Enhancing Counseling Education Through Pop Culture Media

A Novel Approach in Graduate Training

This article explores the innovative use of popular culture (pop culture) media, specifically documentary series, in graduate counseling education to bridge theory and practice. It presents a comprehensive method for simulating counseling sessions in the classroom, aiming to enhance students' case note writing and diagnostic skills. The use of docuseries as an educational tool allows students to practice diagnosing and treatment planning in realistic scenarios. This approach increases engagement and understanding of complex concepts and the development of practical skills. It prepares students for professional challenges, demonstrating the effectiveness of integrating pop culture in educational settings for enhanced learning experiences.

CATHERINE HALLAM AND JENNIFER YOUNG

College of Humanities and Social Sciences, Grand Canyon University

KEYWORDS

diagnostic skills, clinical documentation, media-based learning



Enhancing Counseling Education Through Pop Culture Media: A Novel **Approach in Graduate Training**

In the rapidly evolving landscape of education, the incorporation of pop culture and media has emerged as a significant tool for enhancing learning experiences across various disciplines. Incorporating popular culture media into graduate counselor education offers a novel approach to bridge theory and practice. This Teaching Practice Brief provides instructors with a comprehensive method to conduct an in-class activity using a documentary series to simulate counseling sessions in the classroom. The purpose of the activity presented is to enhance students' proficiency in writing case notes and to develop their diagnostic skills within an educational context using media-derived information. The innovative use of popular culture media like docuseries has shown to significantly enhance engagement and understanding of complex concepts and development of practical skills. This approach enriches the educational experience, preparing students for the challenges and complexities of their future professional roles as counselors (Nittoli & Guiffrida, 2018; Toman & Rak, 2000).

POP CULTURE AS AN EDUCATIONAL TOOL IN COUNSELOR **EDUCATION**

The innovative use of pop culture and media in education has been explored in various fields, emphasizing the increasing role of technology in learning (Baños, 2007; Higgins & Dermer, 2001; Shepard & Brew, 2005). The use of pop culture elements for education has been shown to achieve increased student engagement and effective communication of concepts in the classroom when successfully integrated into teaching and learning processes (Brown, 2014; Collins, 2012). Research highlights the importance of engaging students meaningfully through relevant contemporary resources, such as pop culture media, and adapting teaching practices to meet the diverse needs of adults in the classroom. Popular culture can be leveraged to explain complex concepts in the classroom (Koch & Dollarhide, 2000; Nasiruddin et al., 2013; Shen, 2015; Winings, 2007).

Research also supports the integration of Problem-Based Learning (PBL) into counselor education coursework to enhance critical thinking, problem-solving skills, and the application of theory to practice (Stewart, 1998; Hou, 2014). Through PBL, case studies may be used in counselor education to engage students and prepare them to successfully navigate practical scenarios in counseling (Carone, 2018). The use of media in education may offer valuable insights into the complex concept of therapeutic alliance. Utilizing pop culture media in the classroom may serve as effective tools to help students develop empathy and conceptualize clinical cases (Banõs, 2007).

Teaching Innovation

In counselor education, the pivotal areas of best practice documentation and diagnostic proficiency are essential. Traditionally, the fundamental concepts of documentation are imparted through hands-on experience during practicum or internship phases (Hansen, 2003). However, developing diagnostic skills poses a significant challenge for many counselors in training, particularly in grasping the complexities of formulating diagnoses after initial client sessions (Kress et al., 2005). This gap in understanding warrants further exploration to enrich the knowledge base of counselors-in-training before they encounter their first clients. Although role-playing exercises are beneficial, they often lack the intricacy of real-world counseling scenarios. The way clients narrate their stories or process their emotions is not adequately mirrored in standard role-play activities within counselor education.

To address this discrepancy in real-life situations, the use of multimedia documentary series in educational settings presents a promising avenue. These series typically encapsulate the essence of a genuine counseling session, lasting approximately 45-60 minutes per episode, and portray clients' stories in a fragmented manner akin to actual client disclosures in therapy. These docuseries are valuable resources for counseling students, offering real-world examples of the multifaceted issues they may encounter in their professional practice. By engaging with themes of complex trauma, criminal behavior, family dynamics, and manipulation, students can develop critical skills in case conceptualization, ethical decision-making, and diagnostic practice.

