

Using Popular Productions in the Development of Counselor Candidates' Preventive Competencies: 13 Reasons Why

Erol Esenⁱ

Manisa Celal Bayar University

Melda Meliha Erbaşⁱⁱ

Manisa Celal Bayar University

Abstract

The aim of this study is to examine the views of the counselor candidates about preventive interventions and problem behaviors, and the use of popular productions in increasing competencies related to preventive interventions in the context of "13 Reasons Why" series. The participants of this study are senior students of Guidance and Counseling undergraduate program in Turkey. In this research, purposeful sampling method was used, and 30 students who attended the "School Based Preventive Guidance and Counseling" course and followed at least ten episodes of the "13 Reasons Why" series' first season were participants. Phenomenological design which is a qualitative research methods was used in the study. The findings point out four themes; risk and protective factors, awareness of suicide, preventive interventions, and professional-personal development. The findings of the study were discussed in the light of the literature.

Keywords: Prevention, Counselor Candidates, "13 Reasons Why"

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ⁱ **Erol Esen**, Assist. Prof. Dr., Counseling and Guidance, Manisa Celal Bayar University, ORCID: 0000-0002-8285-2666

Correspondence: erol.esen@cbu.edu.tr

ⁱⁱ **Melda Meliha Erbaş**, Assist. Prof. Dr., Department of Counseling and Guidance, Manisa Celal Bayar University, ORCID: 0000-0001-8640-5356

INTRODUCTION

Mental health is a field that different disciplines work on independently or collaboratively. The counseling and guidance is one of the disciplines that contributes significantly to the studies of mental health, especially with its developmental and preventive perspective. Prevention in the field of mental health; focuses on eliminating the risk factors about problem behaviors and reducing the prevalence and negative effects of problem behaviors (Baker, 2011; Romano & Hage, 2000). The developmental and preventive perspective is becoming more important, with an increasing trend in the prevalence of problem behaviors (substance abuse and addiction, bullying, sexual intercourse at an early age, suicide etc.), especially among children and adolescents (Conyne, 2013b; Korkut Owen, 2011; Siyez, 2016; Yavuzer, 2011). There is a broad consensus about the main roles that counselors can play in the field of mental health. Counselors provide services connected with their developmental, remedial and preventive roles (Blocher, 2000; Baker, 2011; Dollarhide & Saginak, 2017; Eryılmaz, 2013; Myrick, 2011; Turkish Psychological Counseling and Guidance Association, 2011; Council for Accreditation of Counseling and Related Educational Programs [CACREP], 2016). Counselors around the world primarily target problem behaviors with the preventive services and interventions that they provide in schools, community mental health centers and non-governmental organizations (Akın-Little, Little, & Delligatti 2004; Davis, Kruczek, & McIntosh, 2006; Eryılmaz, 2013; Gladding, 2017; Mellin, 2009). A broad range of preventive counseling and guidance services such as providing information about problem behaviors to children and adolescents, as well as professionals working with them, screening/identifying risk factors, developing psycho-educational interventions, developing peer support communities, creating social campaigns to raise awareness about problem behaviors, are offered by counselors (Ando, Asakura, Ando, & Simons-Morton, 2007; Korkut, 2003; Meyers ve Nastasi, 1999; Yavuzer, 2011; Whiston, Tai, Rahadja, & Eder, 2011). Providing these services effectively helps to decrease the prevalence of problem behaviors exhibited by children and adolescents (suicide, substance abuse, bullying, violence, risky sexual behaviors etc.), and also provides support to children and adolescents about performing developmental tasks expected of them (Davis, Kruczek, & McIntosh, 2006; Foxx, Baker, & Gerler, 2017; Galassi & Akos, 2007; Rowney & Quinn, 2000).

When the features of effective prevention studies, which are an integral part of the mental health field, are examined; it is seen that they focus on protective factors (high level of psychological resilience, advanced social skills, participation in social activities, strong family bonds, positive attitudes towards the school, discovering and supporting special abilities, presence of role models for healthy behaviors, adequate social support, advanced problem solving skills, etc.) as well as risk factors (impulsivity, lower academic success, poor family functioning, low future expectations, peer pressure, exposure to traumatic experiences, attention deficit and hyperactivity disorder, unhealthy parental attitudes, inadequate social support, etc.) related to problem behavior (Arthur, Hawkins, Pollard, Catalano, & Baglioni, 2002; Blocher, 2000; Conyne, 2013a; Eryılmaz, 2013; Lambie, Rosemary Leone, Susan, & Martin Christopher, 2002; Ögel, Tarı, & Eke, 2006; Sears, 2005; Terzian, Andrews, & Moore, 2011), and they primarily focus on behavioral outcomes rather than affective and cognitive outcomes (Whiston et al., 2011).

Preventative interventions in the field of counseling aim to develop and support social skills of participants including effective communication, assertiveness, saying no and problem solving (Weir, 2005; Mann, Apter, Bertolote, Beutrais, Currier, & Haas, 2004; LaFromboise & Lewis, 2008). Also, these studies take into account possible social environments associated with problem behaviors such as family, teachers, peer groups and focus on ensuring cooperation between these groups (Hawkins & Herrenkohl, 2003; Korkut Owen, 2011; Romano & Hage, 2000; Topping & Barron, 2009). Structuring the activities of preventive interventions in accordance with the developmental levels of the participants (Hage, Romano, Conyne, Kenny, Matthews, Schwartz, & Waldo, 2007), being culturally sensitive (Chronister, McWhirter, & Kerewsky, 2004; Cook, 2012; Matthews & Skowron, 2004) and using peer groups in the announcement and the intervention process (Black, Tobler, & Sciacca, 1998; Tobler et al., 2000; Whiston et al., 2011) contributes significantly to the effectiveness of interventions. In addition, it is seen that long-term and systematic interventions are more effective than short-term programs consisting of intensive sessions (Clanton Harpine, 2011; Horn & Kolbo, 2000).

