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Promoting Well-being from the Start: Implementation of a Wellness Curriculum

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Promoting Well-being from the Start: Implementation of a Wellness Curriculum

Abstract

The 2016 Council for Accreditation of Counseling and Related Educational Programs standards (F.1.k.) and the 2014 American Counseling Association (ACA) Code of Ethics (C.2.g.) stipulate that counselor wellness and self-care be prioritized throughout counselor education programs. However, there is little evidence to suggest counselors'-in-training (CIT) wellness increases during a counseling program. The Introduction to Counseling Wellness Curriculum (ICWC) was developed to assist in meeting these standards and promote wellness from the onset of a counseling program. This eight-week long curriculum presents content to cover different dimensions of wellness and specific activities to implement self-care practices. The skills obtained through the ICWC can provide CIT's strategies to maintain psychological wellness and prevent professional burn-out. Implications for counselor educators are discussed.

Keywords

wellness, counselor education, counselors-in-training, self-care, wellness curriculum

Author's Notes

n/a

Counselors have an ethical responsibility to maintain their well-being to best serve their clients (American Counseling Association [ACA], 2014). The ACA (2014) states that counselors should ensure their physical and emotional health in order to fulfill their professional responsibilities in their Code of Ethics (C.2.g.). The Council for Accreditation of Counseling and Related Educational Programs (CACREP, 2015) also notes that helping counselors-in-training (CIT) strategize their self-care is essential in entry-level counselor education courses (F.1.k.). Although wellness has long been prioritized in counselor education, helping professionals often report struggles in monitoring and maintaining their well-being due to the nature of their work as counselors, which may in turn, negatively affect their work with clients (Culbreth et al., 2005; Gleason & Hays, 2019; Lawson, 2007).

The concept of wellness was promoted in the field of counseling by Myers and Sweeney (2005) who introduced an evidence-based model of wellness, the Indivisible Self. Based on previous wellness models, the researchers identified five factors including (a) essential self, (b) social self, (c) creative self, (d) physical self, and (e) coping self. Myers and Sweeney (2005) noted that an individual self is comprised of these factors as the indivisible self. Similarly, the Wheel of Wellness model (Witmer & Sweeney, 1992) presented areas that related with individuals' health and quality of life (i.e., life tasks) including, but not limited to, self-care, work-out, and identities.

Wellness, is defined as optimal functioning of the body, mind, and spirit (Myers et al., 2001) while *self-care* refers to “the ability to refill and refuel oneself in healthy ways” (Gentry, 2002, p. 48). Among different theoretical models of wellness, self-care is critical, as failure to appropriately handle stress might impair students' ability to progress through a counseling program and work with clients effectively (Rosenberg & Pace, 2006). Although wellness is often encouraged by counselor educators (Myers & Sweeney, 2004; Myers & Sweeney, 2005), there is

limited evidence to suggest that counseling students generate their own self-care strategies or improve their overall wellness during the course of a counselor education program (Roach & Young, 2007). In fact, graduate students in counselor education programs may experience challenges to learning and implementing self-care, as they often need to balance multiple responsibilities including academic load, clinical work, and personal responsibilities such as caretaking (Calicchia & Graham, 2006; Di Pierro, 2010). Considering students' vulnerability to stress and the importance of promoting wellness among CIT, initiating wellness trainings at the onset of counselor education programs may be beneficial for students and future clients alike. Therefore, the purpose of the current article is to present a sample group curriculum that counseling programs may integrate or add to their existing course curriculum.

Counseling Students' Challenges

Graduate students experience a broad range of difficulties including managing full-time work, child-care, advanced academic requirements, financial difficulties, and insufficient free time (Calicchia & Graham, 2006; Di Pierro, 2010; Oswalt & Riddock, 2007). As these factors may affect students, while variable at different points during the degree program, many students report not being able to manage their personal responsibilities alongside the demanding workload of graduate work. Helping students build personal coping strategies to address these challenges may help them handle their stress and support overall student success (Di Pierro, 2010; Saunders & Balinsky, 1993).