Watching series like *Dirty John* and *The Staircase*, students observe in-depth portrayals of individuals experiencing domestic abuse, manipulation, and intense familial strain. These scenarios provide rich material for practicing accurate case note documentation and informed diagnostic decision-making, particularly around disorders like narcissistic personality disorder, post-traumatic stress, or depression. These series allow students to dissect the psychological factors driving behavior, assess the impact of these conditions on relationships, and refine their ability to make precise, clinically sound diagnoses. Additionally, ethical decision-making is a core competency in counseling, and docuseries, such as The Keepers and Wild Wild Country, bring to light the ethical dilemmas that arise in cases involving trauma, abuse, and institutional betrayal. Through these narratives, students are prompted to reflect on key ethical issues client confidentiality, mandated reporting, and the delicate role counselors play in advocating for justice. These scenarios demand a deep consideration of ethics, particularly when working with vulnerable populations or navigating power dynamics within institutions, helping students think critically about the balance between client care and professional responsibility.

Understanding trauma and its long-term effects is crucial for any counselor, and series like The Keepers and Don't F**k with Cats illustrate the far-reaching consequences of trauma on individuals and communities. These narratives allow students to see how trauma can manifest in varied ways, affecting mental health, behavior, and relationships. They also provide insight into trauma-informed care, a fundamental approach for working with clients who have experienced significant emotional and psychological harm (Substance Abuse and Mental Health Services Administration, 2014). Counseling students can apply this knowledge to assess trauma responses in clients and utilize diagnostic tools like PTSD or complex trauma-related diagnoses. The family dynamics portrayed in *The Act* and *The Staircase* offer rich material for understanding how power imbalances, manipulation, and secrets can shape mental health within a family system. These series allow students to explore patterns of behavior in family systems, consider the unique challenges of family therapy, and recognize how issues like gaslighting or emotional abuse can have long-term effects on both individuals and the family unit.

While docuseries like Don't F**k with Cats and The Family provide a deep dive into personality disorders such as narcissism and psychopathy, they also illustrate how these conditions can drive criminal behavior and retaliation. These cases sharpen students' diagnostic skills, helping them differentiate between personality disorders and other mental health issues. Moreover, these series encourage students to consider the ethical and clinical implications of working with individuals who exhibit manipulative or harmful behaviors, reinforcing the importance of careful, nuanced clinical practice. By engaging with these docuseries, counseling students gain the ability to apply their theoretical knowledge to realistic scenarios, sharpen their diagnostic acumen, and navigate the ethical complexities they will face in practice. The insights gained from these narratives are invaluable in preparing students for the emotional, behavioral, and ethical challenges that await them in their professional careers.

Employing docuseries as an educational tool enables students to hone their diagnostic skills based on the information presented in each episode, rather than relying solely on their pre-existing knowledge. This approach is particularly instructive in cases where students might prematurely assign a diagnosis without sufficient evidence from the client's symptoms. For instance, in the first episode of the Gypsy Rose docuseries, students familiar with the case may hastily diagnose Post Traumatic Stress Disorder (PTSD) for Gypsy Rose, despite the lack of adequate symptomatic evidence. This scenario underscores the importance of adhering strictly to DSM criteria, based on the client's disclosures, rather than the counselor's interpretations.

Such series facilitate practical skills in data collection for intake and process notes, allowing students to practice notetaking and goal setting based on the client's shared information and needs, rather than the students' assumptions. An illustrative example from the second episode of the Gypsy Rose series highlights this point; despite Gypsy Rose revealing her history of substance abuse and addiction, students might overlook the necessity for a relapse prevention plan, focusing instead on her childhood trauma. This overlooks the potential correlation between the trauma and substance abuse,

underscoring the need for comprehensive treatment planning, including relapse prevention strategies. This method not only deepens students' understanding of the DSM but also fosters valuable discussions between instructors and students.

Objective

The objectives of this Docuseries Diagnosis Assignment are to enhance counselor training in several key areas. First, it enables students to practice diagnosing individuals in realistic scenarios, utilizing multimedia documentary series that mirror actual counseling sessions. This approach aids in applying diagnostic criteria based on the clients' narratives. Second, the assignment improves students' skills in goal-setting and clinical documentation, aligning with the gradual disclosure of information typical in counseling relationships.

This assignment aims to increase student awareness of the importance of focusing on the client's experiences within the counseling environment, rather than being influenced by the counselor's personal interpretations. Students learn to base their assessments and decisions on the clients' actual words and disclosures. Lastly, the assignment provides insight into the dynamic nature of treatment planning, teaching students to develop and adapt treatment plans as new client information emerges, thereby understanding the importance of patience and attentiveness in therapy.