The competencies of counselors who carry out preventive services are among the factors that can be determinant in the effectiveness of interventions (Center for Substance Abuse Treatment, 2006; Yavuzer, 2011). The acquisition and development of counselor competencies related to carrying out preventive interventions is among the goals of counselor training programs all around the world (Conyne, 1997; Korkut Owen, 2011). Also, CACREP considers the competencies needed to carry out preventive services as an important part of counselor counseling training programs (Korkut Owen, 2011).

Today, the importance of the counselors' preventive role in the field of mental health is expected to increase (Conyne, 2013b; Juntunen & Atkinson, 2002). In accordance with this expectation, the "Preventive Guidance and Psychological Counseling" course is included in the psychological counseling undergraduate program, which was updated and implemented gradually by the Higher Education Council (HEC) in 2018. When the new undergraduate program is examined in dept, it is seen that the content and subjects directly related to preventive interventions are included in the content of different elective courses such as "Post Traumatic Counseling", "Social Skill Education", "Addiction and Prevention of Addiction" and "Domestic Violence". In addition, in the content of the "Guidance and Counseling in Schools" course, which is one of the compulsory courses of the program, there is a important emphasis on the goals and principles of the developmental and preventive approach (HEC, 2018). However, depending on the gradual implementation of new undergraduate program, "School Based Preventive Guidance and Counseling" course is still is available as an elective course at many universities in Turkey.

Parallel to the multidimensional competencies expected from counselors, several teaching techniques are used throughout the counselor training such as games, demonstration, role playing, interview with individuals from various cultures and educational videos (Kağnıcı, 2015). The use of popular movies is one of the techniques that are frequently used in counselor training (Toman & Rak, 2000). Counseling theories (Koch & Dollarhide, 2000; Peoples & Helsel, 2013), family counseling (Alexander & Waxman, 2000; Shepard & Brew, 2005; Higgins & Dermer, 2001), developmental stages (Corcoran, 1999; Ello, 2007; Pierce & Wooloff, 2012), group counseling (Armstrong and Berg, 2005; Moe, Autry, Olson, & Johnson, 2014), ethics in counseling (Bradley, Whiting, Hendricks, Parr, & Jones, 2008; Koch and Dollarhide, 2000) grief counseling (Doughty Horn, Crews, & Harrawood, 2013; Hannon & Hunt, 2015), addiction (Warren, Stech, Douglas, & Lambert, 2010), psychopathology (Chambliss & Magakis, 1996; Toman & Rak, 2000) and multiculturalism (Nittoli & Guiffrida, 2017; Villalba & Redmond, 2008) stand out as the subjects of popular movies that are used. Studies examining the effects and functionality of the use of popular movies in counselor training point out that it provides enriching experiences to counselor candidates in recognizing the dynamics of the behaviors in multiple dimensions (Kağnıcı, 2015), being active learners through observation (Warren, Stech, Douglas, & Lambert, 2010), empathizing with various topics, gaining awareness and sensitivity through strong emotions (Pinterits & Atkinson, 1998; Kağnıcı, 2015; Nittoli & Guiffrida, 2017). In addition, it is reported that this technique increases students' participation in courses, facilitates discussion of different perspectives, contributes to increasing insight about real-life reflections of theoretical knowledge and enhances classroom interactions (Koch & Dollarhide, 2000). In this context, the use of experiential strategies such as watching and discussing popular movies on various topics within the scope of counselor training, will contribute to the rooting of the competencies of counselor candidates (Kağnıcı, 2015)

The Netflix tv series "13 Reasons Why" which was adapted from Jay Asher's (2007) novel of the same name, is also one of the popular productions worldwide (Netflix, 2017). The tv series was first released in 2017 and displays striking problem behaviors that cause a high school girl to commit suicide. Peer bullying, sexual harassment and assault, substance abuse, and violation of the personal privacy are some of these problem behaviors. On the other hand, the series provides opportunity to observe the specific developmental characteristics of adolescents, the relationships between adolescents with adults (parents, teachers, counselors) and the inadequacy of adults in these relationships (Bridge et al., 2019; D'Agati, Beaudry, & Swartz, 2019; Mueller, 2019). The series has become highly debated in a short time and has attracted the attention of many experts working with adolescents, especially in the field of mental health (Arendt, Scherr, Patrick, Jamieson, & Romer,

2019; Ayers, Althouse, Leas, Dredze, & Allem, 2017; Bridge et al., 2019; Campo & Bridge, 2018; Carmichael & Whitley, 2018; Cooper, Bard, Wallace, Gillaspay, & Deleon, 2018; da Rosa et al., 2019; O'Brien, Knight, & Harris 2017; Niederkrotenthaler et al., 2019). While the researchers mainly focused on the effect of the series on adolescents in terms of suicidal behavior, there was no study regarding the use of the series in counselor training or focusing on the effect of the series on the counselors' preventive perspectives.