CIT experience multiple challenges in addition to the common obstacles other graduate students have due to the demand of counselor preparation programs and the elusive nature of counselor training. For instance, counseling graduate students report having increased levels of anxiety and stress (Smith et al., 2007) because of insufficient skillsets and absence of self-

confidence that may mitigate this anxiety (Skovholt & Ronnestad, 2003). Consequently, CIT may have lowered self-efficacy and increased self-doubt as they face hardships when working with their clients. In addition, it is difficult for CIT to assess their level of growth because counseling itself is seen as ambiguous (Aten et al., 2008; Jenaro et al., 2007; Skovholt et al., 2001).

Furthermore, Skovholt (2001) indicated that CIT may struggle with balancing their work alongside their development as a counselor. In a qualitative study conducted by Thompson and colleagues (2011; $N = 14$), participants reported that they had some degree of burnout as CIT. Although CIT may be vulnerable to these unique stressors, they are less likely to share their needs due to their identification as helpers (Barnett et al., 2007). Considering the importance of self-care in their future profession, it is of utmost importance to prioritize wellness through graduate counseling programs.

Wellness in Counselor Education

It is imperative for CIT to learn ways to deal with stress and maintain their wellness so they can sustain their counseling careers. However, several factors may contribute to counselor impairment including burnout and occupational stress (Young & Lambie, 2017). Counseling professionals commonly experience burnout due to large caseloads, temporary emotional imbalance, and challenging clients (Jenaro et al., 2007), all of which may hinder their ability to effectively work with clients. Although Roach and Young (2007) revealed that both CIT and counseling faculty considered their wellness an important contribution to effective counseling ($N = 204$), CIT may find it challenging to incorporate wellness activities into their already demanding routines.

The importance of self-care and wellness becomes especially critical given the stressors associated with the COVID-19 pandemic. Harrichand and colleagues (2021) explained, “The

compounding effects of COVID-19 related stressors may interfere with counselors', counselor educators', and CITs' abilities to engage in regular self-care and wellness practices as more existential concerns, such as fear of illness, death and dying, separation from family members and friends, and financial distress loom overhead" (p. 4). Harrichand et al. (2021) made the point that wellness and self-care must be mapped and incorporated into the CACREP curriculum. Engaging CIT to develop self-care strategies as purposeful behaviors could be advantageous to the students both personally and professionally. Moreover, incorporating wellness activities into course curriculum may help students experience first-hand the benefits of self-care, increasing the chances they will maintain their self-care routines after the intervention is complete.

Positive Impacts of Wellness Interventions

Although limited empirical research exists investigating the impact of wellness interventions on CIT, literature exists that reports positive effects of wellness interventions on CIT (Perepiczka & Balkin, 2010; Roach & Young, 2007). For example, Roach and Young (2007; $N = 204$) investigated the impact of wellness courses on CIT. Results indicated that students in counselor education programs with a wellness course showed a statistically significantly high wellness scores than students without a wellness course. Although the course offering explained only 4% of the variance in the total wellness scores for all participants, the programmatic culture of wellness was expected to positively impact CIT overall. Additionally, Perepiczka and Balkin (2010) found counseling doctoral students ($N = 173$) reported higher levels of wellness after participating in wellness practices (Perepiczka & Balkin, 2010). Other researchers indicate that CIT benefit from taking wellness courses (Pirtle et al., 2019; Schure et al., 2008). For example, Schure and colleagues (2008; $N = 33$) conducted a qualitative study exploring CIT experiences participating in a 15-week wellness intervention. After participating in the program, the CIT

reported positive changes in their wellness in different areas such as physical and emotional well-being.