Introduction to Docuseries and Clinical Documentation

The Docuseries Diagnosis Assignment should be introduced after students have received lectures on diagnosis, Diagnostic and Statistical Manual (DSM) usage, treatment planning and documentation best practices. The initial lecture should emphasize the importance of closely listening to the client's words, which form the basis for diagnosing and clinical documentation. Instructors must stress the significant impact a diagnosis can have on a patient's life and medical outcomes, highlighting proper diagnosing as a crucial component of holistic patient care (Murphy, 2016; Sanson et al., 2017). Illustrations of ethical dilemmas that counselors may face when their documentation does not align with the patient's reported experiences are crucial to demonstrate the potential harm to patients and the grave consequences of inaccuracies in clinical documentation and diagnosing.

Before implementing the assignment, instructors should briefly introduce the supporting documents found in Appendix A, outlining each document's key elements, and addressing any student queries. Preparatory instructions must include a detailed review of these document elements and a trigger warning about the potentially distressing content in the docuseries. This content may include references to sexual, physical, or mental abuse, child abuse, domestic and sexual violence, racial slurs, substance abuse, and other real-world traumas. A discussion about the portrayal of these real-life traumas in the docuseries is crucial, along with the provision of appropriate support resources in line with university policies.

Following the disclosure and document overview, instructors should introduce the chosen docuseries, such as the *Gypsy Rose* documentary, although any docuseries fitting the earlier-described criteria is suitable. The instructor should describe the client profile featured in the

series and the type of counseling scenario it represents, be it individual, family, or couples counseling. Instructors have the flexibility to assign individual students or student groups to specific clients within the docuseries. This teaching tool is designed for maximum creativity and adaptability, allowing educators to tailor it to their students' specific needs and areas for enhancement. This section of the article introduces this innovative teaching tool and guides instructors on its effective implementation.

Instructions for Class Activity

In this classroom activity, following a review of the relevant disclosures and documents, instructors are to select the first episode of the chosen docuseries for intake purposes, with each subsequent episode serving as material for progress notes. Instructors will distribute either digital or physical copies of an intake, treatment plan, and progress note documents to individual students or student groups. Instructors will also describe the counseling context (individual, family, or couple) and specify the focus individual for the series. Once a student or group is assigned a specific counseling type or individual, this assignment remains constant throughout the activity. Instructors will play the selected episode in its entirety during class. Upon the episode's conclusion, students will be allotted 10-15 minutes to complete their documentation. This mimics the real-world scenario where counselors often have limited time to complete their notes between sessions.

Activity Example

Instructors can use the following example of Episode 1 as a model for using this technique. The process can be repeated for each additional episode/session using the progress note template. The instructor ought to facilitate discussions after each episode and follow the subsequent pattern.

In-Class Activity Steps: Based on the Prison Confessions of Gypsy Rose Blanchard.

Instructor Instructions: In today's class, we will be viewing the first episode of Prison Confessions of Gypsy Rose Blanchard, a docuseries centered on the real-life case of Gypsy Rose Blanchard. Please be aware that this series may contain discussions of sexual, physical, or emotional abuse of a child, along with explicit mentions of drug abuse, sexual abuse, medical abuse, and explicit language, among other potentially disturbing content. If you find yourself affected by any of the content, please know that you are permitted to step out of class to care for your well-being. You may also speak with me privately if you wish to discuss an alternate assignment. Our campus offers access to the counseling center at no additional cost, and I encourage you to seek further support, if needed.

As we engage with this docuseries, consider it a series of counseling sessions with Gypsy Rose Blanchard as your client. Keep in mind that, while some of you may be familiar with this case, only the information from the docuseries is to be used in your clinical documentation. I will also complete clinical documentation throughout each episode to monitor this. After each episode, we will have a debriefing session to discuss diagnoses, treatment plans, progress evaluations, and the content of your progress notes. You and your partner will have 15 minutes after each episode to complete the clinical document provided by the instructor.

You will be working in pairs today, focusing on individual counseling with Gypsy Rose Blanchard. This team approach will enhance your consultation skills and allow for verification of information, given the extensive details presented in the episodes. Ensure that you and your partner coordinate at the end of each episode to discuss the diagnosis and treatment plan. For our first episode, your task is to create a treatment plan that includes an initial diagnosis, goals, objectives, and discharge criteria. Use only the information from the first episode of the docuseries for this document and complete your clinical documentation using the treatment plan document provided by the instructor. Remember, you will have only 15 minutes to complete your documentation before we reconvene for the debrief. While watching "Episode 1," utilizing subtitles will foster an inclusive learning environment and can also improve students' ability to capture all the detailed information, as each episode of the docuseries contains numerous details. Instructors should complete the treatment plan while watching the first episode following the same instructions as the student.

