon approval from the committee, the student then moves through the Institutional Review Board (IRB) process. When all approvals have been granted, the student collects data and completes the project/thesis. An oral defense is then convened to provide the student with an opportunity to defend the completed research. Students are required to continually enroll in HDC 583 Master’s Project Continuing Enrollment during each fall and spring semester until completion of the project/thesis.

A comprehensive examination was developed as an alternative to the master’s project/thesis in fulfilling the Department’s closure process. As its name implies, this examination is carefully designed to test a student’s knowledge, understanding and mastery of the core content areas woven throughout the entire HDC curriculum. The comprehensive examination consists of two parts: the Counselor Preparation Comprehensive Examination (CPCE) and an oral, case conceptualization presentation delivered to the Comprehensive Examination Committee (comprised of HDC faculty) which is supplemented by the use of selected video-taped counseling sessions conducted during the student’s clinical internship experience. Students who select the comprehensive examination as their closure process must establish graduation eligibility prior to enrolling in HDC 584 Comprehensive Examination Preparation (1 credit hour) for the first 8 weeks of the semester in which they intend to complete the examination process and HDC 585 Comprehensive Examination Registration (1 credit hour) for the second 8 weeks of that semester. Students who do not pass any portion of the comprehensive examination are required to continually enroll in HDC 586 Comprehensive Examination Continuing Enrollment during each fall and spring semester until the examination protocols have been successfully completed.

As of the preparation of this document, major changes in the Department of HDC’s closure process are being made (please see item 7c. in Curricular Revisions During the Review Period under Section II. Assessment of Learning Outcomes and Curricular Revisions and item 6 in Program’s Recommendations for the Current Review under Section IX. Summary and Recommendations).

In reflecting on the curricular requirements and coherence of the three areas of study within the Department of HDC, it is important to note that HDC’s accreditation by the Council on Accreditation for Counseling and Related Educational Programs (CACREP) indicates that its curriculum is at once unique and substantially the same as all CACREP accredited programs within institutions of higher education throughout the country (601 programs within 250 institutions). Stated differently, all programs accredited by CACREP must demonstrate adherence to its standards and objectives. However, this adherence may be demonstrated in a multiplicity of ways, permitting each accredited program to design a curriculum with an eye toward freshness, creativity, and innovation. Ultimately, one of the most compelling measures of coherence of the HDC curriculum is its alignment with the requirements for licensure within the State of Illinois and elsewhere. Indeed, a major benefit of HDC’s CACREP accreditation status
is that students admitted into the Department are placed on a direct and expedited path toward licensure and certification as professional counselors.

Finally, the pattern of course offerings within HDC has undergone some significant changes since the last program review. Historically, the HDC curriculum was made available solely during evening hours in order to meet the needs of nontraditional students who work full-time and find night classes and a part-time curriculum most convenient to their busy schedules. However, in recent years, the Department of HDC has experienced a growing number of students making application directly following completion of their bachelor’s degree. These students are actively seeking a full-time curriculum that will enable them to launch their careers as quickly as possible. Therefore, HDC faculty work intensively to create a pattern of course offerings that accommodate the needs of both full and part-time students. These efforts include conducting student surveys to identify scheduling needs, concerns, and preferences; offering classes in the afternoon as well as the evening (which enables students to take two courses back-to-back); scheduling classes on weekends; and creating alternative formats such as full-day intensives. Despite Department faculty’s best efforts, some students experience delays in their movement through the curriculum as scheduling complexities associated with striving to maintain both a full-time and part-time curriculum are exacerbated by accreditation-mandated course caps and faculty resource limitations. These challenges are further intensified by recent and significant increases in student enrollment. Should these trends continue, offering core classes twice yearly along with multiple sections may become necessary.

Accreditation.

In reflecting on the quality of its curriculum, the Department of Human Development Counseling is particularly proud of its continued accreditation status with the Council for Accreditation of Counseling and Related Educational Programs (CACREP). Organized in 1981, CACREP is the accrediting agency responsible for reviewing and evaluating counseling and student affairs practice in higher education programs against a set of nationally recognized standards which are revised every eight years. Its incorporation as an independent body was the culmination of years of work by the American Counseling Association (ACA) and its divisions to define the knowledge and skills required for entry into the profession and to advocate that these requirements be implemented by preparation programs offering counseling and student affairs practice degrees.

CACREP, therefore, is the primary accrediting body designed specifically for counseling programs. Similar recognized bodies are the American Psychological Association (APA) for psychologists, the American Association for Marriage and Family Therapy (AAMFT) for family therapists, and the Council on Rehabilitation Education (CORE) for rehabilitation counselors. Graduating from an appropriately accredited program assures employers and students that both the university’s standards and the reputation of the associated national organization are fully supportive of the quality of the graduates’ educational experience (detailed information on the importance, value, and benefits of accreditation, specifically, CACREP accreditation, is
presented on the Department of HDC web page.

The Department of Human Development Counseling’s Community Counseling and School Counseling areas of study were initially accredited by CACREP in the fall of 1993 (following completion of a comprehensive self-study process, submission of a self-study document and application materials, a site visit conducted by CACREP representatives, and detailed review and approval by the CACREP Board of Directors). However, as the eight-year accreditation cycle was drawing to a close, the Department sought an extension due to multiple faculty departures (e.g., three full-time faculty in one calendar year) and serious personnel problems within the Program. An extension was granted by CACREP and a seven-volume, 2600-page self-study document was submitted in June, 2001. In response to CACREP’s review of the self-study report, a 150-page addendum was prepared and submitted in April, 2002 and a formal site visit was conducted in May of that year.

Following the site team’s submission of its evaluation report and the Program’s submission of a 125-page institutional response document, the CACREP Board of Directors convened and voted to retain HDC’s accreditation status through December 31, 2004. This outcome required the submission of an interim report in August of 2004 providing evidence that additional faculty had been hired and that the Program was in full compliance with all Standards. The Department of HDC submitted a second interim report in November of 2006, successfully documenting compliance with remaining CACREP curriculum standards resulting in a CACREP Board decision to retain HDC’s accreditation status through December of 2008.

Given ongoing resource challenges, in March of 2008, the Department of HDC sought and received a one-year extension (through December 2009) and initiated a comprehensive self-study of its entire curriculum and all aspects of its admissions and closure processes and protocols. In addition to seeking re-accreditation of its Community Counseling and School Counseling areas of study, this self-study process also included an attempt to seek initial accreditation of the Department’s Marital, Couple and Family Counseling area of study. A highly comprehensive self-study document was submitted to CACREP in both print and electronic formats in summer of 2009. A subsequent addendum was submitted, also in print and electronic formats, in fall of 2009 and a formal site visit was conducted by a three-member team in late January of 2010.

The Department of HDC was most gratified to learn that the site visitation team determined that all CACREP Standards had been met for re-accreditation of the Community Counseling and School Counseling areas of study. In addition, following submission of a 35-page institutional response document in March of 2010, it was determined that all CACREP Standards had been met for initial accreditation of HDC’s Marital, Couple and Family Counseling area of study with the exception of documenting a history of graduates within this area. In late July of 2010, the Department of Human Development Counseling was informed that its Community Counseling and School Counseling areas of study are re-accredited through March 31, 2017—the full eight-year cycle. Further, HDC’s Marital, Couple and Family Counseling area of study was granted a two-year initial accreditation, through October 31, 2012. Prior to the close of this two-year
period, the Department is required to submit an interim report documenting a history of graduates from the MCFC area of study. Following successful documentation of this outcome, the MCFC area of study will be placed on the full, eight-year accreditation cycle. In other words, the CACREP Board of Directors fully endorsed HDC’s MCFC curricular structure and delivery system and was providing the Department with an opportunity to demonstrate that its students are able to successfully complete the Program. It should be noted, here, that achieving and maintaining CACREP accreditation in three areas of study is no mean feat in that this accomplishment actually translates into demonstrating compliance with over 275 standards!

In addition to attending to the rigorous demands associated with maintaining CACREP accreditation, the Department of Human Development Counseling maintains its accreditation status with the Illinois State Board of Education (ISBE) (in conjunction with the College of Education and Human Service’s Teacher Education and Educational Leadership Programs). The ISBE accreditation process parallels the standards and expectations of the National Council for Accreditation of Teacher Education (NCATE).

II. ASSESSMENT OF LEARNING OUTCOMES AND CURRICULAR REVISIONS

Assessment.

Assessment within the Department of HDC assumes a variety of shapes and forms and is operationalized on multiple levels across time. For example, assessment and evaluation continue to be critical elements woven throughout every aspect of the CACREP accreditation process and its underlying standards. Indeed, assessment and evaluation remain at the heart of the policies and procedures used by CACREP to determine whether a program will achieve or maintain accredited status. Furthermore, CACREP accreditation standards stipulate that in addition to providing students with opportunities to develop and demonstrate knowledge and skills in the areas of assessment and evaluation, programs must regularly and systematically assess these types of curricular offerings, along with other aspects of program operations. The Department of HDC exercises great care in adhering to these standards in order to ensure that its graduates will enter the counseling profession with the knowledge and skills necessary to function effectively within our rapidly changing society. Toward this end, the Department’s expectations and requirements related to student performance are clearly articulated in the UIS Catalog 2011-2012:

Grading Policy

HDC department majors must earn grades of B- or better in HDC 501, HDC 511, HDC 512, and HDC 513. If a C+ grade or lower is earned in any of these courses, the course must be retaken. HDC majors must also maintain a cumulative GPA of at least 3.0. In other courses, a maximum of six hours of C grades is allowed when balanced by an equal number of hours of A.
Expected Professional Competencies

Before graduating, degree candidates must demonstrate competencies and dispositions related to personal development, such as the ability to communicate effectively with others; professional development, such as the ability to conceptualize client concerns and to provide appropriate intervention through an individual or group relationship; and social development, such as the ability to participate as a team member.

In addition to these generic competencies, students are expected to develop specific knowledge and skills needed for the client populations with which, or for the settings in which, they intend to work. Such specialized knowledge may be obtained through projects designed to meet course requirements.

Each department course may contain an applied or experiential component in addition to the didactic component, and some courses specifically emphasize experiential learning. These courses require application of professionalism skills in simulated and/or real settings. Students should, therefore, expect to demonstrate understanding of ethical behavior in the helping professions as well as evidence of interaction skills with clients. All master's candidates must be familiar with the HDC policy on clinical experience and should consult their advisors about satisfying its provisions. All degree candidates must demonstrate graduate-level performance in reading, writing, and speaking English.

As noted in Section I of this document, Program Objectives and Structure, the Department of HDC engages in systematic evaluation of its areas of study within the context of major review initiatives mandated by accreditation organizations such as the Illinois State Board of Education (ISBE) and the National Council for Accreditation of Teacher Education (NCATE) as well as CACREP. In addition, the Department conducts periodic curricular revisions based on changes in State licensure requirements, input from Department faculty, feedback from current and former students, input from personnel in cooperating agencies such as practicum and internship clinical site supervisors and members of the HDC Advisory Board. The Department mission, objectives, and student learning outcomes are also periodically revised to maintain alignment with the positions, standards, and requirements of pertinent professional organizations such as CACREP, the National Board for Certified Counselors (NBCC), and the Illinois Department of Financial and Professional Regulation (IDFPR).

As an essential element of program evaluation and in compliance with CACREP accreditation requirements, the Department of HDC conducts comprehensive surveys of key stakeholders at regular intervals. These stakeholders include currently enrolled students, alumni, faculty, site supervisors, and employers. The most recent survey of key stakeholders was conducted in online format in 2008. Results from these surveys in conjunction with numerous other formal assessment protocols are carefully reviewed and figure very prominently in the development of Department curricular changes (please see a listing of curricular changes initiated in response to stakeholder surveys and various other formal assessment protocols since the last academic
program review in Curricular Revisions during the Review Period under Section II. Assessment of Learning Outcomes and Curricular Revisions).

In addition to curricular assessment, review and alignment with external standards and requirements, HDC faculty members regularly solicit informal feedback from students regarding course objectives, course relevance, instructional quality, learning outcomes, and students' changing needs. Department faculty also conduct formal, developmental, systematic assessments of each student's progress throughout the Program at multiple points in time: 1) admission; 2) pre-practicum/pre-clinical; 3) practicum; 4) internship; 5) and closure (within the proposal meeting and oral defense for the master's project/thesis option and within the multiple choice and clinical oral examination components of the comprehensive examination option). Further, student performance and learning outcomes are formally assessed within comprehensive annual student evaluations. During these executive sessions, faculty identify students deserving achievement awards and academic honors as well as those students who are experiencing personal or academic difficulties. Advisors meet with students not making satisfactory academic or personal progress to determine appropriate remedial measures. When personal issues are involved, students are actively encouraged to seek counseling outside the Program.

Some examples of the range and depth of these assessment mechanisms, protocols and forms utilized across time include the following:

**Admission**

Three letters of recommendation

Group interview with all Department faculty (Interview Scoring Sheet)

Blind review of admission essay (Essay Scoring Sheet)

**HDC 501 Fundamental Issues and Ethics in Counseling**

Ethics examination

Values in counseling assignment

Final course grade must be B- or above

**HDC 511 Theories of Counseling**

Final course grade must be B- or above
**HDC 512 Prepracticum**

Group and individual supervision throughout the semester

Demonstration of appropriate relationship and advanced individual counseling skills and dispositions (professional responsibility, competence, maturity, integrity) (Professional Counseling Performance Evaluation form)

**HDC 513 Group Counseling and Psychotherapy**

Final course grade must be B- or above

**HDC 587 Professional Experience: Practicum**

Individual (and/or triadic) and group supervision by faculty supervisor

Individual supervision by site supervisor

Faculty review of 12 taped counseling sessions across the semester

Three telephone contacts by faculty supervisor with site supervisor

Site visit by faculty supervisor

Dispositions Evaluation of Student form

Site Supervisor Evaluation of Student form

Faculty Supervisor Evaluation of Student form

Passing grade (CR) necessary to continue in clinical sequence

**HDC 590 Professional Experience: Internship**

Individual supervision by site supervisor

Group supervision by faculty supervisor

Faculty review of 8 taped counseling sessions across the semester

Three telephone contacts by faculty supervisor with site supervisor

Site visit by faculty supervisor
Dispositions Evaluation of Student form
Site Supervisor Evaluation of Student form
Faculty Supervisor Evaluation of Student form
Faculty Evaluation of Student form
Passing grade (CR) to complete clinical experience

Issues of concern emerging from within these processes, structures, and mechanisms are addressed in exhaustive detail at Department meetings and in Department executive sessions where corrective measures are formulated and implemented.