Peer bullying which is one of the problem behaviors frequently seen in schools, has become visible once again with the "13 Reasons Why" series. Victims can be bullied by peers with various forms of aggressive and offensive behaviors such as name calling, teasing, humiliating, threatening verbally, isolating, harming the individual or their belongings physically, and taking belongings without permission (Bradshaw, Waasdorp, Johnson, 2015; Coy, 2001; Pişkin, 2002). Peer bullying can be a risk factor for a wide range of adverse outcomes, from dropout to suicide attempts (Geoffroy et al., 2016; Townsend, Flisher, Chikobvu, Lombard, & King, 2008). Young people between the ages of 15-24 are considered one of the most at risk groups for suicide attempts (Harmancı, 2015; Korkut Owen, 2011). Not fully matured problem solving skills and high tendency to behave impulsively can increase the level of risk for young people (Durak-Batigün 2002). Although suicide rates among adolescents are lower than developed countries in Turkey, the risk is reported to increase gradually (Korkut Owen, 2011). Approximately one in five suicide attempts in Turkey is made by adolescents attending to high school (Özcan, Şenkaya, Özdin & Dinçer, 2018). In the light of this information, gaining awareness, sensitivity and skills about problem behaviors among counselors, and increasing their competencies to provide preventive interventions emerge as a necessity (Korkut Owen, 2011). "School Based Preventive Guidance and Counseling" course is one of the efforts to meet the needs of the counselor candidates on this subject. In this course throughout the semester, after the theoretical course the first season episodes (13 weeks) of the "13 Reasons Why" series were watched and a group discussion was held about the episode watched. The current study has two main aims: 1) to examine the views of the counselor candidates about preventive guidance and counseling interventions and problem behaviors in the context of the series, 2) to examine the views of the counselor candidates about the use of popular productions in increasing competencies related to preventive interventions.

METHOD

Participants

The participants of the research are senior students of Manisa Celal Bayar University Guidance and Counseling undergraduate program. In this research, criterion sampling, one of the purposeful sampling methods, was used. Participants consisted of 30 students, 13 male and 17 female, who attended the "School Based Preventive Guidance and Counseling" course, followed at least ten episodes of the "13 Reasons Why" series' first session. The coding of the counselor candidates' participating in the research was arranged from 1 to 30 as P-1, P-2...P-30

Research Design

The design of the research was determined as a phenomenological design, one of the qualitative research patterns. Phenomenology is an useful and meaningful design among educational and social sciences researches. Phenomenology is a genuine manner of representing the realities that participants experience in their lives (Padilla-Diaz, 2015). In the research, the data were evaluated by two academicians, and codes, categories and themes were created. There are a number of strategies different from quantitative research in order to increase reliability and validity in qualitative research (Başkale, 2016). In this study, triangulation technique was used to ensure reliability and internal validity, and two researchers coded data independent from each other.

Later, the codings defined by the two researchers were gathered and examined, and consistent codes were determined. The similarity ratio between encoders was found to be 86%. In order to ensure

reliability, there should be at least 80% consensus among coders (Miles & Huberman, 1994). In order to ensure the external validity of the research, the participants were determined with the purposeful sampling method and the questions to be asked to the participants were clearly defined.

Data Collection Tool

In the study, a four-question questionnaire prepared by the researchers was used to determine the views of the candidates for psychological counselors. These questions asked to the participants a) How do you evaluate the series you watch in terms of risk and protective factors? b) How did the series you watched affect your awareness of suicidal behavior? c) How do you evaluate the interventions of the school counselor in the series in terms of preventive interventions? d) How did the series you watched contribute to your professional and personal development? Content analysis method was used in the analysis of the data obtained.

Process

During the semester, 13 weeks of School Based Preventive Guidance and Counseling were studied each week, followed by each episode from the first season of the series "13 Reasons Why", respectively, with the students. At the end of each episode, students were asked how they gained awareness of preventive guidance services and brief group discussions were conducted. At the end of the semester, students were asked to fill out the four-question questionnaire prepared by the researchers.

FINDINGS

As a result of qualitative data analysis, participant views were collected under four themes. These themes include risk and protective factors, awareness of suicide, preventive guidance interventions, and professional-personal development.

Risk and Protective Factors

Under this theme are four sub-themes: **individual factors, family factors, peer factors and school factors.**

Individual factors. The individual factors sub-theme includes nine codes: Characteristics of adolescence, traumatic experiences, self-perception, loneliness, stigma, academic achievement, social skills, social activities, and future goals.

Characteristics of adolescence. The participants evaluated adolescent characteristics as a risk factor for suicidal behavior due to intense emotional changes and frequent observation of risky behaviors. One participant expressed their opinion as follows: *"The adolescence of the students in the series is a period of increased emotional sensitivity and violent tendencies. This period is the most important risk factor for suicide due to impulsive behavior, intense emotional changes and the desire to belong to a group of young people"* (P11).

Traumatic experiences. Participants assessed traumatic experiences as a risk factor for suicidal behavior because they directly affect an individual's mental state. In particular, they described the abuse and rape experienced in the school setting as a mental injury. *"Self-esteem drops in the person who is subjected to a traumatic event such as harassment or abuse, the individual thinks he or she is guilty of the incident and will not live with it. These experiences are a risk factor that can lead to suicide if the individual's ability to seek help and psychological well-being is insufficient"* (P3).