Class Discussion. After students finish filling out the treatment plan, they are encouraged to share the challenges they encountered during the process. They will also discuss their chosen diagnosis and assess whether they gathered sufficient information. This exchange should take place within a structured classroom discussion, led by the instructor who also shares insights from their own intake document and diagnosis. This discussion serves two main purposes: to acknowledge the difficulty of the process and to normalize the apprehension commonly experienced by counselors-in-training when engaged in clinical documentation. The class discussion provides an opportunity for instructors to identify areas of weakness in students' clinical documentation abilities. The immediate feedback given during this discussion helps instructors gauge whether students are improving their active listening skills. Additionally, it allows instructors to pinpoint any students who may need extra support in clinical documentation and offer them additional resources before they begin working with real-world clients.

Discussion After Episode One. Instructors should allow 15 minutes for pairs to finalize their treatment plans. After this time, they can ask students to share their treatment plans. For each group, instructors should inquire about the chosen diagnosis and note these diagnoses on the whiteboard. Once all groups have shared their diagnoses, the instructor will disclose the diagnosis they have determined to be most accurate. This will be followed by a guided discussion led by the instructor, explaining the reasoning

behind the correct diagnosis, and conducting a thorough walkthrough of the DSM-5-TR diagnostic criteria for each diagnosis mentioned.

For example, if Student Group B diagnoses Gypsy Rose with post-traumatic stress disorder (PTSD), citing her experiences of trauma from medical staff and her mother, as well as her current imprisonment, the instructor can present their diagnosis. In this instance, the instructor might diagnose Gypsy Rose with F43.9 unspecified trauma and stressor-related disorder, explaining the rationale behind this decision. They would elaborate that, while Gypsy Rose recounted her fear for safety under her mother's control, experiences of being coerced into feigning illness, social isolation, and a troubled father-daughter relationship, she did not exhibit symptoms commonly associated with PTSD, such as nightmares, avoidance of the event, negative outlook on life, or increased startle response. Furthermore, despite mentioning sexual abuse by her grandfather, there was no expressed fear of death during these traumatic events. Gypsy Rose also discussed a lack of social awareness and confusion about appropriate social behavior due to her traumas, along with reported physical, sexual, and emotional abuse from her immediate caregivers.

Instructors will use this example to demonstrate the application of diagnostic criteria, ensuring that students understand the complexities involved in arriving at an accurate diagnosis. This process aids in enhancing students' comprehension of clinical diagnosis and the practical use of the DSM-5-TR. The same process will be repeated for the goals and objectives, providing the instructor with an opportunity to offer detailed examples of goals and objectives for complex real-world situations.

Evaluation of Effectiveness and Suggested Resources for Assessment

The instructor's use of their treatment plan or progress notes serves as a critical tool for evaluating and measuring the clinical documentation skills of their students. This approach not only facilitates classroom discussions but also allows for the identification of students who may demonstrate weaker clinical documentation skills. For those students, particularly those struggling to gather pertinent information or missing key details from the episodes or sessions, it is recommended that they rewatch the relevant episode or session. Additionally, documenting while reviewing a transcript of the entire episode can be beneficial. This exercise enables students to capture overlooked details and learn to identify key information within the typical 45–60-minute duration of an episode. To further support these students, the instructor can provide additional resources. For challenges related to understanding case dynamics and diagnostic criteria, Diagnostic Essentials of Psychopathology: A Case-Based Approach by Hammond (2021) is an excellent resource. For those needing assistance in goal setting

and treatment planning, *The Complete Adult Psychotherapy Treatment Planner* (6th ed.) by Jongsma Jr. et al., (2021) is recommended. These resources aim to enhance the students' understanding and practical skills, thereby improving their overall clinical documentation capabilities.

Implications

While the Docuseries Diagnosis Assignment offers a highly adaptable and versatile instructional tool for counselor education, it is essential to address the multicultural and social justice implications that arise from using popular media in the classroom. Counseling students bring diverse, intersecting identities, including their cultural, racial, gender, and socioeconomic backgrounds, which can influence how they relate to and engage with the media presented. Incorporating docuseries can privilege certain groups while unintentionally marginalizing others, depending on how these narratives reflect or fail to reflect diverse life experiences.