Consistent with previous literature, Pirtle and colleagues (2019; $N = 10$) investigated the effects of a semester-long wellness course, showing CIT had higher levels of perceived meaning-in-life and decreased levels of state and trait anxiety after participating in the course. Some of the elements the researchers included in their wellness curriculum were enhancing knowledge of wellness and logotherapy, raising awareness on triggering stressors, and making a wellness plan. In a similar study, Abel and colleagues (2012) investigated the effect of a 14-week long stress management course on CIT ($N = 101$) and found that learning stress management strategies positively impacted CIT' knowledge of stress, anxiety, and personal stressors. Finally, Wolf et al. (2014) indicated that CIT who took a wellness curriculum reported enhanced knowledge and practice of wellness ($N = 38$). The semester-long program addressed a broad range of self-care strategies such as activities that helped students raise awareness of their wellness needs and monitor their progress in different wellness areas. Participants from the follow-up interviews reported increased willingness to work on their wellness and elevated levels of self-awareness. Furthermore, the participants stated their newfound capability to say no to additional responsibilities in order to maintain balance. Overall, the participants benefitted from partaking in the wellness workshops (Wolf et al., 2014).

Small group curricula have also yielded promising results in enhancing CIT wellness. For instance, Fung (2019) conducted a 12-hour long group focusing on wellness as part of the group work course and found that participants showed a higher level of wellness and group leader self-efficacy among counseling students ($N = 43$). The four-day long sessions addressed different areas including life space, personal resources, experiential activity, and coping strategies. Although the

program was effective, the topics covered were limited considering the scope of challenges CIT may experience.

Collectively, the results of these research studies suggest the benefits of wellness practices for CIT. In addition, the findings show that wellness curricula helped participants recognize their own personal self-care needs and find appropriate self-care strategies. However, a study by Roach and Young (2007) showed that only 48% out of 204 participants reported their program offered a wellness course, suggesting that the majority of counselor education programs must prioritize wellness in other ways. Furthermore, while the benefits of wellness curricula have been established, there are very few articles that explicitly lay out a comprehensive wellness curriculum that can be replicated in classes, leaving counselor educators with an understanding that wellness must be prioritized but few strategies to actually do so.

Although the field of Counselor Education has long prioritized wellness, the majority of the research on the topic is more than ten years old, indicating that the emphasis on wellness may be lessening, despite unchanging stressors on counseling graduate students. The COVID-19 pandemic has also exacerbated the typical stressors placed on counselor educators, CIT, and counselors, making wellness not just a pedagogical priority but also a critical necessity for sustaining CIT (Harrichand et al., 2021). While previous researchers noted the advantages of wellness practices, further research is warranted to reveal what elements should be included for most effective wellness practices (Pirtle et al., 2019). In addition, having a mandated wellness class in a 60-credit hour program may be unrealistic for counseling programs with specialty foci. Therefore, incorporating wellness curricula into existing core CACREP courses may be beneficial in maintaining positive health and decreasing attrition (Harrichand et al., 2021; Lovitts, 2001; Roach & Young, 2007; Smith et al., 2006).

The purpose of this article is to propose a pragmatic wellness curriculum that is evidence-based and flexible in nature. While we were able to rationalize the integration of this curriculum into our *Introduction to Counseling* course by mapping it to CACREP standard 1.i *self-care strategies appropriate to the counselor role*, we also recognize that many counselor educators will be unable to fit the entire curriculum into a single course. Additionally, we had doctoral students to help facilitate these groups which would not be possible in many counselor education programs. However, we believe that this curriculum is flexible and adaptable, activities can be used individually in several courses, or the curriculum can be used in entirety within a course such as *Introduction to Counseling*.

Theoretical Framework

The theoretical underpinning of this wellness curriculum was based on Hettler's Six Dimensions of Wellness Model, also known as the Hexagonal Wheel of Wellness (Hettler, 1980). Hettler defined wellness as, "an active process by which people become aware of, and make choices toward, a more successful existence" (Hettler, 1984, p. 13). While previous models of wellness focused primarily on physical health, the Hexagonal Wheel of Wellness is multidimensional, encompassing occupational, social, spiritual, physical, emotional, and intellectual domains (Hettler, 1980). As such, it was the first holistic model of wellness focused on mind, body, and spirit (Oliver et al., 2018).