Self perception. Participants identified negative self-perception as a risk factor in terms of the individual's coping with negative experiences and self-assessment of his or her environment. They evaluated positive self-perception as a protective factor, especially for adolescents. *"In the series,*

students' negative self-perception is among the risk factors. Especially when Hannah was feeling better during her time at the poetry club; low academic achievement, bullying and exclusion she experienced at school have made her feel worthless and incompetent. All of this reasons would have brought him closer to suicide” (P1).

Loneliness. Participants identified loneliness as a risk factor for suicide in terms of difficulty coping with negative experiences. They noted that social support is an empowering factor for individuals. *“Hannah was saying that she felt this way because she could not get support from anyone while expressing her loneliness and no one understood her. The most important factor that drove Hannah to suicide was her inability to get enough social support and her being alone” (P7).*

Stigmatization. Participants identified stigmatization as a risk factor for suicide through the exclusion and isolation of the individual from their social environment. *“Hannah was isolated from society, she was alone and she was stigmatized. The fact that everyone looked at her with condescending eyes, writing outrageous statements in the toilets about her was a major risk factor for suicide” (P14).*

Academic achievement. Participants identified low academic achievement as a risk factor. On the other hand, they evaluated high academic achievement as a protective factor in terms of strengthening an individual's self-perception, social acceptance and increased motivation for future goals. *“It appears that most students involved in the series have low school achievement and have little expectations for the future. The fact that Hannah's future plans were not supported by the school counselor, because of her low grades, increased Hannah's despair when he said she needed to reduce her goals” (P5).*

Social skills. Participants identified low social skill as a risk factor. On the other hand, they evaluated high social skills as a protective factor for their ability to communicate, problem solving and seek help. *“Among the protective factors are Hannah seeking help in her communication class, asking for help from a counselor, stepping in to establish friendships with her peers. However, Hannah's inability to fully express herself to the school counselor and her family and her isolation from the environment is a risk factor” (P8).*

Social Activities. Participants defined participation in social activities as a protective factor in terms of the individual's self-expression, strengthening self-perception and social acceptance. They stated that during adolescence, participation in appropriate social activities would be an important protective factor for the individual to be able to reveal his or her self. *“Hannah's participation in the poetry club; the great appreciation of her poems was a protective factor. Then her left the club and stopped writing poetry as a result of sharing her poetry without permission and mocking her, which was a risk factor” (P4).*

Future goals. Participants identified their future goals as a protective factor for suicide in terms of their ability to cope with negative experiences. *“Hannah's willingness to plan for her future, her involvement in college promotions at the school were protective factors, she wanted to make an effort, but her lack of adequate support at the school led her to despair. For an adolescent, the uncertainty of her future and the loss of hope may be reason enough for her life to be meaningless” (P24).*

Family factors. Under the family factors sub-theme are three codes: **family conflicts**, **economic conditions** and **parental support**.

Family conflicts. Participants identified family conflicts as a risk factor for adolescent individuals. The participants assessed the divorced family structure as a risk factor, while the family integrity and positive family environment as a protective factor. *“Family conflict was frequent, especially in Hannah and Justin's families. Justin has violence by his stepfather who was a drug addict with mental problems was also among the risk factors” (P13).*

Economic conditions. Participants identified the low economic conditions as a risk factor for adolescents. They noted that individuals with low income are disadvantaged both in excess of family problems and in achieving future goals. *“Hannah's family were unable to notice Hannah's condition due to their discussions about economic issues. Also, due to economic incompetence, Hannah's inability to attend the university she wanted made her even more desperate” (P14).*

Parental support. Participants found that adolescents who were supported by their parents were more advantageous in coping with negative experiences and developing positive self esteem, while adolescents with indifferent parents were more inclined to risky behaviors. *“Hanna's parents didn't spend enough time on their daughter and didn't realise Hannah's change. In this case we can say that family indifference, lack of deep sharing within the family are risk factors. On the other hand, the mother's talking about Hanna's future goals and supporting and encouraging her are protective factors” (P16).*

Peer Factors. Under the peer factors sub-theme there are three codes: **Problem behaviors, peer bullying and peer support.**

Problem behaviors. Participants stated that problem behaviors such as alcohol-substance use, truancy, gang membership and risky sexual behavior are risk factors that harm the school climate. *“In order to increase popularity among adolescents within the peer group, many problem behaviors such as gang membership, alcohol and substance use, possession of weapons are emerging. These behaviors present many risky situations for adolescents” (P7).*

Peer bullying. Participants identified peer bullying as an important risk factor in terms of suicidal behavior. They noted that peer bullying causes risky behaviors such as suicide, alcohol and substance abuse, and that it is an element that directly affects the self-perception of the victim. *“There is a school environment where bullying and violence are common in the series. This environment harbors many negative behaviors such as making fun of others, insulting, threatening, gossiping, sexual abuse, exclusion, and poses a significant risk to students” (P2).*

Peer support. The participants identified peer support as a protective factor for the individual's ability to cope with negative experiences and to feel stronger. *“Ryan's gift of a notebook to Hannah to write poetry and Hannah's friendship with Jessica and Alex was a protective factor, But Alex and Jessica's romantic relationship and estrangement from Hannah was a risk factor. Due to Courtney spreading lesbian gossip, Hannah was bullied by her friends and failed to find peer support. so she decided to end her life” (P10).*