As gatekeepers to the counseling profession, Department faculty are acutely aware that their responsibilities within the area of assessment throughout students' curricular experience carry an additional level of significance and importance. Toward this end, prior to admission into the Department, students are required to read and sign a Retention Policy and Procedures document that outlines expectations and requirements for academic performance and demonstration of appropriate professional dispositions and behavior. This document informs them that "continued enrollment in the Program will be based on satisfactory performance in the following domains: Counseling Skills, Personal and Professional Responsibility, Competence, and Integrity." The document also includes language related to remediation as well as dismissal. If Department faculty should determine that a student's personal and/or professional behavior does not meet Departmental standards, that student may be placed on probation and remediation, Program suspension, voluntary resignation, or dismissal, depending on the severity of the issue of concern. In addition, students are informed that a comprehensive annual evaluation is conducted in which the quality of their performance within these dimensions is formally assessed. A Student Evaluation form is used in this process; the form addresses the following critical skills, behaviors and personal characteristics:

**Academic Skills:** Completion of Assignments
Class Participation
Quality of Work
Attitude

**Clinical Skills:** Basic Attending Skills
Intentionality
Case Conceptualization
Treatment Outcomes
Accountability/Record Keeping
Insight

Ethical & Prof. Behavior:
Integrity
Honesty
Non-judgmental
Responsibility
Flexibility
Acceptance
Collegiality
Self-Discipline
Diligence

Personal Characteristics:
Stability
Maturity
Respect
Motivation
Peer Relationships
Reaction to Criticism
Compassion
Sensitivity
Enthusiasm

The majority of students admitted into the Department of HDC as well as those making application to the Department bring a level of maturity, sensitivity, warmth, and professionalism to their graduate work that will serve them and their clients extremely well throughout their careers as practicing counselors. However, in recent years, the Department has noted a growing number of students who display dispositions and patterned behaviors that are inconsistent with graduate-level performance standards, particularly the standards associated with the practice of professional counseling. These concerns range from rather shockingly inappropriate communication and problem-solving skills to issues of perceived entitlement, low tolerance for ambiguity, hypersensitivity and demands for immediate attention and redress. As gatekeepers to the counseling profession, faculty within the Department of HDC take their responsibilities very seriously and remain committed to modeling and reinforcing professional dispositions, skills and behavior. Department faculty also continue to maintain and revise structures and policies designed to monitor and assess student dispositions and professional standards of behavior from point of admission through closure and to confront and remediate behaviors of concern whenever necessary.

When a student’s personal and/or professional behavior leads to serious concerns, a remediation process is initiated. A remediation committee is formed which includes the student’s Advisor, all full-time faculty members, and the Department Chair. Depending upon the circumstances of a particular case, the remediation committee may also include the Dean and other participants such as a site supervisor or an adjunct faculty member who initially identified the concern. During a formally scheduled meeting, the concerns are clearly presented to the student who is given an opportunity to provide their perspective regarding the concerns. If deemed necessary, a remediation plan is developed and implemented, where students are given written documentation of the proceedings as well as the remediation plan with copies of all relevant documents placed in the student’s file.

Finally, in reflecting on assessment of learning outcomes, HDC faculty consider student performance on national certification and licensure examinations to be a particularly important and meaningful measure of the quality of its curriculum and the level of knowledge achieved by its students. Therefore, Department faculty are extremely pleased and proud to report that HDC graduates perform exceptionally well on these examinations (please see Student Achievements under Section II. Assessment of Learning Outcomes and Curricular Revisions).

Curricular Revisions during the Review Period.

The Department of HDC has initiated a significant number of major curricular changes since completion of the last academic program review in 2003. These changes were made in response to input from and within numerous sources, structures and mechanisms, including: bi-monthly Department meetings; Department executive sessions (conducted as needed); annual Department retreats; the HDC Advisory Board; formal surveys of current students, alumni, clinical site
supervisors, and employers; student forums; the Council for Accreditation of Counseling and Related Educational Programs (CACREP); the Illinois State Board of Education (ISBE); the Illinois Department of Financial and Professional Regulation (IDFPR); the Department graduate assistant; and the Department student representative. A partial listing of these changes includes the following:

1. Development of a New Course: HDC 545 Sexual Dysfunction, Substance Abuse and Family Violence

   This course, developed in response to CACREP requirements and changes in licensure for both Counselors and Marriage and Family Therapists within the State of Illinois, initially appeared in the 2002-2003 University Catalog. Upon discovering that content equivalent to 1/3 of a single course was not sufficient to meet licensure standards, “substance abuse” was eliminated from the HDC 545 course title, sexual dysfunction and family violence content in HDC 545 were expanded, and formal arrangements were made for HDC students to take HMS 525 Alcoholism and Substance Abuse via cross-listing. Over time, the Department of HDC developed its own course in this content area, HDC 525 Alcoholism and Substance Abuse, incorporating it into the HDC core curriculum.

2. Reconfiguration of Four, Interrelated Two-credit Courses

   HDC 502 Listening Skills; HDC 504 Theories of Counseling I; HDC 507 Theories of Counseling II; and HDC 508 Influencing Skills were reconfigured into two, four-credit courses (HDC 511 Theories of Counseling and HDC 512 Prepracticum).

   This curriculum change was initiated in 2003 to reduce long-standing confusion and ambiguity for students, faculty and staff (e.g., all 4 courses were offered each fall and spring in 8-week formats by three faculty members; the theories courses carried a cap of 24 while the skills courses carried a cap of 12, requiring one faculty member to cover the theory sections while the other two faculty would break the theory sections into two 12-student sub-sections in order to provide intensive skills training).

3. Reconfiguration and Re-distribution of Course Content (in HDC 501 Fundamental Issues and Ethics in Counseling and HDC 531 Developmental School Counseling)

   Initiated in 2003, in response to accreditation recommendations, the focus of these changes was to expand and refine content in both courses and shift specific content from 501 to 531 in order to deliver required material more effectively and efficiently.
4. Admission Process Refinements

Since submission of the previous academic program review, the Department of HDC has initiated numerous changes in its admissions policies and procedures. Selected examples include the following:

a. Development of a New Admissions Form

This form, developed in 2003, was designed to be completed via the HDC web page, printed and mailed to the Department office. HDC faculty were very pleased to learn that Provost Berman considered the structure and protocol for submission of this new form was a model for all UIS programs at that time.

b. Raising the Undergraduate GPA Requirement from 2.75 to 3.0

The rationale for this curriculum change, initiated in 2003: 1) the Department was continuing to admit too many students who experience considerable difficulty performing effectively at the graduate level; and 2) faculty resources were reduced to only 3 FTE effective the close of the spring 2003 semester. This circumstance left remaining faculty with even less time and energy available to deal with remedial problems.

c. Incorporation of a Conditional Admission Component

Applicants who performed poorly on the admissions essay were granted conditional admission status which required completion of ENG 375 Expository Writing with a grade of B+ or better. This initiative was designed to address the long-standing problem of students who perform extremely well in the admissions interview but disturbingly poorly in the essay portion of the process. Inevitably, the Department's pattern of weighting the interview more heavily than the essay resulted in payment of an exorbitant price by faculty who later discover that intensive remedial support is necessary to enable the student to address the rigorous demands of the closure process. Unfortunately, budget constraints did not permit consistent and reliable inclusion of ENG 375 in the course schedule (resulting in conditionally admitted students continuing to take HDC courses while waiting for the course to be made available) and resistance to the on-line format of the course at that time was exceedingly high. Ultimately, it became clear that this new component was simply not tenable. On the other hand, this frustration gave rise to the development of an alternative that showed great promise: reversing the sequence of the admissions protocol such that applicants would be granted an interview
only after passing the essay portion of the process. An initial trial of this
new format was conducted in fall 2003.

A second attempt was made to establish a conditional admission structure
in Fall 2008. Specifically, students with a 2.75 undergraduate GPA were
admitted conditionally and their performance carefully tracked until full
admission requirements were satisfactorily met. This change enabled the
Department of HDC to both maintain its 3.0 GPA requirement while
increasing its pool of prospective applicants.

d. Elimination of Prerequisites

Effective Fall 2008, the number of prerequisites was reduced from three
(abnormal psychology, developmental psychology and social
psychology/sociology) to two (abnormal psychology and developmental
psychology). The rationale for this change was two-fold: 1) the limited
relevance of social psychology/sociology to preparation for clinical
licensure; and 2) the need to move students through the admissions
application process more quickly.

e. Admission Application Deadline Changes

Effective Fall 2010, Department admission application deadlines were
changed from March (for fall admission) and October (for spring
admission) to February and September, respectively, in order to bring the
Department’s admissions time-lines into closer alignment with the time-
lines maintained by other campus units (e.g., Financial Aid, the Graduate
Assistantship Office, and the Graduate Public Service Internship
Program).

5. Development of a New Course: HDC 530 Community Counseling

This curriculum change, implemented in the Fall 2004 schedule, was made in
response to the CACREP site visit team’s requirements, in order to address the
unique content and skills-related needs of students enrolled in the Community
Counseling area of study. As a consequence, the Department’s required hours
were increased from 50 to 52.

6. Reconfiguration of the Entire HDC Curriculum (from a four-credit to a three-
credit format)

Effective January 1, 2005, the Illinois Department of Financial and Professional
Regulation (IDFPR) required that all graduate programs preparing candidates for
licensure as a Clinical Professional Counselor include the following courses (three semester hours or equivalent) in their curriculums: 1) Psychopathology and Maladaptive Behavior; 2) Substance Abuse; and 3) Family Dynamics. Since the IDFPR also required a three semester hour course in Developmental Counseling, the HDC Program’s two-hour, HDC 521 Developmental Counseling course was short one hour.

Addressing these curricular changes clearly presented some challenges for HDC. Given the Department’s CACREP-accredited four-credit curriculum structure with 52 required hours for completion, the addition of three more four credit-hour courses (as well as increasing HDC 521 from two to three credits) would raise the required number of credit hours to 65—an outcome likely to have a deleterious effect on both recruitment and retention. Therefore, the following curricular changes were initiated:

a. HDC 591 DSM-IV and Treatment Planning, currently available to HDC students as a two-credit elective course, was expanded to include content in psychopathology, re-named and re-numbered as HDC 546 Psychopathology and the DSM-IV-TR, and reconfigured as a three credit-hour required course.

b. Formal approval was secured from the Department of Human Services (as well as the faculty coordinator for the Substance Abuse area of study within HMS) to permit HMS 525 Alcoholism and Substance Abuse to be cross-listed with HDC and offered as a three credit-hour course for HDC students.

c. HDC 534 Introduction to Family Therapy, currently required for all HDC students in the Marriage and Family Therapy area of study, was reconfigured as a three credit-hour course and designated to fulfill the family dynamics requirement within the core curriculum while HDC 558 Theories of Family Therapy was designated to replace HDC 534 as a requirement for MFT students.

d. The two-credit HDC 521 Developmental Counseling course was reconfigured to a three credit-hour format.

e. All other HDC courses were reconfigured to a three credit-hour format resulting in a shift from 52 to 50 required hours.

Approval of the Department’s formal reconfiguration proposal by the UIS Graduate Council was secured in Fall 2005. Actual implementation of these multi-layered curricular changes necessitated submission of formal petitions
accompanying all student graduation contracts over the next several years.

7. Closure Process Refinements

As in the admissions realm, since submission of the previous academic program review, the Department of HDC has initiated numerous changes in its closure policies and procedures. Selected examples include the following:

a. Changing HDC 580 Comprehensive Examination Preparation from an Eight-week Course to an Independent Study Format

Implemented in 2005, this change was made due to irregularities in the delivery of examination preparation material within a traditional classroom context. Individual consultation with faculty Advisors has proven to be more effective in preparing students to complete the comprehensive examination.

b. Condensing the Comprehensive Examination Time-lines

This change was made to permit students to complete both the preparation and the examination protocols during the same semester (rather than in consecutive semesters), thereby expediting their movement through the closure process.

c. Revising Scoring Parameters

Upon discovering that it was holding its students to a fixed passing score standard significantly higher than most CACREP-accredited programs around the country, the Department of HDC revised the scoring parameters for the multiple-choice exam component of the comprehensive examination process, i.e., the Comprehensive Professional Counselor Examination (CPCE). However, while many CACREP-accredited programs set their passing score at one standard deviation below the national mean, the Department of HDC made the decision to use an aggregate score and require students to meet/exceed the national mean.

d. Development of a Clinical Case Presentation Protocol

The essay component of the comprehensive examination had proven to be of limited value and utility in providing students with an opportunity to satisfactorily demonstrate their knowledge and mastery of essential clinical skills and the eight core CACREP content areas. In response to this discovery, the essay component was replaced by a clinical case
presentation protocol in which students prepare an oral presentation incorporating: 1) an articulation of their preferred model of helping with an emphasis on their understanding of the ways in which the "self" of the therapist figures prominently in the therapeutic process; 2) written materials explicating this model and demonstrating integrative understanding of its value and utility in clinical practice; and 3) selected segments of videotaped clinical sessions with clients seen during their internship experience (in which their preferred model of helping and use of "self" is actively demonstrated). This alternative component, initiated in fall 2008, has proven to be effective in meeting Department faculty members' goals and objectives for students electing to complete the comprehensive examination as their closure process (rather than the master's project/thesis).

It should be noted that, both separately and in concert, the CPCE and the clinical case presentation components of the HDC comprehensive examination protocol have been very carefully designed to assess students' knowledge, understanding and mastery of the eight common core areas required by CACREP: 1) Professional Identity; 2) Social and Cultural Diversity; 3) Human Growth and Development; 4) Career Development; 5) Helping Relationships; 6) Group Work; 7) Assessment; and 8) Research and Program Evaluation. Students' performance in the Department's closure processes provides invaluable data on the extent to which delivery of the program curriculum satisfactorily meets the learning objectives derived from CACREP standards.

e. Elimination of the Master's Project/Thesis as a Closure Option

As of the preparation of this document, the Department of HDC is in the process of eliminating its master's project/thesis as a closure option. This is a major curricular change that has been under intensive discussion and review for an extended period of time and is driven by a number of factors, including: 1) increasing enrollments; 2) faculty resource limitations; 3) the time required to complete a master's project or thesis; 4) growing numbers of students choosing the comprehensive examination rather than the project/thesis for their closure experience; 5) declining enrollments in HDC 582 Research Colloquium—the course required for students electing to do a project or thesis; and 6) the fact that very few CACREP-accredited master's degree granting programs require a project or thesis.

Current HDC policy does not permit students to switch from the project/thesis to the comprehensive examination—once a student embarks on the project/thesis journey they are required to remain on that path.
However, for a variety of reasons, some of these students have found themselves “stuck,” unable to move forward and longing to switch to the comprehensive examination option. The pending elimination of the project/thesis will permit these students to make that switch. However, this pending change will also permit students committed to completing the project/thesis to remain on their chosen path. Essentially, great care is being taken to structure the elimination in order to avoid causing major disruption to students’ closure-related plans and expectations. Toward this end, a carefully constructed series of components are being put into place to address the circumstances and needs of students at various points in space and time on the master’s project/thesis path.

HDC students have been informed of this pending, multi-layered curriculum change. They have also been informed that: 1) full implementation will require a period of transition; 2) consultation with their Advisor is essential to thoroughly examine the interfaces between this change and their own unique circumstances and preferences for the formulation of a positive, productive closure process; and 3) Department faculty will do their very best to support them through their closure experience.

Finally, it should be noted that the comprehensive examination protocol has proven itself to be a meaningful and valuable closure process that provides HDC students with an opportunity to demonstrate their knowledge, understanding and mastery of clinical theories, concepts and skills essential to the practice of professional counseling. The comprehensive exam protocol has also proven itself to be extremely effective in moving and supporting HDC students through the closure process to successful completion within one or two semesters.