Each domain of the hexagonal wellness model is distinct yet interconnected (Hettler, 1980). The occupational dimension of the model relates to the importance of enriching work which allows an individual to contribute their unique gifts, values, and interests. Similarly, the intellectual dimension recognizes the benefits of creativity, curiosity, and intellectually stimulating endeavors. The physical dimension emphasizes the importance of attending to one's physical health through

nutrition, exercise, and medical intervention. Through enhanced physical wellness, an individual understands their own body's warning signs and can intervene to improve body performance. The social dimension of the model recognizes the importance of societal impact and contribution to the common welfare. Enhancing social relationships and attending to friendships are ways one can increase social wellness. Spiritual wellness encompasses the search for meaning in one's existence and the importance of attending to one's own values in everyday life. Finally, the emotional dimension of the model includes awareness and acceptance of one's emotions and successful integration of thoughts, feelings, beliefs, and behaviors (Hettler, 1980).

Wellness Curriculum

In creation of our wellness curriculum, we aimed to enhance each of the Hexagonal Dimensions of wellness. Additionally, based on previous research, we theorized that the support of a small group would aid students in greater self-awareness, increased accountability, and in turn lead to increased wellness (Figley, 2002; Ohrt et al., 2015). Thus, we integrated small group activities and group counseling skills into each group session. Each session lasts approximately 75 minutes and students meet with each other on a weekly basis. The co-investigators of this article and additional groups leaders (i.e., doctoral students in counselor education) facilitated the pilot program as part of the Introduction to Counseling course following curriculum guidelines and learning objectives specified by the second author (See Mumbauer-Pisano & Kim, 2021 for further information regarding the pilot program).

Two assessments were included to spark conversations and increase insight on current and aspirational wellness: (a) Helper Professional Wellness Discrepancy Scale (HPWDS; Blount & Lambie, 2018) and (b) Perceived Wellness Survey (PWS; Adams et al., 1997). HPWDS is included to measure the discrepancy between CIT's current and aspirational wellness. The results may help

CIT enhance awareness of their levels of wellness and understand their personal needs (Venart et al., 2007), potentially promoting wellness in the future. The Perceived Wellness Survey assesses six areas including: (a) physical, (b) social, (c) emotional, (d) intellectual, (e) psychological, and (f) spiritual wellness. Five of the measured domains overlap with the wellness topics covered in this curriculum, allowing to test the impact of the curriculum.

For emotional wellness, we incorporated mindfulness activities. Mindfulness involves with focusing on the present moment (Kabat-Zinn, 2003) where individuals intentionally attend to the state of their mind without criticizing (Kabat-Zinn, 2003; Rothschild, 2006). This approach works as a strategy to release stress and enhance wellness (Newsome et al., 2012). One study conducted by Hased and colleagues (2009) tested the effectiveness of a health enhancement program, which consists of eight lectures. Specifically, the program includes connectedness between physical and mental health, mindfulness related strategies, and lifestyle program (e.g., stress management, exercise). A sample of medical students ($N = 148$) participated in the study and the results showed that the program increased the level of psychological wellbeing and decreased the levels of depression and hostility.

In addition, Bohecker and colleagues (2016) examined the effects of mindfulness small group activities on ambiguity tolerance among counseling students ($N = 20$). The results of the qualitative study indicated that the participants acquired self-reflection skills as well as an increased level of cognitive complexity management. In addition, Leppma and Young (2016) found that a wellness intervention focusing on loving-kindness meditation increased a level of empathy among counselors-in-training ($N = 103$). Based on the literature, we provided psychoeducation as teaching mindfulness may help CIT develop their counseling skills and decrease anxiety (Davis & Hayes, 2011; Gockel et al., 2013). Furthermore, participants in our

curriculum were encouraged to set goals to work on their physical wellness. Goss and colleagues (2010) noted the importance of self-regulation skills to maintain wellness as an individual's lifestyle in their research. Using SMART Goals can be one strategy that CIT may find useful.

In terms of social wellness, we included activities that promote a sense of gratitude and connectedness as supported by multiple research. Kaplan and colleagues (2014) implemented a self-guided intervention focusing on gratitude among employees ($N = 67$) and tested the effectiveness of the program. Specifically, participants in the group kept a journal regarding things they feel grateful for in their jobs. Results showed that participants had a significant increase in their positive affective well-being after the intervention. Furthermore, Wood and colleagues (2010) in their review indicated a positive effect of gratitude on different psychological aspects including positive affect and happiness. Chiaburu and Harrison (2008) also suggested that social interaction is positively related to individuals' psychological health. Based on previous literature, the final wellness curriculum is developed and presented below.