School Factors. Under the school climate sub-theme there are four codes: **lack of discipline, counselor's qualification, teacher and administration support, and preventive guidance services.**

Lack of discipline. Participants identified lack of discipline in school as an important risk factor for adolescents. They noted that bullying and other problem behaviors that were not interfered with due to lack of discipline caused serious harm to the school climate and students. *“The lack of discipline in school climate is an important risk factor. The lack of student follow-up (absenteeism, academic achievement, peer relations etc.) at school is a risk factor” (P20).*

Counselor qualification. Participants identified the judgmental and irrelevant attitude of the school counselor as an important risk factor. They noted that a supportive counselor who can empathize with young people, who have professional qualifications, can be effective in reducing suicide and other risk factors by establishing a better relationship with young people. *“The lack of active and qualified school counselors in the school, the inability to communicate with young people, the inability to identify at-risk students, or the inability to intervene even if they realize the problems are an important risk factor for the students in the school” (P11).*

Teacher and administration support. Participants identified the indifferent attitude of teachers and administration as an important risk factor. Teachers and administrators support have

defined as an important motivator and protective factor for students to cope with negative experiences. *“It can be a protective factor for other students when a teacher informs them what the symptoms of suicide are and that they can get help from the school if they need it” (P2).*

Preventive guidance services. Participants defined the absence of preventive guidance intervention in the school prior to suicide as a risk factor, and preventing interventions such as preparing posters and boards related to suicide after suicide, informing parents and students as protective factors for suicidal behavior. *“I did not see any preventive intervention by the school counselor before suicide. After Hannah's suicide, posters and brochures began to be hung on the walls of the entire school. The writings in the toilets were deleted. Students and families are starting to be informed about suicide. All of these appear as preventive interventions for other suicides” (P17).*

Awareness of Suicide

Under this theme, there are seven codes: **risk factors, protective factors, suicide signs, suicide myths, counselor interventions, individual differences and the effects of suicide.**

Risk factors. Participants stated that with the series they watched, they gained awareness especially about risk factors and trigger factors related to adolescent suicide. *“I realized that the factors such as loneliness, bullying, lack of family support, school failure are important risk factors for adolescents” (P22).*

Protective factors. The participants stated that they gained awareness about what are the protective factors related to suicide and the importance of their role in preventing suicide. *“I realized that suicide is preventable with an effective intervention method and how important it is during adolescence that friendship relations, positive relationship and healthy communication with the family, looking forward to the future with hope, dreaming and having a future expectation” (P14).*

Signs of suicide. The participants stated that many signs were observed in the individual before the suicide and they gained awareness about what these signs might be. *“I saw that suicide actually had many signs. For example, our hero had his hair cut, covered in it, gave the counselor verbal clues about thinking about suicide, and left an anonymous message about suicide. If these signs could be seen, perhaps he could have survived” (P1).*

Suicide myths. Participants stated that they realized that suicidal behavior was not due to a single reason, and that they learned that a long process involving many triggering factors took place before suicide. *“I thought that suicide was an instantly developing process. With this series, I realized that it was a long and difficult process before the suicide and that many reasons gathered together took the person to this point” (P12).*

Counselor interventions. Participants expressed awareness of the school counselor's damaging interventions before and after suicide in the series. *“For example, the counselor's judgmental treatment of Hannah, covering up the abuse she experienced, and saying ‘If someone decides to commit suicide, it is irreversible’ are examples of negative interventions” (P20).*

Individual differences. Participants stated that they gained awareness that differences in the way individuals interpret events and subjective perceptions can lead to suicide. *“In the series, Hannah couldn't cope with the events she was going through. There are people who wouldn't care if they went through similar things. Not everyone's experiences and lifestyles and perception of the world are the same. Things that are unimportant to someone can be vital to someone” (P13).*

Effects of suicide. Participants stated that suicide directly affects not only the suicidal individual but also his or her environment, and that they gained awareness of the need to provide support for these individuals. *“Suicide is an infectious condition, and the counselor should implement preventive programs for other students after the event of suicide. In addition, suicide is a traumatic*

experience for the relatives of the suicidal individual and for other students in the school, so psychological support should be provided to these individuals” (P24).

Preventive Interventions

There are seven codes under this theme: **orientation, observation, interventions, consultation, neglect, ethical** and **counselor skills**.

Orientation. Participants said that it was an inadequate but beneficial intervention for the female counselor in the first part of the series to introduce new students to each other and to support them in getting closer. *“The female counselor who appeared in the first episodes of the series asked new students Antilly, Jessica and Hannah to befriend and help each other is an insufficient but protective factor for increasing social support” (P18).*

Observation. The participants stated that there is a significant limitation for preventive interventions, such as failing to observe enough, failing to notice changes in students and problem behaviors in school. *“A school counselor who does not observe is not aware of the physical and emotional changes that occur in at-risk students. In this series, the counselor didn't notice changes in Hannah and other students, violence and none of what was written on the school walls” (P15).*