8. Elimination of the Online Graduate Certificate in Career Specialist Studies

The Department’s Career Specialist Studies Online Graduate Certificate Program was eliminated effective fall 2006 due to: 1) withdrawal of incentives for State employees to complete the program, resulting in significant drops in enrollment; and 2) limitations in faculty resources to address essential components such as course delivery and marketing initiatives.

This 12-hour certificate in workforce development was intended for professionals who provided labor market and/or career search information, preparation training, and placement assistance in a workforce characterized by changing technological, demographic, and economic environments. The curriculum, endorsed by the National Association of Workforce Development Professionals and delivered
online, provided practical and theoretical knowledge and skills designed to meet the individual professional development needs of the workforce practitioner.

9. Refinement of the Department Mission Statement

As noted elsewhere in this document, the Department of HDC has undergone major changes in its faculty resources since the last program review. Specifically, two tenure-stream faculty members (Drs. Weir and Forth) left the University and three new tenure-stream faculty members (Drs. Karuppaswamy, Thompson and Klein) were appointed to join a single tenured faculty member (this writer) for a total of four (a fifth tenure-stream faculty member (Dr. Ann McCaughan) will join the Department for the beginning of the Fall 2011 semester). Therefore, much of the previous review cycle has been spent stabilizing pre-existing structures and re-configuring curricula to meet rapidly changing student needs. Indeed, over the past several years, HDC faculty have worked intensively to clarify and refine the overall goals of the Department within the context of a comprehensive review of the entire curriculum. Driven, in part, by the demands associated with the re-accreditation self-study process in conjunction with changes in Department faculty, a primary focus of this effort was to refine a program of study that builds upon and strengthens critically important attitudes, knowledge and skills across and between all curricular experiences. This effort also provided an opportunity for HDC faculty to clarify and refine its identity as a Human Development Counseling program, including careful review and refinement of the Department’s mission statement. Toward this end, input was gathered from the HDC Advisory Board, adjunct faculty members, current HDC students, alumni, and community professionals. This revised mission statement, which includes language reflecting changes in the Department’s student demographic, is presented on the HDC web page and reads as follows:

The Department of Human Development Counseling strives to educate traditional and non-traditional students with a primary goal to prepare highly competent Professional Counselors who are able to work with diverse populations in various settings in Central and Southern Illinois. More specifically, we strive to prepare School Counselors to function within K-12 settings; and Community and Marital, Couple and Family Counselors to operate within community agencies, hospitals, drug treatment facilities, and other institutions providing professional counseling and consulting services. As educators of future Professional Counselors, we strive to create an atmosphere that would encourage and promote the inherent worth and dignity of all persons; development of self-awareness and continuing growth throughout the life-span; positive interpersonal relationship skills; self-expression, and self-management; and core attitudes of authenticity, congruence, and non-judgment.
10. Department Differentiation: Human Development Counseling and Human Services

The Department of HDC has a long-standing history of positive linkages and interfaces with the Department of Human Services. For example, faculty colleagues from each Department share similar education and training backgrounds as well as licensure and certification credentials and collaborative service and research initiatives have been extremely satisfying and rewarding. In addition, students from each Department have taken courses (some of which were cross-listed) from the other to broaden and enrich their respective courses of study. Over the past several years, both Departments have carefully reviewed and evaluated their respective curriculums with an eye toward more clearly defining and clarifying the specific career paths and trajectories, professional identity development, and professional credentials toward which each will lead. This effort, in turn, has led to steps taken to reevaluate Department missions, goals and objectives; resource distribution; revisions in specific course content; changes in student advisement; and refinements in Department marketing and recruitment language. One specific outcome of these steps has been the Department of Human Services' decision to inform all current and prospective HMS students that: 1) the HMS curriculum will no longer support preparation for licensure in counseling or marriage and family therapy; and 2) current and prospective HMS students interested in seeking licensure should make application to the Department of Human Development Counseling.

Another specific outcome of these steps is the development of an HDC-based Family Dynamics course. A brief history of the extraordinarily complex and convoluted evolution of this course at the interface of HDC and HMS is rather fascinating. HMS/HDC 467 Family Dynamics first appeared in the University catalog in the mid-90s. It’s “home” was HMS, it was cross-listed with HDC, and, among other pedagogical purposes, it met one of the major course requirements for licensure as a Marriage and Family Therapist for both HMS and HDC students. Following the retirement of its long-time instructor, this course was changed from a 400-level to a 500-level course and re-named, “Models and Methods of Family Therapy”—a title that rendered it less clearly identifiable as a “family dynamics” course and paralleled an existing HDC course (534 Introduction to Family Therapy). In essence, while the terms, “dynamics” and “therapy/models and methods” in relation to families may be seen to be related, they are not synonymous.

As noted in item 6, above, in January, 2005, the IDFPR mandated that all accredited programs must include a family dynamics course in its curriculum. Since HDC did not have the faculty resources to develop its own family dynamics course, the Department made the decision to move HDC 534 Introduction to Family Therapy—a course specifically designated for students admitted into the
Marriage and Family Therapy area of study--into position as a required core course for all HDC students in order to ensure compliance with the new family dynamics requirement. Concomitantly, HMS/HDC 567 Models and Methods of Family Therapy, a course previously bearing the title, "Family Dynamics," was moved into position as one of four family therapy courses required for HDC students enrolled in the Marriage and Family Therapy area of study. Stated differently, a family therapy course (HDC 534) was designated a family dynamics course and a family dynamics course (HDC 567) renamed "Models and Methods of Family Therapy," was designated a family therapy course.

As these curricular developments, along with numerous others, were proceeding within HDC, the Department of HMS was moving toward a blended curriculum format that necessitated course caps at 20 students. While the Department of HMS generously reserved 10 seats in its 567 Models and Methods of Family Therapy class for HDC students, this number was eventually and understandably reduced to 7 in order to accommodate HMS students' enrollment needs. These developments, in conjunction with HDC's increasing enrollments resulted in unavoidable delays for HDC students in completing their course of study.

As of the preparation of this document, and with the pending arrival of a newly appointed tenure-stream faculty member, the Department of HDC is seeking formal approval through established channels to develop its own family dynamics course to be offered in the Spring 2012 semester. This will enable the Department of HDC to move its 534 Introduction to Family Therapy course back into its original position as one of the four additional courses required for students enrolled in the Marital, Couple and Family Counseling area of study. It will also enable the Department of HDC to remove HMS/HDC 567 Models and Methods of Family Therapy out of its current position as a required course within the Marital, Couple and Family Counseling area of study, thereby freeing all HMS 567 seats for HMS students.

The Department of HDC continues to greatly value and appreciate the Department of HMS' collegial spirit and support as we strive to meet the evolving demands of external regulation organizations and the ever-changing needs of our students.

**Career Objectives and Job Placement.**

HDC graduates provide professional counseling and consulting services in inpatient and outpatient psychiatric hospitals and mental health agencies and facilities as individual, marriage, and family counselors and administrators; in schools as counselors and administrators; in business as personnel and employee relations administrators; and in higher education as teachers, administrators, and career counselors. Graduates also seek and successfully secure employment in government agencies, residential treatment centers, community counseling agencies, and in
private practice. In addition, HDC students are frequently offered employment by their practicum and internship sites where program directors and site supervisors are in a unique position to observe trainees' skills and potential as professional counselors.

In recent years, HDC graduates have achieved a job placement rate of approximately 90%. However, most recently, during the national economic downturn, this rate has dropped to approximately 80%.

Of 53 participants in the 2008 HDC Alumni Survey, 43 HDC graduates responded to an item addressing current employment setting. Twenty two of these graduates reported employment in an agency, 17 in school settings, 4 in private practice, and 12 listed, “other.”

Specific positions held by recent HDC graduates include:

- Licensed Clinical Professional Counselor, Private Practice, Springfield
- School Counselor, Glenwood High School, Chatham
- Transitional Shelter Supervisor, Youth Services Bureau, Springfield
- Outpatient Counselor, Mental Health Centers of Western Illinois, Mt. Sterling
- Counselor, Inpatient Psychiatric Unit, Memorial Medical Center, Springfield
- School Counselor, Dillon Elementary School, Rock Falls
- Workforce Advisor, Land of Lincoln Workforce Alliance, Springfield
- Clinical Services Clinician, Sinnissippi Centers, Inc., Oregon (Illinois)
- School Counselor, Glenwood Elementary School, Chatham
- Outpatient Therapist, Family Counseling Center, Springfield
- Psychotherapist, Ben Gordon Community Mental Health Center, Dekalb
- Counselor, ABC Counseling Center, Springfield
- School Counselor, Rochester High School, Rochester
- Career Counselor, Career Development Center, UIS, Springfield
- Outpatient Counselor, Cass County Mental Health, Beardstown
Illinois State Board of Education (ISBE), Division Supervisor, Springfield

School Counselor, Williamsville Junior High School, Williamsville

Finally, according to the 2010-2011 edition of the Occupational Outlook Handbook, an 18% increase in overall employment of counselors is expected between 2008 and 2018. Specifically, a growth rate of 24% is expected for mental health counselors, 14% for school counselors, and 14% for marriage and family therapists. These figures clearly indicate a continuing need for well-trained, highly skilled professionals able to provide effective, cost-efficient treatment services to individuals, couples and families in a highly demanding managed care environment.

Student Satisfaction.

As noted elsewhere in this document, at least once every three years, CACREP-accredited programs are mandated to conduct comprehensive evaluations of key stakeholders, including current students, alumni, faculty, clinical supervisors and others. In the Department of HDC’s most recent comprehensive survey, conducted in 2008, 93% of current HDC students indicated that they were satisfied with the education they were receiving in HDC (19.3% excellent; 57.9% very good; 15.8% satisfied) and 88.5% of HDC alumni indicated that they were satisfied with the education they received in HDC (28.8% excellent; 46.2% very good; 13.5% satisfactory). These percentages compare favorably with the level of satisfaction reported by alumni in the previous academic program review where 92.9% of HDC graduates indicated they are satisfied with the education they received in HDC (52.9% very satisfied; 40.0% somewhat satisfied). In examining student satisfaction-related data on HDC graduates provided by the UIS Survey Research Office spanning the years 2002 through 2008, a less positive picture appears to emerge with, for example, 74.3% indicating that they would complete the same major again at UIS. However, these latter results may reasonably and understandably reflect the years of tumult and limitations in faculty resources described in Accreditation under Section I. Program Objectives and Structure and Previous Program Review Recommendations under Section IX. Summary and Recommendations). Effective Fall 2011, the Department of HDC will have five tenure-stream faculty members with the arrival of newly-appointed colleague, Dr. Ann McCaughan. It is anticipated that this increase in faculty resources will enable the Department to further enhance its ability to efficiently and effectively meet student needs and expectations.

Student Achievements.

Measures of student achievement within the Department of HDC remain richly varied. For example, HDC graduates perform extremely well on the National Counselor Examination for Licensure and Certification (NCE). The National Board for Certified Counselors certification program recognizes counselors who have met predetermined standards in their training, experience, and performance on the NCE, the most portable credentialing examination in counseling. This examination is used in 49 states, the District of Columbia, Puerto Rico and Guam to credential counselors on a State level. To date, NBCC has certified over 44,000
counselors.

When comparing HDC students’ overall mean scores on the National Counselor Examination (NCE) with national results, HDC students continue to perform well above national results for both CACREP-accredited and Non-CACREP-accredited programs. This pattern is evident in the results for the Spring 2011 exam:

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<table>
<thead>
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<tbody>
<tr>
<td>HDC overall mean score</td>
<td>121.50</td>
</tr>
<tr>
<td>Other CACREP programs’ overall mean score</td>
<td>116.44</td>
</tr>
<tr>
<td>Non-CACREP programs’ overall mean score</td>
<td>114.94</td>
</tr>
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HDC students’ performance on the content area test for school guidance is equally impressive with a pass rate of well over 95%.

HDC graduates also find that their graduate training at UIS has prepared them well for the rigors of doctoral work. Two particularly notable examples may be found in Dr. Sophie Moagi-Guluhane and Dr. Nithya Karuppaswamy. Following completion of her Master’s degree in HDC, Dr. Moagi-Guluhane received her Ph.D. in Counseling Psychology from Ball State University. She is presently a faculty member at Botswana University. A 1999 graduate of the HDC Program, Dr. Karuppaswamy went on to Purdue University where she completed her doctorate in Child Development and Family Studies with a specialization in Marriage and Family Therapy, subsequently submitting her application materials for a tenure-stream position at her alma mater. The Department of HDC was delighted to welcome Dr. Karuppaswamy in her return to HDC as a colleague in the Fall of 2005 (please see Faculty Achievements under Section IV. Faculty).

In addition, each year, the Department of HDC recognizes superior performance in research through its Outstanding Master’s Thesis/Project Award and superior performance on the comprehensive examination through its Outstanding Performance Award on the Comprehensive Examination. Recipients are presented with beautifully detailed plaques bearing their names and descriptions of their achievements. Recipients of the Department’s Outstanding Master’s Thesis/Project Award are also recognized in the campus-wide competition and awards event.

Finally, the Department of HDC is extremely proud of the achievements, against extraordinary odds, of the student selected by Department faculty as the Program Marshal for the Spring 2011 Commencement Ceremony: Mr. Josh Wertz, accompanied by his service dog, Ace, carried the flag for HDC exceptionally highly on that bright spring day!

III. STUDENT CHARACTERISTICS AND ACADEMIC SUPPORT

Demographics.

Since the last program review, the majority of HDC majors continue to be white and female (approximately 90% and 87%, respectively). While the mean age of HDC students remains
relatively stable at 33.23, a significant shift has occurred in the percentage of students attending classes on a part-time basis (approximately 64.5% compared to 88% in 2003). A notable shift has also occurred in the percentage of Black/Non-Hispanic students enrolled in the Department of HDC (approximately 4.5% compared to 11% in 2003). Enhancing minority recruitment is a primary objective for the next review period (please see item 3 in Program’s Recommendations for the Current Review under Section IX. Summary and Recommendations).

Transfer Characteristics/Feeder Institutions.

The Department of HDC tends to draw students from a variety of colleges and universities within the central Illinois area, including Western Illinois University, Blackburn, Millikin University, Illinois College, MacMurray, and Illinois State University as well as Eastern Illinois University, St. Louis University, and Chicago-area colleges and universities. The Psychology program at UIS also continues to refer a growing number of its students to HDC to pursue graduate studies in counseling. In addition, the Department of HDC recognizes and greatly appreciates the ongoing investments and contributions of Kim Hayden, Director of Graduate Recruitment for the Graduate Public Service Internship (GPSI) Department and Shawn Shores, Assistant Director for GPSI and their staff in recruiting the best and brightest applicants to our three areas of study. In reflecting on recruitment initiatives during the next eight years, HDC faculty would welcome an opportunity to make personal visits to feeder institutions to generate interest and excitement in seeking graduate training in Human Development Counseling.

Recruitment Activities.

The Department of HDC’s CACREP accreditation status continues to serve its recruitment efforts extremely well. Knowledgeable and committed applicants are keenly aware of the significance of accreditation and this issue figures prominently in their selection of a program in which to pursue graduate education in counseling.