For example, a docuseries like *Dirty John*, which focuses on an affluent white family dealing with manipulation and abuse, may unintentionally privilege students who come from similar backgrounds or have more familiarity with these types of family dynamics. This narrative may not fully resonate with students from different racial or socioeconomic backgrounds, who might have vastly different experiences of abuse, manipulation, or family dynamics, potentially leading to a limited understanding of how these issues manifest in diverse communities. Similarly, *The Staircase*, with its focus on a white, upper-middle-class family caught in a high-profile legal battle, may not address the intersectional realities faced by racially marginalized or low-income individuals who often encounter systemic inequities in the legal system that can compound their experiences of trauma and stress.

The absence of diverse representation in series like *The Act* or *The Keepers*—which focus on White protagonists—could convey implicit messages about which experiences are deemed "typical" or worthy of analysis in mental health contexts. These portrayals might unintentionally marginalize students from underrepresented groups by not reflecting their lived experiences or by overlooking how factors such as race, ethnicity, and social class play crucial roles in family dynamics, trauma, and mental health. To promote inclusivity, instructors can make deliberate choices to incorporate docuseries that reflect a wider range of cultural and social experiences. For example, *Wild Wild Country* provides an opportunity to discuss cult dynamics and trauma within a racially diverse community, while also examining how systemic power and cultural manipulation intersect. *Murder Among the Mormons* explores themes of faith, deception, and identity within a religious minority group, offering perspectives that challenge more mainstream narratives and allowing students to engage with the cultural nuances that influence mental health in religious or marginalized communities.

Instructors should also encourage critical discussions about how the cases depicted in these docuseries may reinforce or challenge dominant cultural narratives. For instance, in *The Keepers*, students can explore how institutional betrayal and sexual abuse are portrayed, while also reflecting on how race, gender, and socioeconomic status might alter the course of justice and healing in less privileged communities. By integrating conversations around privilege, power, and oppression, students can gain a more nuanced understanding of how their own intersecting identities might influence their perception of clients' experiences and diagnoses.

To further promote inclusivity, instructors might allow students to select or suggest docuseries that resonate with their cultural backgrounds or lived experiences. For example, students from underrepresented communities could choose media that highlight stories of systemic racism or immigration struggles, which are often missing in mainstream docuseries. This approach ensures that the diversity of student experiences is reflected in the classroom materials, reinforcing that no single narrative or cultural perspective dominates counseling practice. This method encourages students to apply a critical, culturally responsive lens when completing their case notes. They can reflect on how factors like race, socioeconomic status, or cultural identity may have influenced the client's presenting issues or the way family dynamics play out, as seen in series like The Family or Don't F**k with Cats, which explore the psychological effects of manipulation and control within power structures. By engaging with these stories critically, students learn to consider how multicultural identities intersect with clinical practice, diagnosis, and ethical decision-making.

FUTURE DIRECTIONS FOR PRACTICE AND RESEARCH

The incorporation of an innovative instructional tool in counselor education represents a significant shift towards a more dynamic, inclusive, and student-centric pedagogical approach. This tool emphasizes the necessity of adaptability, relevance, and active student participation in higher education. As counselor educators adopt this approach, they enter a sphere of teaching that enhances both efficacy and satisfaction for educators and learners alike.

To further enrich counselor education, a focus on integrating pop culture as an educational resource is recommended. The use of pop culture helps educators stay connected with contemporary societal dynamics, ensuring that academic instruction remains relevant and informed by the broader social context. This approach is not just confined to traditional classroom settings but extends to hybrid learning environments, suggesting a need for research into versatile tools that are effective both in-person and online.

This method underscores the importance of a more experiential educational experience. where theoretical knowledge is applied to real-world scenarios. The growing popularity of online learning necessitates innovative teaching techniques to engage students effectively. As noted by Saleh et al. (2013), the challenge for instructors and institutions is to engage students in online learning as effectively as in face-to-face instruction.

Embracing Problem-Based Learning (PBL), as discussed by Carone (2018), offers a practical, instructional method used in post-secondary education to help students apply knowledge in real-world settings. PBL has been shown to be as effective as traditional teaching strategies in acquiring factual knowledge (Carone, 2018). Moreover, students educated through PBL demonstrate superior clinical application skills compared to those taught by conventional methods. This method also enhances problem-solving, critical reasoning, and long-term retention more effectively than traditional methods alone.

This instructional tool, along with the adoption of PBL and the integration of pop culture into counselor education, can significantly enhance the learning experience, providing students with a more comprehensive, engaging, and applicable education that is well-suited to the demands of the modern world and the evolving field of counseling.