Interventions. Participants noted that the counseling did not perform a primary prevention to the suicide incident at the school. They defined secondary and tertiary preventions such as preparing posters and posters after suicide as necessary but late interventions. *“When Hannah said she was being abused, the counselor's judgmental attitude undermined the process. Although the student addressed the issue of suicide, the counselor did not dwell on it. I observed that although he was aware of incidents such as peer bullying, suicide, abuse at school, he did not do anything about exposing or preventing them. After the suicide, the board, posters, such as preparing studies are done, but I think it is too late and insufficient” (P22).*

Neglect. Participants considered the neglect of the counselor not to make necessary interventions to the student before the suicide and not to report the rape incident to the appropriate places. *“When Hannah told she was raped, the counselor said if she wasn't going to tell who did it, it is the most logical way for her to forget about it, and he covered the concern up. Hannah committed suicide when she couldn't get help. This is a gross negligence” (P27).*

Consultation. Participants described the lack of consultation between school counselors and school administration and teachers as an inability in terms of preventive interventions. *“The teacher did not mention the shared note about suicide in class to the administration or the counselor. We also see that the counsellor does not share any information about abuse or signs of suicide with the administration. If all this had been done, maybe Hannah wouldn't have committed suicide” (P7).*

Ethical problems. Participants considered it unethical for the counselor to ignore what the raped student says and to cover up the matter instead of reporting it to the appropriate places. *“When Hannah talks about harassment, it is absolutely unethical that the counseling doesn't support her, that she says it's the right solution to forget what happened, that she doesn't report it to the school administration and the authorities” (P12).*

Counseling skills. Participants noted that the school counselor acted authoritatively and was incapable of building therapeutic relationships, and that this approach constituted a limitation for preventive interventions. *“In the series we watched, we found that the counselor did not conduct his job in a professional manner, he had many deficiencies in professional ethics and legal issues, therapeutic skills. I have observed that students avoid communicating with him because he uses judgmental and critical language towards students” (P21).*

Professional - Personal Development

There are two sub-themes under this theme: **professional development** and **personal development**.

Professional development. The sub-theme of professional development includes five codes: counseling skills, students in risk group, the importance of prevention, working with suicide, adolescence and professional responsibility.

Counseling skills. Participants stated that they had gained awareness of the importance of therapeutic skills and the responses of counselors to harm in the counseling process. *"The counselor was setting a set between him and his clients, he was unable to establish a therapeutic relationship. Because of his critical and incriminating attitudes, the students did not trust him. He seemed to be an authority figure, not a counselor at school"* (P27).

Students in the risk group. Participants expressed awareness of the importance of identifying students in the risk group in schools and the preventive interventions needed to be made for these students. *"I realised what both counselors and teachers could do to prevent risky behaviour at schools. I understood the importance of identifying students in the risk groups and preventive interventions for adolescents and their parents"* (P7).

Importance of prevention. Participants stated that they had gained awareness of the importance of preventive guidance services on students' mental and physical health and school climate. The main reason for what happened was the lack of emphasis on preventive guidance at school. *"I saw the importance of observing the student in potentially risky situations, sensing the possible consequences of the risky situation, providing preventive services to all students in the school"* (P11).

Working with suicide. Participants noted that they gained awareness of the causes and signs of suicide, working with suicidal individuals, and working with individuals affected by it after a possible suicide. *"I realized the signs of suicide, the possible causes underlying suicidal thinking, the importance of being supportive rather than giving advice when working with suicidal-prone individuals. I also noticed that in the event of a possible suicide, people affected should also be employed"* (P8).

Adolescence. The participants stated that they gained awareness of the general characteristics of adolescence and the important risk factors seen during this period. *"Adolescence is a process where there are conflicts among peers and risky behaviours such as substance abuse are on the rise. First of all, I believe it is necessary to regulate the way individuals perceive themselves and the world. Improving of coping skills and conflict resolution skills may be sufficient to save the adolescent's life in difficult situations"* (P12).

Personal development. The personal development sub-thema includes three codes: **empathy**, **interpersonal relationships** and **parenting styles**.

Empathy. Participants stated that their feelings of empathy were strengthened, especially towards individuals with traumatic experiences and suicidal tendencies. *"Through this series, I put myself in Hannah's place and felt the desperation to the fullest. Someone else's problem sounds simpler. Now I can understand more how these people feel"* (P3).

Interpersonal relationships. The participants stated that they gained awareness about the importance of interpersonal relationships in the lives of individuals and the protective role of positive relationships, and what needs to be considered in interpersonal relationships. *"I didn't think social communication, the need to love, to be loved, to belong, was so important. I realized how important it is to communicate, to share, to belong and to be loved, not only in professional terms but also in terms of my life"* (P10).

Parenting styles. Participants noted that they gained awareness of the critical role of positive and negative parenting styles on the lives of individuals, especially during adolescence. *“Most of their families in the series do not have enough knowledge of adolescent development. Therefore, their approach is often disinterested or authoritarian, while some have overprotective attitudes. It seems that families are incapable of coping with stress situations. All of this directly affects the mental state of adolescents” (P9).*

DISCUSSION

In this study, the views and awareness levels of counselor candidates about adolescents' problem behaviors, and preventive counseling interventions was examined through the the popular Netflix production "13 Reasons Why" whose first season episodes are watched. Participant counselor candidates were attending “School Based Preventive Guidance and Counseling” course which is an elective in counselor training programs in Turkey. In addition, counselor candidates' views regarding the contributions and effects of the using popular movies or series on the development of their awareness and competencies about preventive guidance and counseling services were evaluated. The TV series "13 Reasons Why" is considered as one of the popular productions that contributes to a better understanding of difficult subjects, such as suicide, bullying by the audience (Lauricella, Cingel, & Wartella, 2018).