The Department’s introductory course, HDC 501 Fundamental Issues and Ethics in Counseling, also continues to serve the Program well as a recruitment tool. This course carries no prerequisites and is open to all students who may be interested in pursuing a career in the helping profession. Therefore, it draws students who have been formally admitted into HDC as well as those who are engaged in active exploration of graduate education/career opportunities (for the student engaged in career and program exploration, HDC permits enrollment in up to 3 courses/9 credit hours prior to formal admission into the Department). Historically, a new student orientation meeting, conducted in HDC 501 every fall and spring semester, has been open to prospective students as well as those beginning in the Program. Together, the HDC 501 class and the orientation meeting provided invaluable opportunities for the Program to recruit new students. While HDC 501 continues to serve as an ongoing recruitment mechanism or vehicle, the Department’s orientation session has been dramatically expanded, restructured and targeted solely toward students who have been admitted into HDC (please see Advising and Other Communication to/with Students under Section III. Student Characteristics and Academic
Support).

The Department continues to draw older, nontraditional students seeking a career change as well as younger students seeking admission immediately following completion of their baccalaureate experience. Department faculty are also gratified to learn that many applicants are impressed with the material presented on the HDC web page where highly detailed information is readily available on all aspects of the curriculum, clinical experience requirements, licensure, certification, accreditation, admission protocols, procedural information and accompanying forms, and Department faculty background, training and research interests. Inquiries regarding what it was that drew or attracted applicants to HDC are included in a listing of structured interview questions during the Department admissions process. It is within this context that the Department has learned how prominently its web page figures in applicants' decision making processes.

Other recruitment tools utilized by the Department of HDC include a recently revised and updated Department fact sheet/marketing brochure and an annual $1,000 HDC Scholarship. The former is actively utilized by admissions department staff members in their targeted recruitment visits (as well as in UIS Graduate Career Fairs) and recommendations are made for the awarding and disbursement of the latter by the HDC Scholarship Committee comprised of two HDC faculty members.

During the past several years, the Department of HDC has made a highly deliberate and concerted effort to revise, refine and streamline its admissions processes and protocols. This effort included requesting an HDC faculty member, Dr. Jim Klein, to serve as an Admissions Coordinator for the Department and formalizing a system for responding to inquiries from prospective students as well as attending to the many details associated with HDC’s admissions processes and protocols. Students inquiring about admission to the Department are referred to Dr. Klein’s e-mail address, office location, office phone number, and his presence on the faculty contact section of the Department web page. Dr. Klein’s response to inquiries includes referring prospective students to the HDC web page, sending a Department fact sheet/marketing brochure and intensive consultation as needed via personal appointment, telephone and e-mail.

The Department of HDC’s commitment to actively promoting the development of a multicultural and diverse society is articulated in its Department philosophy, goals, and objectives (please see Program Objectives under Section I. Program Objectives and Structure) as well as in the Department mission statement (please see item 9 in Curricular Revisions during the Review Period under Section II. Assessment of Learning Outcomes and Curricular Revisions). Both individually and collectively, Department of HDC faculty members actively seek out opportunities to enrich, expand, and support its minority student population through strong and productive linkages with the University’s Office of Disability Services; active service on the Safe-Zone Planning and Training Committees, the Diversity Task Force and the Committee for Diversity, Equal Rights, Opportunity and Access; service as a Safe Zone Ally; service on scholarship committees where preference is given to minority candidates; guest presentations made in Women and Gender Studies classes; and attendance at both formal and informal events
Admissions Criteria.

The Department of HDC maintains a comprehensive and rigorous admissions process. Since the last program review, the Department has made a highly focused and intensive investment in revising its admissions protocols in order to achieve three inter-related objectives: 1) increase admissions; 2) streamline the admissions process; and 3) enhance structures designed to screen out applicants who are unsuited to graduate training in counseling (please see item 4 in Curricular Revisions During the Review Period under Section II. Assessment of Learning Outcomes and Curricular Revisions for selected examples of these initiatives).

In its present form, admissions to the Department of HDC are conducted twice a year (fall and spring) with applicants required to have a complete file by February 15th for fall admission or September 15th for spring admission.

The process is comprised of two phases:

Phase One involves completion of the following steps: 1) apply to the university as a student seeking graduate admission; 2) apply to the Department of HDC; 3) submit three references; 4) provide evidence of meeting the Departmental GPA requirement; and 5) provide evidence of meeting the undergraduate course prerequisites (abnormal psychology or psychopathology; and developmental psychology or life-span development or human development or child/adolescent psychology).

Specific details related to Phase One include the following:

Applicants must have a minimum GPA of 3.0 for the last 60 hours of their undergraduate degree course work or a cumulative undergraduate GPA of 3.0 in order to participate in the admissions process and be considered for full admission (applicants with a GPA of 2.75 to 2.99 may be considered for conditional admission; these students must receive a minimum GPA of 3.0 in HDC 501 Fundamental Issues and Ethics in Counseling and HDC 511 Theories of Counseling as well as letter grades no less than a B-).

Applicants may enroll for three HDC-approved courses while applying. Additionally, applicants may participate in the admissions essay and interview processes during the semester in which they expect to complete their prerequisite courses.
Phase Two is comprised of the following highly structured elements, both of which are completed on the same day: 1) a proctored admissions essay administered in a University computer lab; and 2) participation in a group interview.

Specific details related to Phase Two include the following:

Following a successful Phase One review by the Department Admissions Committee (comprised of core HDC faculty), applicants are formally invited to participate in Phase Two. Conducted on a Saturday, Phase Two is broken into two sessions (morning and afternoon), lasting three hours each. For example, an applicant might write the essay during the morning session and participate in the group interview in the afternoon. The day also includes introductions to Department faculty; a catered lunch; presentation of Department retention policies and receipt of signed retention documents; individual consultation on admission application status; and a question-and-answer session.

A series of structured admissions interview questions are used during the interview. These questions are designed to secure information useful in evaluating applicants' interpersonal skills within both individual and small group contexts; life challenges; stress management; prospective clients considered challenging; multicultural experiences; previous counseling experience; openness to self-examination; strengths and limitations; career goals and objectives; relative "fit" with the Department; fundamental values and beliefs; and personal and professional development.

Similarly, admission essay questions are designed to provide information regarding the applicants' ability to write at the graduate level and construct a clear, well-balanced narrative demonstrating dispositions appropriate to the practice of professional counseling.

Following completion of the day-long admissions process, each member of the admissions committee completes an admissions essay scoring sheet on which points are assigned for: depth of analysis, organization, clarity, abstract reasoning, grammar, punctuation and mechanical details, dispositions, and analysis of self and others. The quality of applicants' performance during the interview is also rated on an interview scoring sheet addressing a comprehensive range of skills, including: oral expression; presentation of life story; use of formal and systemic terms; relationship skills (e.g., acceptance, congruence, optimism, flexibility, openness); knowledge of self (e.g., goals and future plans, values, beliefs, prejudices, personal limitations); knowledge of counseling; knowledge of HDC; and estimated potential for becoming a licensed clinical professional counselor. Points are also assigned for GPA; volunteer/work experience in the counseling field; and letters of recommendation. A total score is derived from the interview, admission essay, and
application materials. The admissions committee then engages in highly detailed and intensive dialogue regarding the skills, abilities, "fit" and potential of each applicant. Input from adjunct and affiliate Department faculty is included in these discussions as appropriate. Finally, the Department admissions committee will conduct a formal vote on whether to admit the applicant.

The Department Admissions Coordinator notifies applicants regarding the outcome of the admissions process approximately 2-3 weeks after completion of Phase Two.

Applicants who are not admitted may request to reapply for the next deadline. The applicant may change or add any material in their file. If the Department committee does not approve an applicant for admission after the second attempt, a third attempt may be made after one academic year.

It should be noted that the work of the admissions committee may be best described as both exhaustive and exhausting. Both individually and collectively, admissions committee members invest a tremendous amount of time, energy and effort in seeking to ensure that only candidates appropriate to the Department of HDC as well as the counseling profession are admitted into the Program. For example, following completion of the formal protocols related to submission of the requisite application materials and administration of the full-day admissions essay and group interview components, a series of hours-long, intensive executive sessions are convened. During these sessions, the data collected on each applicant are reviewed and discussed in great detail. Both quantitative and qualitative data entered on the admissions essay scoring sheets and the interview scoring sheets are a major focus of the executive sessions. These documents, along with all other admissions-related forms and materials, are placed in each applicant’s student file.

Admissions criteria for the Department of HDC are made available to prospective students through the University catalog and the HDC web page.

It should be noted that HDC faculty members continue to make every effort possible to promote and facilitate the success of HDC students in both academics and practical/clinical experience. However, as gatekeepers to the counseling profession, HDC faculty continue to find it necessary to address circumstances in which a student’s behavior and/or performance does not meet the standards of the Department and/or professional practice. Department policy has been to accept only those students who meet the admissions criteria specified in the University catalog, score well on the written essay, and are deemed to possess the dispositions and the interpersonal skills necessary to become a professional counselor as demonstrated through a personal interview. However, in spite of these policies and procedures, some students later prove inappropriate for graduate-level training in counseling and for the rigors of practice in the helping profession. The protocol for dealing with such circumstances has varied over the history of the Department and issues of concern continue to be addressed on a case-by-case basis. While students have been transitioned out of the Department, the issues and challenges associated with this process are, without exception, exceedingly difficult, complex and a source of on-going deliberation and
debate among Department faculty. In order to limit the need to transition students out of the Department, selection protocols and processes have been subjected to ongoing and intensive review and revision in an effort to ensure that only the most qualified and appropriate students are admitted. The Department also continues to maintain a retention policy and procedure as well as ongoing student evaluation processes and protocols in order to enhance its ability to more efficiently and effectively deal with such highly complex student issues (please see Assessment under Section II. Assessment of Learning Outcomes and Curricular Revisions).

Advising and Other Communication to/with Students.

While a detailed listing of Advisor’s responsibilities is presented on the Department web page, advising within HDC takes a variety of forms. HDC students are assigned an initial Advisor on admission to the Department. These assignments are based on multiple factors, including the student’s selected area of study (Community Counseling, School Counseling, or Marital, Couple and Family Counseling); the student’s clinical and/or research interests; and the relative balance in advising loads across Department faculty. HDC faculty invest extensive amounts of time and energy in advising activities—in-person by appointment and on a drop-in basis as well as by phone and e-mail. Students may elect to change Advisors at any time and a formal mechanism (including a change of advisor form) is in place to facilitate this process.

The University’s graduation contract is used by Department faculty in assisting students in developing a planned program of study. While Department prerequisite curricular experiences are addressed with the student by the Admissions Coordinator prior to admission, core curricular requirements, specialized curricular experiences and supervised practicum and internship requirement are discussed with advisees and entered into designated sections of the contract form. A curriculum flow chart is also utilized during these advising sessions to assist students in understanding the directional flow of the entire curriculum and in linking prerequisites and course loads required for program completion within specified time parameters.

In addition, the Department of HDC conducts multiple, highly intensive orientation meetings each semester addressing critically important issues and concerns within specific curricular areas. These sessions include a Program orientation meeting, a clinical experience orientation meeting, and a comprehensive examination orientation meeting. Historically, Program orientation meetings have been conducted each fall and spring semester in the HDC 501 Fundamental Issues and Ethics in Counseling class—the initial course in the HDC curriculum. This course includes both prospective and fully admitted students and all full-time/tenure stream faculty are in attendance during the orientation session. Information is provided on a full range of issues, including: faculty introductions with special attention to each member’s background, training and research interests; admission requirements, processes and protocols; CACREP accreditation; review of all curriculum requirements within each area of study including prerequisites and course sequencing; advising protocols; WPI protocols; assistantship opportunities and application protocols; recommended student membership in the American Counseling Association (ACA) and the Illinois Counseling Association (ICA); membership requirements for induction into Sigma
Sigma Upsilon/Chi Sigma Iota; professional identity; professional development opportunities; practicum and internship requirements and placement opportunities and protocols; closure options and protocols; licensure and certification requirements; and employment opportunities.

In the Fall of 2009 the Department initiated major changes in its orientation structure and protocols. These changes included a greatly-expanded agenda with the following additional features:

1. A four-hour format within a separate venue (i.e., outside the context of the HDC 501 class);
2. Welcoming remarks by Dean Larry Stonecipher;
3. The inclusion and introduction of all adjunct faculty members within the Department;
4. More comprehensive coverage of specific agenda items;
5. Detailed review of a comprehensive HDC curriculum flow chart and accompanying documents designed to aid faculty and students in: program planning; advising; understanding the directional flow of the entire curriculum; linking of prerequisites and course loads required for program completion within specific time parameters; graduate contract development; and accurate tracking of ongoing curricular changes and refinements;
6. Student dispositions;
7. Yearly student evaluations;
8. Prepracticum evaluations;
9. Academic appeal policies;
10. Distribution of folders containing selected print-based information materials and Department forms; and
11. Refreshments.

As of the preparation of this document, the fall 2011 HDC orientation meeting will include further expansions:

1. Presentations delivered by directors and administrators of campus offices of particular importance to HDC students, including:
a. Dr. Clarice Ford, Associate Dean of Student Services/Executive Director of the Diversity Center (addressing Diversity Center, Women’s Center, and LGBTQ Resource Office);

b. Kandice Pryor, Interim Director and Clinical Instructor, Center for Teaching and Learning (CTL) (addressing CTL services);

c. Leslie DeFrates, Assistant to the Vice Chancellor for Graduate Education and Research (addressing Graduate Assistantship and OPSI opportunities and protocols);

d. Emily Boles, Instructional Designer, COLRS;

e. Sarah Sagmoen, Visiting Assistant Professor, Information and Reference Desk Manager and Library Liaison for HDC (addressing UIS Library services); and

f. Dr. Judy Shipp, Executive Director, Counseling Center and Student Support Services (addressing Counseling Center services; Office of Disability services; and Conference Support for student presentations).

2. A vocal performance by an HDC student;

3. A formal presentation on student conduct and professional behavior;

4. Outcome of the recent CACREP self-study and re-accreditation process;

5. The newly accredited Marital, Couple and Family Counseling (MCFC) area of study and its requirements;

6. Student petition protocols;

7. Update on Department closure process changes; and

8. Graduation contract submission protocols.

Agenda items addressed during the Clinical Experience Orientation Meeting include:

1. Clinical experience eligibility requirements;

2. Site approval protocols (i.e., the approval process for new clinical sites);

3. Site supervisor approval protocols;
4. Site selection protocols;
5. Liability insurance requirements;
6. Clinical hour requirements (direct service and indirect service);
7. Record-keeping protocols;
8. Video taping requirements;
9. Ethical requirements;
10. Supervision (individual and group formats);
11. Student responsibilities;
12. Faculty supervisor’s responsibilities;
13. Site supervisor’s responsibilities;
14. Review of all clinical experience forms (site questionnaire; checklist; agreement form; activity log; tracking form; on-site supervisor’s evaluation of student; student evaluation of faculty supervisor; evaluation of site; and faculty supervisor’s evaluation of site);
15. Evaluation protocols; and

Agenda items addressed during the comprehensive examination orientation meeting include:

1. Eligibility requirements;
2. Enrollment requirements;
3. Examination dates and locations;
4. Description of the twin comprehensive examination components: 1) the CPCE—a standardized, multiple choice, 160-item paper and pencil examination created by the Center for Credentialing and Education; and 2) the clinical case presentation—a one-hour oral examination in which carefully selected segments of videotaped clinical sessions with internship clients are presented to demonstrate one’s clinical competence and theoretical approach to counseling. The case presentation
component also includes development and distribution of three handout 
documents: a) a description of one’s theoretical orientation; b) a case summary; 
and c) a reference list;
5. CPCE fee and scoring protocols;
6. Presentation requirements (e.g., content, format, and time parameters);
7. Preparation recommendations;
8. Distribution and discussion of comprehensive examination guidelines document;
9. Distribution and discussion of exemplar materials;
10. Evaluation protocols; and
11. Remediation protocols.