Introduction to Counseling Wellness Curriculum

Week One: Introduction to Wellness

Learning Objectives

Group members will be able to: a) explain the concept of wellness and the importance of maintaining and promoting wellness in the helping profession, b) understand the difference between perceived and aspirational wellness, and c) reflect on their own personal wellness and areas of improvement.

Materials

Materials that are needed include: pencils, white board or writing easel, markers, and copies of the Helper Professional Wellness Discrepancy Scale (HPWDS; Blount & Lambie, 2018) and Perceived Wellness Survey (PWS; Adams et al., 1997).

Activities

Two main activities compose this session to provide participants of the overview of the curriculum and measure their levels of wellness before the intervention.

1) Psychoeducation. Begin by prompting students to think about the question, “what is wellness for me?”. Invite group members to write words on the board that capture their personal definition of wellness. Discuss with group members common themes seen on the board and share different definitions of wellness (e.g., Hettler, 1984; Myers et al., 2000). Next, explain why wellness is prioritized in counseling, including the historical emphasis on holistic care and prevention of counselor burn-out.

2) Assessment. Introduce the HPWDS and PWS to counselors-in-training and explain how our aspirational wellness often looks different than our actual wellness. Invite students to complete the wellness assessments and facilitate a dialogue on what was learned from the assessment.

Week Two: Emotional Wellness

Learning Objectives

Group members will be able to (a) explain the concept of emotional wellness, (b) engage in mindfulness as one avenue for emotional wellness, and (c) brainstorm other avenues for emotional wellness.

Materials

Small individually wrapped chocolate for every group member, and mindful eating script (Milovani, 2013) are needed.

Activities

1) Psychoeducation. Begin by discussing emotional wellness. Share Hettler's definition of wellness which encompasses recognizing one's emotions, accepting emotions, and expressing feelings, thoughts, and ideas. Ask students to brainstorm avenues for enhancing their own emotional wellness. Introduce mindfulness as one way you can tend to your own emotional wellness.

2) Observing Mindfully. Request that students look briefly around the room and then close their eyes. With their eyes closed, ask them to recount all the things around them that they remember with the color red, color blue, color black, and so on. Ask students to open their eyes again and look around. Then allow the group to open their eyes again and answer the same questions. Process the activity by asking the group what was noticed during each observation time and what they could be missing in their daily lives due to a lack of mindfulness.

3) Nourish Mindfully. Explain that we are going to try an activity that allows us to nourish ourselves mindfully. Pass out an individually wrapped chocolate to each group member. Explain how eating mindfully can help group members practice mindfulness frequently and successfully in their everyday lives. Follow mindfulness savoring script. Process the activity with students and encourage them to practice mindfulness in the next week.

Week Three: Physical Wellness

Learning Objectives

Group members will a) reflect on physical wellness including exercise, nutrition, and preventative care, b) understand the importance of goal-setting, and c) begin to construct their own SMART goals.

Materials

SMART goal worksheets, white board or writing easel, and markers will be used.

Activities

1) Psychoeducation. Begin by checking in with students about their challenge last week to practice mindfulness. Were they successful? What obstacles prevented them from engaging in mindfulness? Ask students to brainstorm ways to promote physical wellness. Write down suggestions on a whiteboard or easel. Encourage students to be specific (i.e., walking in between classes rather than losing weight). Encourage students to think of a wide variety of strategies such as flossing, getting a physical, taking a vitamin, packing a lunch, cutting down on alcohol, etc.). After the list is complete, ask about potential barriers that people come across when trying to implement these activities. What keeps us from doing things such as flossing every day or eating more fruits and vegetables?

2) SMART Goals. Explain the concept of SMART goals which are specific, measurable, achievable, relevant, and time bound. Go through each dimension giving an example. Break students into pairs and have them practice creating SMART goals. Partners work together and provide suggestions to each other. Once everyone is done, come back to the large group and ask students to share their goals with the group. Instruct students to begin implementing the goal in the next week.