Carrying out preventive interventions to decrease the violence and suicide rates, providing appropriate services for the needs of individuals and groups during the crisis and before crisis are accepted as crucial parts/components counselor competencies and professional identity by both the CACREP (2016) and the American School Counseling Association (ASCA) (2019). Awareness about risk and protective factors related to problem behaviors is critical in planning interventions for prevention. Because preventive services or interventions firstly aim to eliminate risk factors and to increase protective factors simultaneously (Conyne, 1997). When the views of the counselor candidates are examined, it is seen that they emphasize the opportunity to observe, realize the risks and protective factors they know theoretically in the series in a more concrete way. It is noteworthy that counselor candidates define and conceptualize risk factors and protective factors in accordance with the relevant literature. Given responses is classified under four sub-themes: individual, family, peer and school related risk factors. It can be said that this categorization is consistent with the classification regarding risk and protective factors in the prevention literature. Protective and risk factors are generally classified in four main groups; individual characteristics (positive self-perception, positive future expectation, adequate life skills, impulsivity, hopelessness, low sense of responsibility, learning disabilities, etc.), family-related factors (parental support, a functioning family system, domestic violence, neglect, being a single parent, etc.), school-related factors (positive school climate, sense of school belonging, high academic achievement, classroom size, low academic achievement, etc.) and peer-related factors (supportive relationship with friends, peer bullying, peer rejection, rewarding anti-social behavior in peer group, substance use in peer group, etc.) (Arthur, Hawkins, Pollard, Catalano, & Baglioni, 2002; Brooke-Weiss, Haggerty, Fagan, & Hawkins, 2008; Catalano, Hawkins, Berglund, & Arthur, 2002; Le'Roy, Vera, Simon, & Ikeda, 2000; Terzian, Andrews, & Moore, 2011).

Peer bullying is one of the most remarkable risk factors that depict in the series and laid emphasis on by counselor candidates. Peer bullying is one of the subtypes of interpersonal aggression, characterized by repetitive and intentional aggressive behaviors and power imbalance between victim and bully (Olweus, 2001). Aggressive behaviors among adolescents defined as bullying can occur in physical, verbal, relational and electronic forms (Bradshaw, Waasdorp, & Johnson, 2015). Peer bullying, which is addressed and depict in a wide frame in the series, is at the center of the factors that cause Hannah to commit suicide. Counselor candidates stated that they had the opportunity to observe the destruction and negative consequences bring forth by peer bullying, to feel empathy with victims deeply, and have strikingly realized that various behaviors can be peer bullying. In addition, the participants highlighted that observing the different forms of peer bullying such as physical, verbal and cyber bullying through the series, have increased their knowledge on the subject.

Suicide is one of the leading traumatic events that have the potential to deeply affect all individuals in schools and school climate. From the worldwide perspective, the uptrend of suicide death rates among adolescents is still ongoing (Wasserman, Cheng, & Jiang, 2005). Also, the young people aged between 15-24 are the most risky group in terms of suicide attempts in Turkey (Harmancı, 2015; Turkish Statistical Institute, 2011). In the light of these findings, suicide risk in adolescents draw the attention of mental health professionals (Harmancı, 2015), and the need for preventive interventions is frequently underlined (Sareen et al., 2014). Schools can play a crucial role in preventing teen suicides, and recognizing risk factors in students' lives is a vital responsibility (National Association of School Psychologists [NASP], 2017). The findings of the study point out that the series watched contributed to the counselors candidates awareness about suicide in general. Participants stated that the school counselor and parents could not notice any possible signs of suicide and Hannah's search for help. Young people with suicidal thoughts mostly do not seek direct help regarding the difficulties they experience; parents, teachers, and friends are expected to notice warning signs and take immediate action to ensure the safety of young people with this thoughts (NASP, 2017). In this context, it is very critical for mental health professionals protecting their calmness, listening their clients without judgments, trying to understand emotional pain that increase the suicidal thoughts cannot be dealt with, avoiding the feedbacks that may cause them to feel that their pain is belittled or underrated, trying to disclose clients' suicidal thoughts with clear and direct questions, focusing on their own concerns about the client's well-being, relieving the clients that they have help resources to cope with their difficulties and they will not feel like this all the time (Chehil & Kutcher, 2012; Paladino & Minton, 2008; NASP, 2017)

The participants also expressed that they had the opportunity to observe and realize risk factors and protective factors, signs, and myths about suicide through a series of events. Dramatical changes like Hannah's haircut, becoming withdrawn, writing an anonymous note in the communication lesson, decreasing grades shown in the series are stated as remarkable examples that make it easier for counselor candidates to understand the signs about suicide. They have noticed a few of the suicide myths in the series such as sudden development of suicidal ideation and only one reason can cause suicide (Joiner et al., 2006).