The purposes, content and practices of the Department of HDC are communicated to students 
through these orientation meetings in conjunction with: 1) regularly updated material placed on 
the HDC web page; 2) both formal and informal interactions with the student’s Advisor; and 3) 
presentation modules within HDC 501 Fundamental Issues and Ethics in Counseling, the entire 
course within the Department. HDC also maintains five large bulletin boards located in the lobby 
of the College of Education and Human Services. These boards serve as readily available posting 
sites for information specific to: the Department of Human Development Counseling; Community 
Counseling; School Counseling; Marital, Couple and Family Counseling; and Sigma Sigma 
Upsilon, the Department of HDC’s chapter of Chi Sigma Iota (the international honor society for 
counseling students). Further, the Department Chair, Office Support Specialist, Graduate 
Assistant, and Student Representative serve as ongoing sources of information, direction, support 
and referral for HDC students.

In addition to these multiple, inter-related mechanisms and mediums designed to provide students 
with essential information, guidance, direction and support, Department faculty serve as mentors 
to HDC students in a variety of ways. For example, HDC faculty members strongly identify with 
the American Counseling Association (ACA) and its divisions, branches, and affiliate 
organizations. This identification is actively modeled and woven throughout the Department 
curriculum in order to promote students’ development of a professional identity as counselors. 
Indeed, HDC students are introduced to ACA during the first course in the curricular sequence, 
HDC 501 Fundamental Issues and Ethics in Counseling, where they are encouraged to become 
active members of ACA as well as the Illinois Counseling Association (ICA). Students are also 
required to provide proof of professional liability insurance before they are permitted to see clients 
during their practicum experience (HDC 587) and procurement of this insurance coverage is 
recommended through ACA. Other forms of mentorship include involving students in faculty
members' research and formal presentations at professional conferences; involving students in professional advocacy and lobbying initiatives; co-facilitating LGBTQ groups with HDC students; and engaging students in campus initiatives and events such as "Day of Dialogue," Safe Zone training programs, and serving on the Safe Zone Steering Committee.

Further, announcements regarding a full range of emerging Department developments are sent directly to students via a comprehensive electronic mail list. These announcements include: curricular changes; course offerings; deadlines; orientation meeting dates, times and locations; clinical experience details; workshops; conferences; and opportunities related to employment, volunteer work, and lobbying initiatives. Emerging developments are also disseminated by HDC faculty in their classes along with distribution of print-based materials; and postings are made on the Department's five bulletin boards: general Department material; Community Counseling; School Counseling; Marital, Couple and Family Counseling; and Sigma Sigma Upsilon/Chi Sigma Iota.

Although Department faculty consider its advising services, strategies, protocols and materials to be appropriate and beneficial to students, maintaining and delivering these services and materials are highly time and labor intensive; therefore, refinements in these areas are an ongoing focus of consideration and discussion.

Finally, while advising is evaluated within the Department of HDC during the annual faculty professional performance/merit review process, it is not rewarded—advising and responding to students' needs is simply expected and highly valued by HDC faculty.

Retention.

Retention procedures within the Department of HDC center around the quality and intensity of the relationships faculty members establish and maintain with students from admission through completion of closure protocols. HDC faculty members consistently go to extraordinary lengths to support, to guide, to validate, to challenge, to encourage, and to inspire their students. Given the nature of counseling as a profession, faculty members' responsibilities as gatekeepers to the profession, the demands of licensure and certification, and the Department's strong emphasis on the "self of the therapist" throughout the curriculum, faculty members' interactions with students are necessarily intensive. Over time, students come to the realization that the training they receive here is not limited to clinical theory and technique. They come to the realization that their ability to promote healing within others is inextricably linked to their willingness to confront their own limitations, their openness to feedback that can be difficult to hear, and their courage in taking risks and making themselves vulnerable. Teaching and learning at this level of intensity can be both frightening and transformative and it is within this realm that the Department of HDC's retention procedures are grounded. It is within the nature and quality of HDC faculty members' relationships and interactions with students during the next eight years that retention efforts will continue to derive real strength and power (please see Student Achievements under Section II).
IV. FACULTY

Demographics.

The Department of Human Development Counseling has four full-time tenure stream faculty members--two female and two male. Three faculty members are Caucasian/non-Hispanic and one is Asian Indian. Dr. Bill Abler, Associate Professor and Program Chair, holds a Ph.D. in Family and Child Ecology with a specialization in Marriage and Family Therapy and was tenured in May 2000. Dr. Nithya Karuppanswamy holds a Ph.D. in Child Development and Family Studies with a specialization in Marriage and Family Therapy and was appointed in fall 2005. Dr. Holly Thompson holds a Ph.D. in Counselor Education and was appointed in summer 2005. Dr. Jim Klein holds an Ed.D. in Counselor Education and was appointed in fall 2007. As of the preparation of this document, Drs. Karuppanswamy and Thompson are awaiting final approval of their tenure applications by the University of Illinois Board of Trustees and Dr. Klein has successfully completed his four-year review process. In addition, the Department of HDC has just completed a successful search for a fifth tenure-stream faculty member and is awaiting the arrival of Dr. Ann McCaughan in August, 2011. Dr. Abler maintains a standing NIA related to program administration.

In its efforts to recruit faculty from under-represented groups, the Department of HDC exercises great care in adhering to the Affirmative Action (AA) and Equal Employment Opportunity (EEO) guidelines and principles provided by the UIS Office of Access and Equal Opportunity in conducting faculty searches. It should also be noted that the counseling profession, itself, is keenly aware of the higher representation of caucasian women within the ranks of its membership. While historically, faculty membership within HDC has been predominantly male, in recent years, a more balanced gender distribution has been established within the Department with two females and two males (and, as noted previously, soon to become 3/2 with the pending arrival of Dr. Ann McCaughan). Over time, HDC has included at least one member belonging to a different race or ethnic group and/or having differential physical abilities. This includes faculty who have permanent nonresident alien status with religious and language diversity in personal background. The multiplicity of worldviews present within this faculty composition reflects the diversity among people in society. In addition, the multiplicity of professional identities among full-time and part-time faculty within HDC serves to enrich the quality of counselor education provided to students. In fact, this diversity--this commitment to inclusive excellence--prepares HDC students to become highly skilled and effective members of interdisciplinary treatment teams within a broad range of professional clinical practice settings. Finally, providing active, focused mentorship of junior faculty is a fundamental value and a major priority within the Department of HDC.
Fit with Program.

The Department of HDC considers its faculty to be an excellent fit with Department goals and objectives. Each faculty member’s credentials include advanced training and experience relevant to the Department’s clinical emphasis. Each faculty member also maintains a strong commitment to excellence in teaching and providing students with richly varied opportunities for both personal and professional growth and development. Further, HDC faculty respect and appreciate diversity of perspective and opinion among themselves and are committed to working collaboratively to support each other and to achieve Department goals and objectives.

More specifically, three of the “soon-to-be-five” Department faculty members hold doctoral degrees from CACREP-accredited counselor education programs and a fourth faculty member completed her master’s degree in HDC’s own CACREP-accredited program. Further, with the pending arrival of Dr. Ann McCaughan, the Department of HDC will approach a more balanced distribution of faculty assigned to each of its three accredited areas of study: Community Counseling (Drs. McCaughan and Thompson), School Counseling (Dr. Klein), and Marital, Couple and Family Counseling (Drs. Abler and Karuppaswamy). In addition, Drs. Abler and Karuppaswamy’s specialized training in Marriage and Family Therapy will significantly enhance the teaching/learning experience for HDC students enrolled in the Department’s newly accredited Marital, Couple and Family Counseling area of study.

Faculty Achievements.

Each member of the HDC faculty is deeply committed to excellence in teaching and continually engaged in the process of developing and refining innovative, experiential activities for students both within and outside the classroom. Department faculty are also fully engaged in an extremely broad range of scholarship and service-related activities—activities that support and reinforce CACREP standards and requirements as well as the specific objectives developed by the Program itself.

Selected major activities and contributions of tenure-track Department faculty include the following:

**Dr. William Abler**

Dr. Abler is the Chair of the Department of Human Development Counseling, Co-Coordinator of the Marital, Couple and Family Counseling area of study and Director of the Department’s Counseling and Therapy Training Center (CTTC). He is a licensed Marriage and Family Therapist and a Clinical Member of the American Association for Marriage and Family Therapy (AAMFT). He also holds memberships in the Illinois Association for Marriage and Family Therapy (IAMFT) and the American Counseling Association (ACA).
Examples of Dr. Abler’s key scholarly and professional activities include: completion of a book-length manuscript on grief and loss; co-sponsorship (with the Human Services Education Council) and coordination of a professional workshop by internationally renowned traumatology and compassion fatigue expert, Charles Figley, Ph.D. on the UIS campus (and a return visit to Memorial Medical Center’s Wedenberg Conference Center), including securing $4,000 in University support for registration fee waivers for UIS students; service as Department Liaison to CACREP including development and submission of numerous accreditation-related documents and reports (e.g., a 145-page Addendum to the CACREP Accreditation Self-Study Report in 2002; a 125-page Institutional Response to the CACREP Site Visitation Team’s Evaluation Report in 2002; a 285-page CACREP Accreditation Interim Report in 2004; a 70-page CACREP Accreditation Mid-Cycle Report in 2006; and a second, 140-page CACREP Accreditation Interim Report in 2006); ongoing responsibility for maintaining accreditation and ensuring compliance with accreditation requirements; multiple collaborative contributions to the Department of HDC’s recent reaccreditation of the Community and School Counseling areas of study and initial accreditation of the Marital, Couple and Family Counseling area of study; presentation of original poems at the Museum of Funeral Customs Annual Poetry Readings from 2003 through 2008, subsequently published by the Illinois Humanities Council; delivery of formal presentations on portraiture and its significance in contemporary Western culture at the CEHS Alumni Council’s Faculty Emeriti Recognition and Portrait Unveiling events from 2006 through 2009 and again in 2011; Tenure Review Committee member, Sangamon Auditorium Foundation Board member; and serving as a Marriage and Family Therapist Continuing Education Sponsor for the State of Illinois Department of Financial and Professional Regulation.

Dr. Nithya Karuppaswamy

Dr. Karuppaswamy is Co-Coordinator of the Marital, Couple and Family Counseling area of study and Clinical Experience Coordinator for the practicum and internship components of the HDC curriculum. She holds memberships in the American Association for Marriage and Family Therapy (AAMFT), the American Counseling Association (ACA), the Illinois Counseling Association (ICA) and the Association of Multicultural Counseling and Development (AMCD), among others.

Examples of Dr. Karuppaswamy’s key scholarly and professional activities include: mentoring HDC students in both individual and co-presentations at multiple Illinois Counseling Association (ICA) annual conferences; presentations at the Indian Association of Family Therapy International Conference in New Delhi and the National Institute for Mental Health and Neurosciences International Conference in Bangalore; ongoing collaborative research with colleagues at the University of Denver and Alliant University on the impact of immigration experiences on female immigrants; a co-authored chapter for the book, *Voices of Color: First-Person Accounts of Ethnic Minority Therapists*; ongoing research on the use of multimodal assessment techniques by U.S. clinicians with
immigrant clients; serving as co-investigator (with Kerry Poynter, Director of the UIS LGBTQ Resource Office) of an ongoing IRB-approved campus-based study (“A Needs Assessment of LGBTQ Students at UIS: A Multi-phase Qualitative Study”); multiple collaborative contributions to the Department of HDC’s recent reaccreditation of the Community Counseling and School Counseling areas of study and initial accreditation of the Marital, Couple and Family Counseling area of study; Co-Chair of the HDC Advisory Board; facilitation of infant adoption workshops at UIS; service as a Safe Zone Ally; CEHS Personnel Committee Chair; CEHS Curriculum Committee; CEHS Alumni Council member; UIS Research Board; Diversity Committee member; Campus Senate Committee on Rights, Opportunity, Access and Diversity; Campus Committee on Academic Searches, Recruitment and Retention; Personnel Policies Committee; LGBTQ Steering Committee; active participation in the Higher Learning Commission accreditation process; and panel member for the UIS New Faculty Orientation.

**Dr. James Klein**

Dr. Klein is the Coordinator for the School Counseling area of study and serves as the Department’s Admissions Coordinator. He holds memberships in the American School Counselor Association (ASCA), the Illinois School Counselor Association (ISCA), the Illinois Counseling Association (ICA) and the Illinois Association of Student Assistance Professionals (IASAP), among others.

Examples of Dr. Klein’s key scholarly and professional activities include: volunteer service efforts with local high schools (e.g., Glenwood High School, Jacksonville High School and Pleasant Plains High School); collaboration with HDC students in both research and formal presentations at professional conferences such as the Illinois School Counselor Association (ISCA) Annual Conference, the Illinois Counseling Association (ICA) Annual Conference, and the Illinois Association of Student Assistance Professionals (IASAP) Annual Conference; facilitating service learning projects within local schools for students enrolled in the school counseling specialization class; advocacy initiatives with School Counseling students (e.g., “Day on the Hill” and Illinois School Counseling Association activities); multiple collaborative contributions to the Department of HDC’s recent reaccreditation of the Community Counseling and School Counseling areas of study; service on numerous committees at the College and University levels, including: the Council on Professional Education (COPE), Unit Area Assessment Team (UAAT)/ISBE Accreditation, the Institutional Review Board (IRB), the Safe Zone Steering Committee, the Undergraduate Graduation Speaker Selection Committee, the Committee on Student Discipline, and service as an Academic Integrity Hearing Panelist; collaborating and partnering with other Illinois institutions of higher education to advance and clarify the field of school counseling (e.g., a manuscript currently in revision developed among colleagues at UIS, ISU, SIU and NIU); appointment to the State Advisory Committee for Engaging School Counselors in Career Resources through Southern Illinois University; Editorial Board Member for the *Georgia School Counselors Association (GSCA) Journal*;
Group Training Consultant for Prevention First of Illinois; Northern Illinois University Counseling Program Advisory Committee Member; and Governing Board Member of the Illinois Association of Student Assistance Professionals.

Dr. Holly Thompson

Dr. Thompson is the Coordinator for the Community Counseling area of study and the Department's Comprehensive Examination process. She serves as the Faculty Advisor for Sigma Sigma Upsilon (the Department of HDC's chapter of Chi Sigma Iota, the honor society for the counseling profession), Coordinator for the National Board of Certified Counselors (NBCC) Examination, and she holds memberships in the American Counseling Association (ACA), the American Mental Health Counseling Association (AMHCA), the Association for Counselor Education and Supervision (ACES), and the Illinois Counseling Association (ICA) among others.