References

- Banõs, J. E. (2007). How literature and popular movies can help in medical education: applications for teaching the doctor-patient relationship. Medical Education Oxford, 41(9), 918. https://doi:10.1111/j.1365-2923.2007.02829.x
- Brown, B. (2014). Public health education using pop culture and media. Frontiers in Public Health, 2, 231. http://dx.doi.org/10.3389/ fpubh.2014.00231
- Carone, S. (2018). A problem-based learning case study in rehabilitation counselor education. The Journal of Counselor Preparation and Supervision, 10(1). Retrieved from http://respository.wcsu.edu/jcps/vol10/iss1/3
- Collins, K. (2012). Strategies for using pop culture in sport psychology and coaching education. Journal of Physical Education, Recreation & Dance, 83(8), 20-31. http://dx.doi.org/10.1080/07303084.2012.10598824
- Hammond, C. (2021). Diagnostic essentials of psychopathology: A case-based approach. SAGE Publications, Incorporated.
- Hansen, J. T. (2003). Including diagnostic training in counseling curricula: Implications for professional identity development. Counselor Education and Supervision, 43(2), 96–107. http://dx.doi.org/10.1002/j.1556-6978.2003.tb01834.x
- Higgins, J. A., & Dermer, S. (2001). The use of film in marriage and family counselor education. Counselor Education and Supervision, 40(3), 182-192). http://dx.doi.org/10.1002/j.1556-6978.2001.tb01251.x
- Hou, S.-I. (2014). Integrating problem-based learning with community-engaged learning in teaching program development and
- Jongsma Jr., A. E., Peterson, L. M., & Bruce, T. J. (2021). The complete adult psychotherapy treatment planner. John Wiley & Sons.
- Koch, G., & Dollarhide C. T. (2000). Using a popular film in counselor education: "good will hunting" as a teaching tool. Counselor Education and Supervision, 39(3), 203-210. http://dx.doi.org/10.1002/j.1556-6978.2000.tb01232.x;
- Kress, V. E. W., Eriksen, K. P., & Rayle, A. D. (2005). The DSM-IV-TR and culture: Considerations for counselors. Journal of Counseling and Development, 83(1), 97.
- Murphy, J. F. (2016). A correct diagnosis is of increasing importance. Irish Medical Journal, 109(1), 324.
- Nasiruddin, M., Halabi, M., Dao, A., Chen, K., & Brown, B. (2013). Zombies- a pop culture resource for public health awareness. Emerging Infectious Diseases, 19(5). http://dx.doi.org/10.3201/eid1905.AD1905
- Nittoli, J. M., & Guiffrida, D. A. (2018). Using Popular Film to Teach Multicultural Counseling: A Constructivist Approach. Journal of Creativity in Mental Health, 13(3), 344-357. http://dx.doi.org/10.1080/15401383.2017.1340216
- Salch, S. M., Asi, Y. M., & Hamed, K. M. (2013). Effectiveness of integrating case studies in online and face-to-face instruction of pathophysiology: a comparative study. Advances in physiology education, 37(2), 201–206. https://doi.org/10.1152/advan.00169.2012

- Sanson, G., Vellone, E., Kangasniemi, M., Alvaro, R., & D'Agostino, F. (2017). Impact of nursing diagnoses on patient and organizational outcomes: A systematic literature review. *Journal of Clinical Nursing*, 26(23–24), 3764–3783. https://doi.org/10.1111/jocn.13717
- Shen, Y. (2015). Cultivating multiculturally competent counselors through movies. Journal of Creativity in Mental Health, 10(2), 232–246. http:// dx.doi.org/10.1080/15401383.2014.959679
- Shepard, D. S., & Brew, L. (2005, January 1). Teaching theories of couples counseling: The use of popular movies. Family Journal, 13(4), 406–415. http://dx.doi.org/10.1177/1066480705278470
- Stewart, J. B. (1998). Problem-based learning in counsellor education. Canadian Journal of Counselling, 32(1), 37-49.
- Substance Abuse and Mental Health Services Administration. (2014). Trauma-informed care in behavioral health services (Treatment Improvement Protocol Series No. 57). U.S. Department of Health and Human Services. https://www.samhsa.gov/
- Toman, S. M., & Rak, C. F. (2000). The use of cinema in the counselor education curriculum: Strategies and outcomes. Counselor Education and Supervision, 40(2), 105-114. http://dx.doi.org/10.1002/j.1556-6978.2000.tb01242.x;
- Winings, K. (2007). Five invaluable resources for young adult religious education. Religious Education, 102(2), 224–232. http://dx.doi. org/10.1080/00344080701285493

Appendix A

This appendix provides the treatment plan and case notes referred to in the paper. These materials are designed for a master's level counseling class activity, where students engage in practical documentation exercises, specifically through case notes and treatment planning. For this activity, students will observe a selected miniseries episode, identify presenting issues, and develop a treatment plan, followed by weekly progress notes documenting the fictional client's progress. The objective is to reinforce students' competencies in clinical documentation and treatment planning within a simulated therapeutic setting.