Week Four: Spiritual Wellness

Learning Objectives

Group members will be able to (a) explain the concept of spiritual wellness, (b) reflect on their own personal values through engaging with a values card sort, and (c) reflect on ways to uphold personal values in their everyday lives.

Materials

Copies of Personal Values Card Sort (Miller et al., 2001) will be used.

Activities

1) Psychoeducation. At this point, the wellness group is half way complete. Check in with students about their progress up to this point. How have they applied what they have learned thus far? What obstacles have they encountered? Transition to discussing spiritual wellness. Explain that while we oftentimes think of spiritual wellness in terms of religiosity, spiritual wellness is broad and means different things for everyone. Introduce Hettler's definition of spiritual wellness, which encompasses living each day in a way that is consistent with our own personal values and beliefs.

2) Values Sort. Explain that an awareness of our own personal values is an important step to spiritual wellness. Completing a personal values card sort can help us better understand our values. Break students into pairs and give each pair of students a copy of the Personal Values Card Sort (Miller et al., 2001). Ask students to take turns sorting the cards in categories: most important, somewhat important, not very important, and least important. Then, ask students to rank order the cards in the most important category in terms of importance. Ask students to discuss with your partner what makes these values important and how these values impact daily living and future goals. Invite students back into the large group to discuss what they learned about themselves and how their values impact their perception of spiritual wellness.

3) Preparing for Next Week. Ask students to be prepared to answer the discussion prompt, "What is something that fascinates you?" next week. Invite students to bring in an artifact related to their topic of interest (e.g., book on topic of interest, equipment needed for hobby) to share with the group.

Week Five: Intellectual Wellness

Learning Objectives

Group members will be able to (a) explain the concept of intellectual wellness, (b) reflect on their personal interests, and (c) brainstorm ways to engage their intellectual wellness in their everyday lives.

Materials

Group members will bring artifacts that are fascinating to them.

Activities

1) Psychoeducation. Begin by discussing intellectual wellness. Share Hettler's definition of wellness which encompasses problem solving, creativity, and challenging one's mind.

2) Show-and-Tell: Share What Fascinates You. Invite students to answer the prompt, "What is something that fascinates you?" and share their artifact with the group. As group members share, facilitate a discussion among group members by pointing out similarities and differences. After all group members have shared, ask students how they make space for their intellectual wellness in their everyday lives and how they may be able to tend to their intellectual wellness in the midst of an academically rigorous graduate program.

Week Six: Social Wellness

Learning Objectives

Group members will a) learn the importance of social relationships as a wellness component, b) reflect on the similarities between themselves and others, and c) engage in a gratitude exercise to foster social connection.

Materials

Laptop or projection screen to show YouTube video, paper, and pencils will be needed

Activities

1) Psychoeducation. Begin by asking students. “What role do your social relationships have on your overall health and happiness?” Process with group members what meaningful relationships connection looks like in their lives, what aspects of social connection are missing, and how they can prioritize social wellness.

2) Commonalities. Have group members break into groups of 3 or 4. Supply each group member with a piece of paper and pen and ask for one person per group to volunteer to be the secretary. Tell them they will have five minutes to see how many things they can find in common among themselves. Once time is up, have each group share with the whole group the list they generated and facilitate a discussion on commonalities and connection.

3) Gratitude. Research tells us that practicing gratitude can make us happier, healthier, and that expressing gratitude to others can booster our connection to others. Explain that we will be watching a short video on gratitude. While watching, think about who you would write a letter of gratitude to if given the opportunity. Play the YouTube Video, *An Experiment in Gratitude* by the Science of Happiness. After watching, ask students to think about someone in their life they would like to express gratitude to and write a letter to them. After students complete their letters, discuss what the experience was like and how expressing gratitude could deepen our social wellness.

Week Seven: Occupational Wellness

Learning Objectives

Group members will a) express their own meaning of occupational wellness, b) reflect on their career journey to the counseling profession, and c) brainstorm their ideal work environments which align with their values.

Materials

Guided career imagery script (Marshall & Ferrell, 2019) is needed.