Examples of Dr. Thompson's key scholarly and professional activities include: a strong focus on international counseling identity (e.g., a co-presentation at the International Counseling Conference in Shanghai, China; a co-presentation at the American Counseling Association International Conference in Montreal, Quebec; and a co-authored article on the role of collaboration, research and training in promoting an international counseling identity); several presentations at the Association for Counselor Education and Supervision (ACES) Annual Conference; a co-presentation at the Western Association for Counselor Education and Supervision Annual Conference; several presentations at the Illinois Counseling Association's (ICA) Annual Conference; multiple collaborative contributions to the Department of HDC’s recent reaccreditation of the Community Counseling and School Counseling areas of study, particularly the coordination of the Site Team; Co-Chair of the HDC Advisory Board; engagement and advocacy with important LGBTQ issues (e.g., development and facilitation of the UIS Safe Zone training program); LGBTQ Resource Office Council membership; participation (with Dr. Denise Summers) in the planning and implementation of a Qualitative Research Symposium at UIS; Strategic Planning Committee Member; CEHS Curriculum Committee Chair; Academic Integrity Council member; Campus Senate membership and Secretary/member of the Senate Executive Committee; serving as a CACREP Site Team Reviewer; conducted a ten-week workshop for agency staff on strategies for working with families in need at the Macoupin County Mental Health Center; Editorial Board member for the Journal of International Counseling and Education (JICE); and Chair of the School Counseling Interest Network.

Technology.

A major example of the Department of HDC's use of instructional technology is its Counseling and Therapy Training Center (CTTC), a 1200 square foot clinical training facility constructed on the fourth floor of the UIS Public Affairs Center (PAC 494-499) in the fall of 1994. Designed by
Dr. Abler, the CTTC is a state-of-the-art facility that fully addresses CACREP standards for a counseling laboratory conducive to modeling, demonstration, instruction and training that is both available and used for clinical instruction. The Center provides both faculty and students with a rich variety of tools and equipment that support excellence in teaching and learning and make the application of theory come alive for students.

The CTTC is soundproofed, accessible, and maximally flexible, housing three treatment rooms and three accompanying observation rooms outfitted with one-way glass that permits any room to function as a treatment or an observation room. Multiple rooms may be utilized simultaneously by students, faculty, off-site supervisors from community agencies and various client populations. A variety of treatment modalities may be employed and variable lighting controls permit training in imagery and progressive relaxation/stress reduction techniques. The Center is equipped with ceiling-mounted microphones, ceiling-mounted pan-and-tilt video cameras, and wall-mounted flat-screen monitors as well as “bug-in-the-ear” communication systems and advanced, multimedia technology equipment and interfaces (purchase, installation and upgrading of electronic equipment has been an ongoing developmental process since the physical structure of the facility was constructed—the result of a series of intra-University grants submitted by Dr. Abler to a variety of funding sources). Technical consultation and support for the facility is provided by Information Technology Services (ITS) staff.

In addition to use in a variety of clinically-based HDC courses, the Training Center has served as a venue for Program admission interviews and by HDC students in clinically-based data gathering protocols for master’s thesis research projects.

Other forms of instructional technology used by HDC faculty include Blackboard and Smartboard within course contexts as well as use of the Counseling and Therapy in Video database, an online collection of over 350 professionally produced videos of counseling-related lectures, presentations, interviews, documentaries, demonstrations, and actual clinical sessions and consultations. Funding was also recently secured for the purchase and installation of DVD/VCR players and flat-screen monitors in faculty offices for use in individual supervision, consultation and review of students’ clinical sessions during practicum and internship.

**Faculty Development.**

Drs. Karuppuswamy, Klein and Thompson were assigned NIA’s during the initial semester of their appointment to facilitate the development of new course materials, research agendas, conference presentation materials, collaborative intra-University networks, and other preliminary professional development activities. These NIA’s provide critically important support for new faculty to hit the proverbial ground running as they begin to build their careers within the Department of HDC and the University of Illinois Springfield.

Dr. Karuppuswamy was also assigned an NIA in fall 2005 to examine the viability of the Department’s Career Specialist Certificate Program and in fall 2008 to conduct a Program
evaluation survey for the CACREP re-accreditation self-study process (specifically, Department alumni, site supervisors, current students, and faculty). Dr. Thompson was assigned an NIA in spring 2007 to develop a supervision orientation for the Department’s clinical site supervisors and in spring 2008 to address a variety of issues related to the development of HDC’s accreditation self-study process. As noted previously, Dr. Ahler is assigned standing NIAS for Program administration and related initiatives.

Although limited resources due to the current budget crisis inevitably affect faculty development activities, as do the time constraints imposed by limitations in HDC faculty resources, Department faculty avail themselves of campus-based faculty development opportunities whenever possible (e.g., brown bags and workshops addressing personnel policies, diversity, LGBTQ issues, and Blackboard).

Other HDC faculty development investments include attendance at professional conferences at the State, national, and international levels whenever possible, presentations made within these venues, and maintaining memberships and service commitments in a wide variety of professional organizations (please see Faculty Achievements under Section IV. Faculty).

V. LEARNING ENVIRONMENT AND SUPPORT SERVICES

Student Involvement with Program Activities.

Two primary examples of student involvement with Department activities are membership in its honor society and its Department committee. The Department of HDC sponsors and supports Chi Sigma Iota, the international honor society for counselors-in-training, counselor educators, and professional counselors. Its mission is to promote scholarship, research, professionalism, leadership and excellence in counseling, and to recognize high attainment in the pursuit of academic and clinical excellence in the field of counseling.

Among the many benefits of student membership in Chi Sigma Iota is professionalism, as demonstrated by active, service-oriented university-based chapters composed of neophyte and experienced professional counselors. Another is recognition of the pursuit of personal excellence—the Society seeks to identify and encourage students who have made a commitment to excel in all that they do. Finally, Chi Sigma Iota provides student members with opportunities to develop leadership skills by actively encouraging participation in professional conferences through papers, articles, and workshops focused on leadership issues and themes.

Membership within Chi Sigma Iota is open to qualified candidates without regard to age, ethnicity, gender, disability, national origin, race, religion, and/or sexual orientation. Membership requirements include acceptance into a counseling program, completion of 12 credit hours, a 3.5 or better GPA, high standards of personal and professional excellence, and a commitment to support the purposes of the society.
Dr. Holly Thompson serves as the Faculty Advisor for Sigma Sigma Upsilon, the UIS chapter of Chi Sigma Iota, which has approximately 45 currently enrolled members.

HDC Department policy stipulates that a student representative and the Department graduate assistant will serve as voting members of the Department committee. While HDC adheres to University protocols in securing a graduate assistant from a pool of candidates within the student population at large, an open election is held each fall to select a Department degree candidate to serve as a student representative to the HDC Department committee for the academic year. Interested students may nominate themselves during the first week of fall classes. While only degree candidates may run for office, all applicants as well as candidates may vote in the election. The student representative and the graduate assistant participate as voting members of the Department committee at all meetings except executive sessions in which personnel protocols and student performance and progress issues are addressed.

HDC faculty have found that input from these students has been invaluable—offering a unique perspective and a voice that only students can provide, the student representative and the graduate assistant enable the Department committee to be more responsive to student needs and interests in their deliberations regarding Department policy and operations.

It should be noted, here, that the role of the graduate assistant in the Department of HDC emphasizes both personal and professional development within the context of providing assistance and support in meeting Department goals and objectives. This emphasis is clearly articulated in the HDC graduate assistant position description:

The primary role of the Graduate Assistant in the Department of HDC is to provide assistance and support to faculty, students, and staff under the direction of the Department Chair. This assistance and support is expected to center around goals and objectives related to Department operation, development, evaluation, and coordination of special activities. The Department of HDC clearly recognizes the importance of the Graduate Assistant’s investment in his/her own degree program. Therefore, HDC faculty and staff are committed to providing a supportive and respectful environment in which the Graduate Assistant may complete his/her chosen course of study while gaining “real world” professional experience within an academic setting. This “real world” experience is expected to include development and refinement of skills in working both independently and collaboratively within a team-based professional environment and the discovery and utilization of new strengths and abilities.

HDC faculty also strongly encourage their students to become active members of the American Counseling Association (ACA) and the Illinois Counseling Association (ICA) as well as appropriate affiliated divisions based on their area of specialization and interest. In conjunction with these efforts, Department faculty go to considerable lengths to encourage students to accompany them to professional conferences at both the State and national levels to facilitate exposure to leaders in the field as well as network building, employment, and doctoral training.
opportunities. In addition, HDC faculty members invite students to serve as co-presenters at these professional conferences. Further, Department faculty regularly seek and coordinate opportunities for students to provide assistance to conference coordinators in exchange for waiving of registration fees.

As of the preparation of this document, the Department has not formulated plans for changes in student participation designed to better achieve program objectives.

**General Curricular Support.**

HDC faculty members are extremely pleased with the quality of Brookings Library’s holdings and services, laboratories, equipment, and space in relation to the Department’s needs. Major journals within the three HDC areas of study are held by the library (e.g., *Journal of Counseling and Development; Journal of Mental Health Counseling; Journal of Multicultural Counseling; The Professional School Counselor; Journal of Marital and Family Therapy; Journal of Feminist Family Therapy; Contemporary Family Therapy; and Family Process*), as well as many other journals needed for faculty members’ areas of particular interest and expertise. Library holdings in the counseling area are excellent and the interlibrary loan process has consistently proven to be both efficient and swift.

HDC faculty are also extremely pleased with the quality of support provided by library liaisons specifically assigned to the Department. This support includes assisting HDC students and faculty in accessing professional resources, assessment instruments, and interpretation aids. In addition to providing excellent individual support to students and faculty, the library liaison regularly provides in-service training to students enrolled in core classes (e.g., HDC 577 Research Methods) as well as acquiring training videos to support classroom instruction and clinical supervision. These support services are an ideal complement to the collection of materials maintained by individual HDC faculty members. These materials are frequently utilized in the classroom and made available to students on an individual basis via consultation in faculty members’ offices—particularly during clinical supervision sessions.

In addition to active utilization of library holdings and services, Department of HDC faculty work extremely closely and collaboratively with the UIS Counseling Center, Career Development Center, the Office of Disability Services, and the Center for Teaching and Learning. Each of these campus units provides a comprehensive range of specialized services that have proven indispensable to HDC faculty in responding to student needs within numerous domains and arenas (e.g., referrals for counseling, accommodations, testing, consultation, proctoring, tutoring, examination preparation, and editorial support). Department of HDC faculty take considerable pride in noting that each of these units also consistently hire HDC students as graduate assistants.

**Computer Technology.**

HDC faculty remain extremely pleased with the full range of equipment, services, technical
assistance and support for the use and maintenance of computer-based electronic equipment throughout the University community provided by Information Technology Services (ITS) under the direction of Farokh Estabi, Associate Provost and CIO. Equipment quality, availability, accessibility and responsiveness to troubleshooting questions and concerns are considered outstanding. In fact, HDC faculty have been known to assert, “This is the best place I’ve ever been for technology!”

Department faculty consider the following ITS resources and services to be of particular value and utility: “smart” classrooms throughout the campus incorporating data projectors and networked computer stations where classroom presentations can be augmented by content obtained from the internet, specialized software packages, videotapes, CD-ROMS, and DVDs; computer labs; the Blackboard Learning System; the multimedia computer lab/classroom; multimedia production resources; interactive tutorial materials; multimedia software workshops; supervised computer access for students and faculty within multiple computer labs; technical support for software packages; and technology-based training and maintenance of a hotline for immediate assistance through the UIS Technology Support Center (TSC)/Help Desk.

Finally, the Department of HDC considers its Counseling and Therapy Training Center (CTTC), located on the fourth floor of the Public Affairs Center, to continue to be ideally suited to its clinical training needs. The one-way glass observation rooms, ceiling mounted pan-and-tilt cameras, microphones, and monitors, bug-in-the-ear communication systems, playback equipment, multimedia technologies, and other features permit faculty to develop a variety of creative ways to engage students in both personal and professional development activities.

Future Needs.

Arranging for practicum and internship students to provide clinical treatment services to members of the local community, on a reduced-fee basis, remains a primary curricular support-related future need during the next review period. These services would be provided in the Department’s Counseling and Therapy Training Center (CTTC) under the direct supervision of Department faculty from behind the one-way glass, utilizing the full range of electronic and multimedia technology equipment presently available in the facility. Movement to this final stage in the development of the CTTC will require additional Department faculty and a graduate assistant or student worker dedicated to the Center (please see item 1 in Previous Program Review Recommendations under Section IX. Summary and Recommendations and item 2 in Program’s Recommendations for the Current Review under Section IX. Summary and Recommendations).

VI. STUDENT DEMAND AND PROGRAM PRODUCTIVITY

Student Enrollment.

As the previous academic program review document was in preparation in 2002 (and submitted in 2003), the Department of HDC was just entering a period of “rebuilding” following several years
of tumult and turbulence, including the retirement of no less than four long-standing tenured faculty members (Drs. Genskow, Crowley, Pancrazio, and Lanier) and the departure of one newly appointed faculty member due to frustration over personnel-related concerns. Dr. Ahler was then joined by two new faculty hires—Dr. Kyle Weir in Fall 2000 and Dr. Nancy Firth in Fall 2002. However, the momentum generated by this infusion of new faculty resources was short-lived as both of these newly hired faculty members had left the University by 2006 (one due to non-reappointment in 2005 and the other to accept a faculty position at another institution in 2006). Momentum was regained in the summer and fall of 2005 with the appointments of Drs. Thompson and Karuppuswamy, respectively; the arrival of Dr. Klein in the fall of 2007; and the pending arrival of Dr. McCaughan in Fall of 2011. Therefore, it may be reasonable to assert that the Department of HDC has been engaged in an extended period of rebuilding punctuated by a series of faculty arrivals and departures—a pattern hardly conducive to serving the needs of enrollment growth. Indeed, as noted in Table 2, HDC enrollment dropped from approximately 80 at the close of the last academic review period to a low of 61 in AY 08-09. However, as of the preparation of this report, Drs. KaruppuSwamy and Thompson have been awarded tenure; Dr. Klein has successfully completed his four-year review process, Dr. McCaughan is excitedly preparing to move to Springfield and the Department of HDC’s intensive focus on increasing enrollments over the past several years is pointing toward a fall 2011 enrollment that will exceed 115 students.

It is hoped that these recent developments bode well for the emergence of an era of rebuilding in HDC that will emphasize uninterrupted “flow” rather than “ebb.” These positive elements will also serve the Department’s efforts to meet the pending challenges associated with increasing its curriculum from 50 credits to 60 credits as mandated by CACREP (please see Item 3 in Program’s Recommendations for the Current Review under Section IX, Summary and Recommendations).

Program Productivity Data and Analysis.

As a CACREP-accredited program, the Department of HDC must exercise great care and caution in ensuring that the design, structure, and operation of all aspects of its curriculum remain in compliance with CACREP standards. For example, HDC’s 50 credit hour requirement is consistent with other CACREP counselor education programs in Illinois and throughout the United States. Similarly, the Department very carefully adheres to the CACREP requirement to limit each of its practicum sections to a maximum of five students and its internship to a maximum of ten students. The Department also rather anxiously measures its ratio of FTE students to FTE faculty against the CACREP standard of 10:1. In reflecting on this last standard, HDC’s headcount trend over the past several years is quite telling: Fall 2008: 61; Fall 2009: 70; Fall 2010: 92; and Fall 2011: expected to reach 115 with four full-time, tenure-stream faculty members. Although the Department is looking forward to the arrival of its fifth full-time tenure-stream faculty member, Dr. Ann McCaughan, in Fall 2011, the prospect of continued enrollment growth will present significant challenges in maintaining compliance with student-faculty ratio requirements and in satisfactorily meeting the needs of currently enrolled students. It should also
be noted, here, that the average class size within HDC is 15, the Department does not offer courses at off-campus locations, and only two (formerly) cross-listed courses have been delivered in blended format.