TREATMENT PLAN TEMPLATE

Client Information		
Name		
Date of Birth (you can look th	nis up online)	
Case Number (make this up)		
docuseries? Do not use inforr it to be true from pop culture.	nation that is not discussed Description of the main iss	presented in the first episode of this d in the first episode, even if you know ues or concerns prompting treatment:
Goals and Objectives		
	hey want to do something	chieve (What is the client's goal with different with their life? Do they need interpersonal issues?)
Measurable and specific objugoals and objectives.)	ectives for each goal (Use	SMART goal language here for your
Intervention Strategies (How CBT, ACT techniques)	will you help the client ac	hieve these goals? ; i.e., mindfulness,
Goal 1		
Objective for Goal 1		
Therapeutic interventions for the presenting problem)	Objective 1 (Techniques a	nd methods to be used in addressing
[] Cognitive Behavioral Therapy (CBT)	Techniques [] Acceptance and Cor	nmitment Therapy (ACT) [] Mindfulness Practices
[] Interpersonal Relationship Skills	[] Skill Development	[] Substance Abuse Skills
[] Communication Skills	[] Boundary Setting Skills	[] Advocacy Skills
[] Self-Esteem Development Skills	[] Confrontation Techniques	[] Symptom Management

[] Emotional Regulation Skills	[] Stress Management Techniques	es [] Problem-Solving Skills	
[] Anger Management Techniques	[] Coping Mechanism Development [] Grief and Loss Proces		
[] Trauma-Focused Interventions (TIC) [] Self-Care and Wellness	Planning [] Social Skills Training	
[] Assertiveness Training	[] Motivational Interviewing	[] Play Therapy Techniques	
[] Family Systems Therapy (DBT) Skills	[] Solution-Focused Brief Therap	nerapy (SFBT) [] Dialectical Behavior Therap	
[] Psychoeducation	[] Relaxation Techniques	[] Narrative Therapy	
[] Art/Music Therapy Techniques	[] Group Therapy Participation	[] Crisis Intervention Skills	
[] Psychoanalytic Techniques	[] Other: []	
Frequency and Duration of T long do you think this issue	•	u meeting with your client, and how	
Frequency[]Weekly []Bi	-weekly [] Monthly [] As N	Needed	
Duration [] 1 Month [] 3 Mor	nths []6 Months[]12 Mont	hs	
Progress Evaluation (How wi	Il you evaluate progress on	this goal and objective?)	
Goal 2			
Objective for Goal 2			
•			
The second is in the second in the second	Objective 2		
Therapeutic interventions fo	-		
[] Cognitive Behavioral Therapy (CBT)	Techniques [] Acceptance and Comm	nitment Therapy (ACT) [] Mindfulness Practices	
[] Interpersonal Relationship Skills	[] Skill Development	[] Substance Abuse Skills	
[] Communication Skills	[] Boundary Setting Skills	[] Advocacy Skills	
[] Self-Esteem Development Skills	[] Confrontation Techniques	[] Symptom Management	

[] Emotional Regulation Skills	[] Stress Management Techniques	[] Problem-Solving Skills	
[] Anger Management Techniques	[] Coping Mechanism Develop	lopment [] Grief and Loss Processing	
[] Trauma-Focused Interventions (TIC)	[] Self-Care and Wellness P	Planning [] Social Skills Training	
[] Assertiveness Training	[] Motivational Interviewing	[] Play Therapy Techniques	
[] Family Systems Therapy (DBT) Skills	[] Solution-Focused Brief Therapy	(SFBT) [] Dialectical Behavior Therapy	
[] Psychoeducation	[] Relaxation Techniques	[] Narrative Therapy	
[] Art/Music Therapy Techniques	[] Group Therapy Participation	[] Crisis Intervention Skills	
[] Psychoanalytic Techniques	[] Other: []	
Frequency[]Weekly []Bi-	weekly [] Monthly [] As N	eeded	
Duration [] 1 Month [] 3 Mon	ths []6 Months[]12 Month	S	
Progress Evaluation (How wil	l you evaluate progress on tl	his goal and objective)	
Goal 3			
Objective for Goal 3			
The same state in the same state of a same state of the same state	Objective 0		
Therapeutic interventions for			
[] Cognitive Behavioral Therapy (CBT) T		tment Therapy (ACT) [] Mindfulness Practices	
[] Interpersonal Relationship Skills	[] Skill Development	[] Substance Abuse Skills	
[] Communication Skills	[] Boundary Setting Skills	[] Advocacy Skills	
[] Self-Esteem Development Skills	[] Confrontation Techniques	[] Symptom Management	
[] Emotional Regulation Skills	[] Stress Management Techniques	[] Problem-Solving Skills	
[] Anger Management Techniques	[] Coping Mechanism Develop	oment [] Grief and Loss Processing	
[] Trauma-Focused Interventions (TIC)	Trauma-Focused Interventions (TIC) [] Self-Care and Wellness Planning [] Social Skills Training		