Activities

1) Psychoeducation. Ask students what occupational wellness means to them. Share Hettler's definition of occupational wellness, which involves contributing your unique strengths and skill-sets to your work that is meaningful and personally gratifying. Invite students to share their own journeys to the counseling profession. How did they come to realize that they wanted to be a counselor? How is this career aligned to their personal values and skills?

2) Guided Imagery. Explain that the profession of counseling is diverse and occupational environments look very different from counselor to counselor. Guided imagery can be helpful in understanding personal values and ideal work environments. Read a guided career imagery script (Marshall & Ferrell, 2019) to students. Process students' reactions to the guided imagery. How does their ideal work environment relate to their occupational wellness?

Week Eight: Closing and Review

Learning Objectives

Group members will a) articulate what they have learned from the group, b) reflect on their experience incorporating wellness into their daily lives, and c) set future goals to maintain their wellness.

Materials

The same two assessments (i.e., HPWS, PWS) are needed.

Activities

1) Learning Integration. The last group session is devoted to reviewing what has been learned over the past eight weeks, preparing for the future, and closing the group. Invite students to share their major take-aways from the group. What have they learned from the activities? What

have they learned from each other? What was it like to incorporate wellness into their every-day lives? Review each of the dimensions of Hettler's model and invite students to set goals for the future.

2) Assessment. Ask group members to complete both assessments again. What has changed since the first time they took this assessment? Students may have realized specific areas of wellness as more important for them than others, gaps in their well-being that weren't there before, or realized progress over time.

Discussion

This article describes an eight-week long wellness curriculum for counselors-in-training that can be incorporated into the entry-level counseling courses such as *Introduction to Counseling*. The authors used the Hexagonal Wheel of Wellness (Hettler, 1980) as the model addresses a range of wellness domains and identified different activities that CIT can participate in to learn self-care strategies. Considering the importance of maintaining wellness to meet counseling practitioners' ethical responsibilities (ACA, 2014; CACREP, 2015), providing opportunities for counseling students to enhance their well-being as well as learn how to balance their life and work from the beginning of the program may be essential for their future career (Rosenberg & Pace, 2006; Yager & Tovar-Blank, 2007).

The curriculum presented was well-received by students who reported making significant changes in their personal lives after a particular topic was covered. For example, after covering social wellness and gratitude, a student decided to spend a weekend with her family and find a time to express appreciation to her family members, "I learned that it made me feel happier thinking about the person or multiple people that have positively influenced me. I also took it even further and told those people that they had positively influenced me and that I was grateful for

everything they've taught me." Small groups allowed students to get to know each other more intimately and feel supported. As one student reported in a reflection, "We have all shared some deep things about ourselves and I feel as though the group gave us a place to talk about anything and feel safe and accepted." Finally, the groups offered a much-needed reprieve from the emotional weight of first semester. One student reflecting on the difficult topics often covered in counseling curriculum stated, "I left class feeling uplifted and hopeful, which is something that I really needed."

Examining the effectiveness of the proposed curriculum using quantitative and qualitative methods would be advantageous in providing more information regarding the usage of the curriculum. In addition, further research is warranted to improve the proposed intervention based on longitudinal data. Monitoring counseling students' application of the learned strategies in their own life after the first semester would be beneficial for learning ways to modify the program. Moreover, investigating effects of the curriculum on different aspects of CIT (e.g., coping strategies, time-management skills) may provide further information for counselor educators to promote counseling students' wellness.

Considering the discrepancy between Counselor Education's values of wellness and rates of burn-out and stress among graduate counseling students, counselor educators should consider how to go beyond simply encouraging wellness to holistic integration of wellness into course curricula. The Introduction to Counseling Wellness Curriculum (ICWC) provides one potential avenue for counselor educators to move the conversation surrounding wellness from the abstract to the concrete. As the curriculum addresses multiple domains in wellness, CIT may utilize them based on their needs and find ways to prevent from burnout. Overall, assisting CIT in acknowledging self-care as an essential part of their work is of critical importance, by which CIT

can learn prioritizing wellness through graduate counseling programs and in their future profession.

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