In order to place these figures and patterns into a meaningful comparative context, it may be helpful to consider that although accreditation standards drive a host of structural, curricular and procedural elements and requirements within all CACREP-approved programs nationally (e.g., course content as well as caps, credit hours and student-to-faculty ratio), individual programs vary in the resources available to them to meet those standards. For example, in comparison with HDC’s 115 students and four (soon-to-be-five) full-time, tenure-stream faculty, Northern Illinois University’s CACREP-accredited Master’s degree program in Counseling has approximately 120 students and seven full-time, tenure-stream faculty while Eastern Illinois University’s CACREP-accredited Master’s degree program in Counseling has approximately 80 students with seven full-time, tenure-stream faculty. However, attempting to make meaningful comparisons between the Department of HDC and other UIS graduate programs in terms of credit hours, enrollments, and degree production is fraught with difficulties. A partial listing of these difficulties would include significant differences in: 1) program mission, goals and objectives; 2) curriculum (including online/blended/on-ground delivery formats); 3) admission and closure protocols; 4) accreditation organizations; 5) clinical experience requirements; 6) professional identity; and 7) career path/trajectory. Nevertheless, the Department of HDC and the Department of Human Services (HMS) are the only graduate-level programs at UIS that prepare students for a career in the helping profession. Using this circumstance as a basis for comparison, enrollment figures and total credit hours generated within HMS significantly and consistently exceed those of HDC. However, HDC’s degree production is essentially equal to that of HMS during five of the previous eight years.

As noted elsewhere in this document, the Department of HDC has been stretched to its limit in addressing a multiplicity of challenges associated with personnel concerns and limitations in faculty resources over the course of the last two program review periods. Despite these challenges, the Program has continued to demonstrate an exceptional level of creativity and resourcefulness in the delivery of its curriculum. Indeed, it has successfully retained both CACREP and ISBE accreditation; it has expanded its accreditation status to include a third area of study (Marital, Couple and Family Counseling); it has expanded and enriched its course offerings; and its students’ performance on certification and licensure examinations continues to be exemplary. In addition, Department faculty remain committed to excellence in teaching, supporting each other in their professional development, actively promoting Department growth, and striving to effectively meet the needs of its students. However, in order to meet the demands associated with continued growth as well as maintaining compliance with CACREP student-faculty ratios, additional full-time, tenure-stream faculty are clearly needed.

Demand for Concentrations.

Historically, the Community Counseling area of study has been the strongest student base within
the Department of HDC. However, the recent initial accreditation of the Marital, Couple and Family Counseling area of study has precipitated a significant increase in interest in that concentration (please see Accreditation under Section I. Program Objectives and Structure). Indeed, savvy, well-informed prospective students are keenly aware of the advantages of accreditation in selecting a master’s degree program in a helping discipline that leads to professional licensure. While HDC faculty are delighted with this increase in demand, meeting the demand efficiently and effectively given existing resources is cause for some concern. This concern is exacerbated by the recent CACREP-mandated requirement to increase the HDC curriculum from 50 to 60 credit hours (please see items 1, 2 and 3 in Areas of Concern under Section IX. Summary and Recommendations and items 1 and 3 in Program’s Recommendations for the Current Review under Section IX. Summary and Recommendations) and the ongoing need to transition the Department’s Counseling and Therapy Training Center (CTTC) into a fully-functional treatment facility (please see Future Needs under Section V. Learning Environment and Support Services; item 1 in Previous Program Review Recommendations under Section IX. Summary and Recommendations; and item 2 in Program’s Recommendations for the Current Review under Section IX. Summary and Recommendations). Nevertheless, as noted in multiple sections throughout this document, in spite of faculty resource limitations and challenges, the Department of HDC has been intensively engaged in re-building initiatives during the past review cycle, enrollment is increasing significantly, and students are performing with distinction on State and national licensure and certification examinations.

Minors.

The Department of Human Development Counseling does not offer a minor concentration.

VII. Centrality to Campus Mission

Support of the Campus Vision.

The Department of HDC continues to actively support UIS’ mission and vision for the future in multiple ways. Department faculty remain deeply committed to excellence in teaching as evidenced by the variety of innovative, experientially-oriented activities they bring to the classroom and student evaluations of their work that are consistently well above University averages. As a nationally accredited master’s degree program leading to professional licensure and certification and careers in the helping field, the Department of HDC clearly supports UIS’ public affairs mission, its emphasis on engaged citizenship, and its emphasis on professional education at the master’s level. Personal as well as professional growth and development are primary objectives as students make their way through a curriculum specifically designed to prepare them to “enrich individual lives and make a difference in the real world.”
Relationship to Other Campus Instructional Programs.

HDC continues to maintain positive ties and working relationships with multiple affiliated programs within UIS. Cooperative arrangements (e.g., cross-listed courses) have historically existed with Educational Leadership (EDL); History (HIS); Human Services (HMS); Legal Studies (LES); Psychology (PSY); Social Work (SWK); Sociology (SOC); Teacher Education (TEP); and Women’s Studies (WMS). These positive relationships and cooperative arrangements, based on mutual respect and appreciation, continue on several levels. For example, the Department of Psychology serves as a major “feeder” program for the Department of HDC and HDC faculty as well as faculty from other Programs deliver presentations in each other’s classes, serve on multidisciplinary search committees, and provide consultation on issues and concerns related to licensure, certification, and accreditation across a variety of professional disciplines.

In recent years, HDC has maintained particularly strong linkages with EDL and TEP due to shared accreditation by the Illinois State Board of Education (ISBE). In addition, HDC students seeking Illinois certification as a school counselor who do not possess a current/valid teaching certificate must complete an additional 11 credit hours (i.e., four courses) offered through the Department of Teacher Education (TEP) and the Department of Educational Leadership (EDL):

- TEP 201 Introduction to Education (3 credit hours)
- TEP 222 Child Development for Teachers
  or TEP 223 Adolescent Development for Teachers (3 credit hours)
- TEP 322 Teaching, Learning, and Assessment (for elementary level)
  or TEP 314 Curriculum and Instruction (for secondary level) (3 credit hours)
- EDL 575 Legal Aspects of Special Education (2 credit hours)

Looking toward the future, the Department of HDC remains open to the possibility of establishing new and equally productive relationships with other departments.

Service to Non-Majors.

As per Department policy, any student enrolled in another program within UIS may take up to three HDC courses without being formally admitted into the Program. HDC draws students from a wide range of other programs through this policy and for an equally wide number of reasons (e.g., to prepare for a career in the helping profession or a related field; to explore career options within the helping profession; to pursue promotion or advancement in a current career; to fulfill elective requirements; to fill curricular gaps in professional licensure applications; and to satisfy personal interest in mental health concerns). Some of these students taking HDC courses out of personal and/or professional interest do so under the “non-degree seeking student” designation.
Still other non-majors take courses within the Department of HDC through enrollment in the Department of Liberal and Integrative Studies (formerly the Individual Options program). Further, HDC faculty frequently serve as "outside" members on master's project/thesis committees for students enrolled in other programs.

While the Department of HDC values these enrollment options and patterns, given the demands associated with maintaining its CACREP accreditation status as well as meeting the needs of its fully enrolled students, the Department does not anticipate any significant expansion or changes in its service to non-majors.

Support for General Education.

Historically, as a graduate-level program, HDC has not participated in undergraduate curriculum initiatives. However, as of the preparation of this document, formal arrangements have been made for Dr. Nithya Karuppaswamy to participate in a team-teaching assignment within the Capital Scholars Program during the 2011-2012 academic year. Specifically, Dr. Karuppaswamy will join Dr. Karen Kirkendall and Dr. Jonathan Goldberg to teach CAP 122 Who Am I? Providing incoming CAP students with an opportunity to explore the many conceptualizations of the self within various times and cultures, this course will address: definitional issues; the relation of the self to others and to society; presentation of the self at various stages of life; and a multiplicity of factors affecting understanding of the self, self-development, and community.

Support for Campus Initiatives.

To date, the extent of the Department of Human Development Counseling's investment in online delivery of its course offerings has been limited to a blended version of its HDC 546 Psychopathology and the DSM-IV-TR course and use of discussion boards via Blackboard in various courses across the HDC curriculum. However, with the pending arrival of a new, tenure-stream faculty member, the Department plans to explore the feasibility of expanding its blended/online course offerings.

VIII. Costs

Analysis of Costs.

The cost per credit hour within the Department of HDC in FY03 was $284.76. With the exception of comparatively minor reductions in FY04 and FY05 ($242.02 and $237.02, respectively), Program costs increased steadily over the next four years, culminating in a cost of $476.51 per credit hour in FY09. However, HDCs instructional costs were significantly below statewide averages from FY03 through FY07. FY08 witnessed a moderate increase in HDC costs over statewide averages ($477.75 vs. $446.62) while HDC costs ($476.51) were essentially equivalent to statewide averages ($478.97) in FY09.
These patterns may be linked to multiple factors addressed throughout this document, including:
1) faculty resource limitations and challenges; 2) concomitant decreases in student enrollment; 3) re-building initiatives; 4) the struggle to maintain adherence to the CACREP-mandated student-faculty ratio of 10:1; and 5) maintaining CACREP-mandated course caps for clinical instruction and supervision (practicum and internship).

External Funding.

The Department of HDC has not received any external funding since the last review. The primary focus of efforts to secure external funding during the next eight years will be directed toward establishing the Department’s Counseling and Therapy Training Center (CTTC) as a self-sustaining, fully-functioning, fee-for-service treatment facility (please see Future Needs under Section V, Learning Environment and Support Services; item 1 in Previous Program Review Recommendations under Section IX, Summary and Recommendations; and item 2 in Program’s Recommendations for the Current Review under Section IX, Summary and Recommendations).

IX. Summary and Recommendations

Previous Program Review Recommendations.

Recommendations made in the 2003 HDC program review (in italics) are followed by the Program’s response to each item:

The most fundamental and immediate recommendation by and for the HDC Program would be the hiring of additional Counselor Education faculty in Community and School Counseling in order to avoid revocation of accreditation by CACREP and promote the continued growth and development of the Program. As noted elsewhere in this document, during its accreditation retention site visit in May, 2002, the CACREP Site Visitations Team strongly recommended that the Program have six full-time faculty—two within each of its three areas of study (Community Counseling, School Counseling and Marriage and Family Therapy). Effective May, 2003, the HDC Program’s faculty resources will be limited to Dr. Abler (Marriage and Family Therapy), Dr. Forth (School Counseling) and Dr. Weir (Marriage and Family Therapy). Since the Program’s accreditation status was recently renewed with the understanding that additional faculty would be hired prior to submission of an Interim Report, due August 2004, the presence of only three faculty and lack of any appropriate representation in an accredited area (Community Counseling) is cause for considerable alarm within the Program.

HDC faculty consider its accreditation status to be essential to the integrity and viability of the Program. It sends a powerful message to current students, prospective students and alumni/a/i about the University’s commitment to them as persons and as professionals as they prepare for licensure, certification, and clinical practice in the helping field. It also
says something critically important about the standards, expectations, honor and integrity of the HDC faculty.

Some significant movement has occurred in response to this recommendation since the last academic program review. This movement may be characterized, perhaps, as somewhat erratic: the Department of HDC lost two tenure-stream faculty members (one to non-reappointment and another to accept a position at another university) and gained four (Drs. Karuppaswamy, Klein, Thompson and our newly appointed faculty member, Dr. Ann McCaughan). Specifically, the non-reappointed faculty member completed his “terminal year” in May of 2005 and the faculty member who sought employment elsewhere left the following year. Drs. Karuppaswamy and Thompson were appointed in the spring of 2005 with Dr. Thompson arriving in the summer semester and Dr. Karuppaswamy in the fall. Dr. Klein was appointed in spring 2007 for the fall semester and Dr. McCaughan will begin this fall (2011). Although Dr. Karuppaswamy’s appointment was designated “Community Counseling/Marriage and Family Therapy” due to extreme need, her primary professional identity is centered within Marriage and Family Therapy. Therefore, the present distribution of faculty resources according to the Department’s three areas of study may be conceptualized as follows: Marital, Couple and Family Counseling (Drs. Abler and Karuppaswamy); Community Counseling (Drs. Thompson and McCaughan); and School Counseling (Dr. Klein). Within the context of this distribution, the Department of HDC now has three faculty whose professional training is specifically in Counselor Education (Drs. Klein, Thompson and McCaughan). Finally, in order to achieve CACREP’s recommendation of having two faculty members in each area of study, an additional faculty member is needed within the School Counseling area.

Additional recommendations include the following:

1. Arrange for Practicum and Internship students to provide treatment services to members of the local community under live supervision in the Counseling and Therapy Training Center.

The original design of the Counseling and Therapy Training Center (CTTC) included provision of clinical treatment services by HDC Practicum and Internship students to members of the local community. This final step in the development of the Center has not been possible due to ongoing limitations in faculty resources. Upon expansion of the HDC Program’s faculty resource base and a Graduate Assistant assigned to the Training Center, the Center would move from a clinical role-playing structure in which treatment skills and techniques are merely practiced and refined to the actual provision of treatment services to members of the community on a sliding-fee scale basis. Specifically, all HDC Practicum and Internship students would be required to see clients in the Training Center in addition to community-based sites. Students would be videotaped while conducting a treatment session under live supervision from a supervision team.
comprised of faculty, community professionals, and students positioned behind the one-way glass.

Since completion of the last academic program review, it was neither possible nor feasible to address this recommendation due to the loss of two faculty members; the rebuilding efforts associated with securing four new faculty members; the demands associated with conducting a comprehensive CACREP re-accreditation self-study; seeking initial accreditation of the Marital, Couple and Family Counseling area of study; preparing for a formal site visit; and the massive number of changes made in the Department’s curriculum. However, as of the preparation of this document, development of a plan of action to enable HDC practicum and internship students to provide treatment services to members of the local community under live supervision in our Counseling and Therapy Training Center has been placed on the agenda for HDC’s Fall 2011 Department Retreat at Jubilee Farms in Springfield.

Preliminary discussions have been held to date regarding the resources necessary to make the CTTC a fully functional treatment facility. These discussions have included exploring the feasibility of hiring a seventh HDC faculty member (i.e., following appointment of a much-needed sixth faculty member in the School Counseling area, as described, above) as a Clinical Assistant Professor. This faculty member would maintain an office at the Center and assume responsibility for its daily operation and management in conjunction with teaching specific courses outside the areas of expertise of existing Department faculty (e.g., child therapy and play therapy).

2. Seek funding for electronic equipment upgrades in the Counseling and Therapy Training Center.

While all six treatment and observation rooms in the Training Center are equipped with electronic equipment, one treatment and observation room suite is more fully outfitted than the other two suites. Additional funding is needed for purchase and installation of additional equipment and for upgrades throughout the facility.