In counseling relationship, individuals seek support for the difficulties in their lives and become motivated for self-disclosure when necessary therapeutic conditions are provided (Gladding, 2017). Counselor plays a key and active role in constructing the therapeutic conditions and trust (Fonagy ve Allison, 2014). Counselor candidates drew attention to the inadequate counseling skills and inefficient interventions demonstrate by school counselor in the session with Hannah, and superficiality of crisis intervention carried out in school after suicide. Thus, participants stated that their perspectives on the importance of eliminating the possible effects of suicide on all individuals within the school as a part of crisis interventions are widen. Planning and carrying out crisis interventions as well as suicide prevention activities are among the key roles of school counselors (ASCA, 2019). The participants highlighted that the school counselor in the series failed to provide interventions required by these roles in the process ended with Hannah's suicide. Gaining in-depth awareness about the processes before and after suicide through the series may contribute counselor candidates competencies regarding preventive role of school counselors.

As an extension of school-based suicide prevention strategies; counselors, teachers and administrators should show their best effort to create a safe, supportive and bully-free school climates for their students (NASP, 2017). The participants of the study called attention to lack of the consultation whichs is one the important services provided by school counselors, and insufficient cooperation among school staff. According to participants lack of consultation and cooperation could effect the school climate negatively. Additionally, school counselor's choice not to report Hannah's self-disclosure about being victim of sexual assault to legal authority considered as a clear ethical violation by counselor candidates.

Counselor candidates in the study reported that the watching series had significant contributions to the development of empathy skills; to gain deeper understanding about the factors that may led individuals to suicide, and the "pain" felt by bullying victims. They described the series as a

stimulating tool on how critical interpersonal relationships and their parents' attitudes can be in adolescents' lives. Also, they expressed increased tendency to review their personal relationships, to behave more emphatically for understanding others' needs, concerns, feelings and thoughts. These findings are consistent to the findings of studies with individuals from different age groups, centering the "13 Reasons Why" series (Lauricella, Cingel, & Wartella, 2018). Arendt et al. (2019) reported that individuals who regularly watch the series are more willing to offer help to individuals with depressive symptoms and suicidal thoughts compared to individuals who have never watched or watched several episodes. Similarly, it is reported that popular movies in counselor training increase empathy and sensitivity levels of counselor candidates for individuals from various sexual orientations, races, social classes, religions and cultures (Pinterits & Atkinson, 1998; Kağnıcı, 2015; Nittoli & Guiffrida, 2017; Villalba and Redmond, 2008).

Carefully selected productions can contribute to the development of the observational, conceptual and practical skills of counselor candidates (Higgins & Dermer, 2001). Popular productions can be a supportive source of information for the counselor candidates about the clients who are unable to meet in their educational environment but likely to encounter on the field. The movies help viewers to identify themselves with characters and events in intellectual, emotional and behavioral dimensions, and to develop insight into different characters' perspectives (Pinterits & Atkinson, 1998).

Views of the participants in the study point out that counselor candidates gained awareness about the skills that the counselors should have, the importance of identifying students in the risk group, the services should be carried out with them, and the vital importance of preventive interventions. Furthermore, the participants underlined the wider perspectives about professional responsibilities of school counselors especially working with adolescents, and increasing sensitivity about the students who engage in risky behaviors. On this basis it is considered that the participants gained awareness about the prevention interventions should be provided for the students in the risk group. One of the aims of preventive interventions is to protect individuals in the risk group and control the problem from reaching more serious dimensions (Conyne, 2013a). It can be argued that the participants, who evaluated the counselor interventions in the series as inadequate and limited, gained a broader perspective on the roles of the school counselors.

When the views of the participant counselor candidates are examined, it is seen that the "13 Reasons Why" series, which is regularly watched after the "School Based Preventive Guidance and Counseling" course, has multiple contributions to their prevention-related competencies. Also, it is considered that the series contributes counselor candidates to acquire the primary prevention perspective, to understand the systematic ecological framework, to realize the importance of skills such as collaboration in the provision of prevention services, and to develop positive attitudes towards preventive interventions.

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Table 1 Distribution of themes, sub-themes and codes obtained in the research

Theme	Sub-theme	Code	n	
Risk and Protective Factors	Individual factors	Characteristics of adolescence	(16)	
		Traumatic experiences	(22)	
		Self perception	(16)	
		Loneliness	(18)	
		Stigmatization	(20)	
		Academic achievement	(17)	
		Social skills	(16)	
		Social activities	(20)	
	Family Factors	Peer Factors	Future goals	(17)
			Family conflicts	(21)
			Economic conditions	(15)
			Parental support	(20)
		School Factors	Problem behaviors	(17)
			Peer bullying	(22)
			Peer support	(18)
			Lack of discipline	(18)
Awareness of Suicide	Preventive Interventions	Counselor's qualification	(16)	
		Teacher and administration support	(10)	
		Preventive guidance services	(12)	
		Risk factors	(20)	
		Protective factors	(19)	
		Signs of suicide	(20)	
		Suicide myths	(14)	
Professional-personal development	Professional development	Counselor interventions	(22)	
		Individual differences	(16)	
		Effects of suicide	(14)	
	Personal development	Orientation	(14)	
		Observation	(18)	
		Interventions	(20)	
		Consultation	(12)	
Professional-personal development	Professional development	Neglect	(22)	
		Ethical	(20)	
		Counseling skills	(22)	
	Personal development	Counseling skills	(12)	
		Consultation	(10)	
		Students in the Risk group	(17)	
Professional-personal development	Personal development	Importance of prevention	(16)	
		Working with suicide	(14)	
		Empathy	(14)	
Professional-personal development	Personal development	Interpersonal relationships	(11)	
		Parenting styles	(12)	