Supervision Satisfaction and Trauma Knowledge as Protective Factors

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The humanitarian crisis of unaccompanied children(UC’s) fleeing their country of origin in hopes of seeking asylum has pushed the Office of Refugee Resettlement (ORR) to provide UC’s with temporary housing while they await their immigration court hearing (DHS, 2014). During their temporary stay, UC’s are then provided with services to better assist the needs of the minor which include legal services, health services, and mental health services (DHS, 2015). Due to UC’s experiencing multiple traumas before and after their journey to the US, clinicians providing mental health counseling should receive trauma training from their counseling graduate programs. Unfortunately, little is known about the mental health clinicians in ORR facilities causing limited literature for counselor educators and supervisors to provide proper training, supervision, and support to students who work or will work in this setting. It is important to note that vicarious trauma (VT) has been shown to develop in counselors working closely with trauma narratives which should be considered when working with UC’s.

**Need and Purpose of Study**

Currently, there is only a dissertation by Mendez (2017) reviewing the experiences of clinicians working with UCs. Therefore, it is imperative for research to assess whether trauma training and supervision relationship influences VT. By utilizing a quantitative methodology, this needed research could provide ORR with valuable information to better retain and serve their mental health clinicians working with UCs. Furthermore, this research could also foster master’s programs with awareness of the population and help mental health educators address VT with their students. The purpose of this study is to examine the effects of trauma training and the supervision relationship as predictors of VT in mental health clinicians working with UCs in ORR facilities. Due to the missing literature, it is difficult for clinicians to prepare and provide clinical mental health services to their UC clients. This study will attempt to fill the gap in literature as well as inform mental health graduate programs and government agencies regarding training and supervision for clinicians who work with UCs.

**Research Question & Hypothesis**

While understanding that counselors who work with trauma clients may be affected by VT, it is equally important to explore protective factors that may have a counter effect in the development of trauma. Thus, this study seeks to understand if the counseling supervisory relationship and trauma training are protective factors against VT. The hypothesis expected are that low supervision satisfaction and lack of training increase the possibility of VT.

References

U.S. Department of Health and Human Services, Administration for Children & Families, Office of Refugee Resettlement (2015). ORR guide: Children entering the United States unaccompanied. Retrieved from <http://www.acf.hhs.gov/orr/resource/children-enteringthe-united-states-unaccompanied>

U.S. Department of Homeland Security. (2014). Unaccompanied Children at the Southwest Border. Retrieved from: <https://www.dhs.gov/archive/unaccompanied-children#wcm-survey-target-id>