Since completion of the last academic program review, funding was secured to fully equip all six treatment and observation rooms in the Department’s Counseling and Therapy Training Center. Funding was also secured to purchase and install electronic equipment upgrades in the facility. Specifically: a) large, flat-panel, wall-mounted monitors in all six rooms (upgrade from cathode ray “tube”-type ceiling-mounted units); b) ceiling-mounted microphones in all three treatment rooms (upgrade from less sensitive, visually intrusive units); c) DVD/VCR combination units in all three treatment rooms; and d) flat-screen desktop monitors for all three observation rooms (upgrade from cathode ray “tube”-type units).

3. Expand/increase minority recruitment initiatives.

The Program considers minority recruitment a priority and is anxious to intensify its recruitment efforts whenever faculty resources permit.
As noted in Recruitment Activities under Section III. Student Characteristics and Academic Support, the Department of HDC has initiated a series of formal steps, activities, and service-related investments designed to expand and increase minority recruitment. The appointments of Drs. Karuppuswamy, Thompson, and Klein have made these developments possible and the Department looks forward to further expansion of its minority recruitment efforts during the next review cycle period (please see item 4 in Program’s Recommendations for the Current Review under this section).

4. Seek accreditation for the Marriage and Family Therapy area of study and approval of this area by the Department of Professional Regulation.

This would serve to further strengthen and expand the HDC Program, significantly enhance recruitment and retention initiatives, and provide a more direct pathway toward licensure and certification for MFT students at UIS.

As reported in Accreditation under Section I. Program Objectives and Structure, effective late July, 2010, the Department of HDC successfully secured initial CACREP accreditation of its Marital, Couple and Family Counseling (MCFC) area of study.

5. Arrange for National Counselor Exam (NCE) preparation workshops to be conducted at UIS by the Illinois Mental Health Counselor Association.

Since UIS is an approved testing site for the NCE, the School Counseling area of study is expected to grow and expand, and preparation workshops are presently available only in the northern part of the State, scheduling preparation workshops at UIS would serve the needs and convenience of HDC students very well.

This recommendation has not been addressed due to resource limitations and the demands associated with attending to other priorities. However, the recent appointment of a new tenure-stream faculty member, the pending elimination of the master’s project/thesis as a closure option, and recent changes in the Department’s comprehensive examination protocols should make this recommendation an achievable goal during the next Program review period (please see item 7 in Program’s Recommendations for the Current Review under this section).

6. Explore the feasibility of incorporating clinically based-portfolios in the closure exercise options available for HDC students.

In response to recommendations made by both CACREP and ISBE, the HDC Program has recently established a task force to explore the feasibility of providing students with an opportunity to use a portfolio format or structure in the development of their Master’s Project. Drs. Forth and Weir are scheduled to attend an electronic portfolio workshop at Northern Illinois University in June 2003 as an integral part of this exploratory process.
Drs. Weir and Forth left the Department of HDC in 2005 and 2006, respectively—within three years of completion of HDC's previous academic program review document. During the interim, rather than a portfolio component, Department faculty explored and implemented several alternative changes in its closure processes, including the incorporation of a clinical case presentation component in its comprehensive examination protocols and the complete elimination of its master's project/thesis option (please see items 7d. and 7e. in Curricular Revisions During the Review Period under Section II. Assessment of Learning Outcomes and Curricular Revisions).

7. Establish a mentoring program within Sigma Sigma Upsilon.

Under the direction of Dr. Nancy Forth, the new Faculty Advisor for the UIS chapter of Chi Sigma Iota, a mentoring program would provide HDC students with formal mechanisms of assistance and support from point of admission into the Program through graduation in the completion of curriculum requirements and the development of a professional identity.

Given Dr. Forth's departure from UIS and subsequent resource limitations, movement toward realizing this recommendation has not been made. Establishing a mentoring program is being carried forward as a Program recommendation for the current review (please see item 5 in Program's Recommendations for the Current Review under this section).

In summary, the Department of Human Development Counseling remains extremely proud of its resourcefulness, tenacity, and commitment to meeting student needs as well as both retaining and broadening its accreditation status, despite a variety of formidable challenges and limited resources. During this review period, HDC faculty have expanded and enriched the curriculum to better equip students for the rigors and demands of professional clinical practice; strengthened and refined its admissions and closure processes to enhance both rigor and movement through the Department curriculum; and continued to provide extensive and intensive individual support and guidance to students to maximize personal as well as professional growth and development. Dr. Larry Stonecipher, Dean of the College of Education and Human Services, has also continued to demonstrate an extraordinary level of commitment to HDC, providing much-needed guidance and support at every turn. The Department of HDC looks forward to the next review period with great excitement and anticipation!

Current Program Strengths.

Current Program strengths within the Department of HDC are many and varied:

1. CACREP accreditation of all three areas of study;
2. ISBE accreditation;
3. The only counselor education program within the University of Illinois system;

4. A highly cohesive and collaborative group of core, tenure-stream faculty deeply committed to excellence in teaching;

5. A rigorous academic and clinical curriculum carefully designed to provide a fully integrated range of opportunities to engage in active learning of applied and highly marketable skills;

6. Intensive supervision across the clinical training component of the curriculum;

7. Ongoing attention to State and national trends in the profession;

8. Intensive faculty mentoring and individual support;

9. Strong emphasis on both personal and professional development in building a professional identity as a Counselor;

10. The Department faculty's interdisciplinary expertise and active involvement in key campus service initiatives (e.g., diversity, governance, and student life);

11. Admission places students on a direct and expedited path toward professional licensure and certification;

12. Superior performance of HDC students on national certification examinations;

13. Department commitment to growth, change and development to ensure alignment with best practices promoted by licensure, certification and accreditation organizations;

14. A history of high demand for HDC students as graduate assistants throughout the campus community;

15. Location of the Department/University in the State Capitol, providing ready access and opportunities for direct input on policy initiatives;

16. A 1200 square foot state-of-the-art training facility supports the clinical emphasis of the Program—the Counseling and Therapy Training Center (CTTC) is outfitted with three treatment rooms and accompanying observation rooms; ceiling-mounted pan-and-tilt cameras, microphones and flat-screen monitors; bug-in-the-ear communication systems; and advanced multimedia capability.
Areas of Concern.

Areas of concern related to Program development over the next eight years center around Program expansion and resource limitations:

1. HDC's rebuilding efforts since the last program review have led to considerable growth and expansion, including growing numbers of students seeking a full-time course load. Managing this growth and expansion such that adherence to CACREP standards and requirements is maintained, superior quality educational experiences remain a first priority, and student needs are appropriately addressed will continue to require careful reflection and planning.

2. Although the Department of HDC was held to the 2001 CACREP standards in its recent reaccreditation process, the 2009 standards mandate that all CACREP accredited programs must change the name of their Community Counseling area of study to Clinical Mental Health Counseling and increase that area's required curriculum from 50 credit hours to 60 credit hours. Making this transition will present additional resource challenges, exacerbating the concerns articulated in item 1, above. However, it should be noted, here, that although this requirement places additional burdens on strained Department resources, ultimately, moving to a 60-credit curriculum will serve to further strengthen the clinical competencies of students seeking licensure within the State of Illinois. It will also serve to enhance the portability and reciprocity potential for HDC graduates seeking licensure outside the State of Illinois (please see item 3 in Program's Recommendations for the Current Review, below).

3. During the reaccreditation process and Site Visit in 2001, the Department was told that HDC should have two tenure-stream faculty members in each of its three areas of study (Community Counseling, School Counseling and Marital, Couple and Family Counseling) for a total of six faculty members. The Department fervently hopes that movement toward realization of this objective can be maintained (please see item 1 in Program's Recommendations for the Current Review, below).

Program's Recommendations for the Current Review.

In order to improve the overall quality and productivity of the HDC Program, the following changes are recommended:

1. Hire a sixth tenure-stream faculty member (please see items 1, 2 and 3 in Areas of Concern, above).

2. Secure the resources necessary to permit the Department's state-of-the-art CTTC to operate as a fully functional treatment facility in which HDC practicum and
internship students are able to provide treatment services to members of the local community under live supervision by Department faculty.

This objective may be achieved, in part, through consideration of an emergency hire of a full-time Clinical Instructor. This person would be charged with: 1) providing assistance in attending to the tasks associated with initial start-up of the CTTC; 2) daily management of the Center; and 3) teaching responsibilities for one section each of HDC 587 Professional Experience: Practicum and HDC 590 Professional Experience: Internship (please see Future Needs under Section V. Learning Environment and Support Services; and item 1 in Previous Program Review Recommendations under this section).

3. Move the Department of HDC into alignment with the 2009 CACREP standards followed by the 2016 standards (which will be available in 2015).

An immediate focus of this initiative will involve changing the name of the Community Counseling area of study to Clinical Mental Health Counseling and increasing that Area’s required curriculum from 50 credit hours to 60 credit hours (as mandated by CACREP) (please see item 2 in Areas of Concern, above).

HDC faculty consider this accreditation-driven mandate to be an opportunity to further strengthen the Department curriculum such that HDC is considered one of the premier Counseling programs in the Midwest. It is anticipated that achieving this recognition for excellence, in turn, will serve to increase the diversity of our student body (please see item 4, below).

4. Enhance minority recruitment.

Developing creative strategies to recruit and retain students from diverse backgrounds remains an ongoing priority. One avenue under consideration would involve seeking to establish a partnership with an international institution through which multicultural opportunities in clinical training could be formalized.

5. Establish a peer mentoring program.

Linking newly admitted students with advanced students would provide them with formal mechanisms of ongoing assistance and support, from point of admission through graduation, in the completion of curriculum requirements and the development of a professional identity.

6. As of the preparation of this document the Department of HDC is implementing a major change in its closure protocols; specifically, elimination of the master’s project/thesis as a closure option.
Successful implementation of this change will address declining numbers of students electing to complete a project/thesis and the associated decline in enrollment in HDC 582 Research Colloquium. A closure process in which all students will complete a comprehensive examination will enable the Department of HDC to bring its curriculum into greater alignment with other CACREP-accredited programs throughout the country and move its students through the curriculum more quickly and efficiently (please see item 7e in Curricular Revisions During the Review Period under Section II. Assessment of Learning Outcomes and Curricular Revisions).


Since UIS is an approved testing site for the NCE, Department of HDC enrollment is witnessing significant growth, and preparation workshops continue to be available only in the northern part of the State, scheduling preparation workshops at UIS would serve the needs and convenience of HDC students extremely well. These workshops would also be made available to graduates of other counseling programs within the State of Illinois who are seeking NCE test preparation offerings. UIS’ new Testing Center (construction pending) may serve as an ideal venue for delivery of the workshops.

8. As of the preparation of this document, the Department of HDC is developing a new Family Dynamics course.

Scheduled to be offered in the spring 2012 semester, this course will enable the Department of HDC to meet accreditation-mandated curricular requirements with greater precision and move students through their course of study more expeditiously (please see item 10 in Curricular Revisions During the Review Period under Section II. Assessment of Learning Outcomes and Curricular Revisions).

9. Pursue the development of selected blended course offerings.

As of the preparation of this document, the Department of HDC is planning to explore the feasibility of offering selected courses in blended format. Factors driving this initiative include providing flexibility to students working full-time and/or struggling to juggle the demands of school, employment and parenting; marketing, recruitment and retention considerations; opportunities to develop creative and innovative course offerings; and opportunities to draw on the University of Illinois Springfield’s celebrated expertise and support structures in online teaching and learning.
10. Explore the feasibility of developing post-master's certificates in School Counseling and Marital, Couple and Family Counseling.

These certificate-based initiatives would be designed to meet the needs of individuals holding master's degrees in various helping-related disciplines who seek a series of highly specific courses necessary to fulfill certification and/or licensure requirements. To date, the Department of HDC has been unable to address requests of this kind due to lack of requisite faculty resources.

X. Statistical Data
### Table 1

Student Demographic Data

#### Graduate Majors by Gender

<table>
<thead>
<tr>
<th>Semester</th>
<th>Males</th>
<th>Females</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
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<td>72 (92.30%)</td>
<td>78</td>
</tr>
<tr>
<td>Fall 2004</td>
<td>4 (05.47%)</td>
<td>69 (94.52%)</td>
<td>73</td>
</tr>
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<td>Fall 2005</td>
<td>9 (13.63%)</td>
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<td>Fall 2006</td>
<td>7 (11.66%)</td>
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<td>Fall 2007</td>
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<td>Fall 2008</td>
<td>7 (11.47%)</td>
<td>54 (88.52%)</td>
<td>61</td>
</tr>
<tr>
<td>Fall 2009</td>
<td>16 (22.85%)</td>
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<td>70</td>
</tr>
<tr>
<td>Fall 2010</td>
<td>15 (16.30%)</td>
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#### Graduate Majors by Part-Time/Full-time Status

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<th>Full-Time</th>
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<tr>
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<td>Fall 2006</td>
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<tr>
<td>Fall 2009</td>
<td>42 (60.00%)</td>
<td>28 (40.00%)</td>
<td>70</td>
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<td>Fall 2010</td>
<td>57 (61.95%)</td>
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#### Graduate Majors by Age

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<td>17</td>
<td>17</td>
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<td>7</td>
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(Mean age – 33.23 years)
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<th>Semester</th>
<th>Black, Non-Hispanic</th>
<th>American Indian/Alaskan</th>
<th>Asian/Pacific Islander/Native Hawaiian</th>
<th>Hispanic</th>
<th>White, Non-Hispanic</th>
<th>Unknown Race/Ethnicity</th>
<th>Multi-Race</th>
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<td>0 (0%)</td>
<td>1 (1.28%)</td>
<td>75 (96.15%)</td>
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<td>78</td>
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<tr>
<td>Fall 2004</td>
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<td>0 (0%)</td>
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<td>Fall 2005</td>
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<td>66</td>
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<tr>
<td>Fall 2006</td>
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<td>0 (0%)</td>
<td>55 (91.66%)</td>
<td>2 (3.33%)</td>
<td>--</td>
<td>60</td>
</tr>
<tr>
<td>Fall 2007</td>
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<td>1 (1.58%)</td>
<td>1 (1.58%)</td>
<td>55 (87.30%)</td>
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<td>1 (1.63%)</td>
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<td>50 (81.96%)</td>
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<td>Fall 2009</td>
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<td>0 (0%)</td>
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<td>61 (87.14%)</td>
<td>5 (7.14%)</td>
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<tr>
<td>Fall 2010</td>
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<td>81 (88.04%)</td>
<td>1 (1.08%)</td>
<td>1 (1.08%)</td>
<td>92</td>
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</table>
Table 2

Number of Program Majors, Credit Hours Generated, and Degrees Granted

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Program Majors (Fall Term)</th>
<th>FY Credit Hours Generated (By Program Prefix)</th>
<th>Degrees Granted (FY)</th>
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</thead>
<tbody>
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<td>FY03 (AY02-03)</td>
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<td>1643</td>
<td>15</td>
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<td>FY04 (AY03-04)</td>
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<td>1473</td>
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<tr>
<td>FY05 (AY04-05)</td>
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<td>13</td>
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<td>FY06 (AY05-06)</td>
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<td>1217</td>
<td>13</td>
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<td>FY11 (AY10-11)</td>
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