[] Assertiveness Training	[] Motivational Interviewing	[] Play The	erapy Techniques	
[] Family Systems Therapy (DBT) Skills	[] Solution-Focused Brief Thera	py (SFBT)	[] Dialectical Behavior Them	rapy
[] Psychoeducation	[] Relaxation Techniques	[] Narrative	Therapy	
[] Art/Music Therapy Techniques	[] Group Therapy Participation	ı []Cr	isis Intervention Skills	
[] Psychoanalytic Techniques	[] Other: [.]	
Frequency[]Weekly []I	Bi-weekly [] Monthly [] As	Needed		
Duration [] 1 Month [] 3 Mo	onths [] 6 Months [] 12 Months	:hs		
methods for measuring prog	will you evaluate progress o	tc.?)		
Additional Notes (Any other	relevant information or obs	ervations?)		
	you know when treatment i			
Signature of Clinician				
Date				

PROGRESS NOTE TEMPLATE

Objective

This exercise is designed to help you gain practical experience in writing progress notes using either the SOAP or DAP format. You will find below a series of sample progress notes. Your task is to choose one of the two formats (SOAP or DAP) and rewrite these samples accordingly.

Instructions

Select a Format: Begin by choosing either the SOAP (Subjective, Objective, Assessment, Plan) or DAP (Data, Assessment, Plan) format for your progress notes.

Use only the information provided in the current episode of the docuseries you are watching; do not use outside information even if you know it to be true.

SOAP Case Notes Template

Subjective (S):

Description of the client's current condition from their perspective.

Key client statements or expressed concerns.

Client's feelings, thoughts, and perceptions.

This is what the client said happened or how they stated they are feeling.

Objective (O):

Observable facts or symptoms, including behavior, appearance, and speech.

Results from assessments.

Relevant clinical data (ex. Client appeared sad based on crying during session while discussing their mother's illness).

These are things you can observe in the room or on the docuseries screen that you personally saw; you have the justification for what you write here, and it has to be true and observed by you during the episode. No outside information here.			
Assessment (A):	 		
		subjective and	d objective information.
	oses or issues id	-	a objective information.
_	nges in conditio		· visit
Progress Evalua	-	ir siriee tire iasi	. •1510.
Goal 1			
	[] Progressing	[] Regressed	[] Not Addressed [] On Hold
	[] Progressing	[] Regressed	[] Not Addressed [] On Hold
	[] Progressing	[] Regressed	[] Not Addressed [] On Hold
Plan (P)			
Proposed cours	e of treatment.		
Modifications to	current treatme	ent.	
Follow-up requi	rements (appoin	tments, assess	ments).

Client goals and objectives: (Will they remain the same, or do they need to be adjusted based on new information?)

DAP CASE NOTES TEMPLATE

Data (D):				
Relevant information about the client's issues or situation.				
Details from the	Details from the client's history or background.			
Observations m	nade during the s	session.		
This section is t	the Subjective ar	nd Objective po	ortion of SOAP notes togeth	ier.
Assessment (A)	:			
Clinician's inter	Clinician's interpretation of the data.			
Diagnosis or identification of the main problems.				
Client's strengths and weaknesses regarding the issues.				
Progress Evalua		3 3		
Goal 1				
	[] Progressing	[] Pagrassad	[] Not Addressed [] On H	old
Goal 2	[]1 Togressing	[] Negressed	[]Not Addressed []OITT	olu
	[] Progressing	[] Regressed	[] Not Addressed [] On H	old
Goal 3	[]110gressing	[] Kegressed	[]Not Addressed []On H	ord
	[] Drogressing	[] Dograssad	[] Not Addressed [] On U	ald
[] Maintained	[] Progressing	[] Regressed	[] Not Addressed [] On H	old

Plan (P):
Immediate and long-term treatment plans.
Therapeutic techniques or interventions to be used.
Goals and objectives for future sessions.
Recommendations for client self-care or activities outside of sessions.