

VOICE UP PUBLISHING INC.

STUDENT SCOPE & MENTORING STRUCTURE GUIDE

What Students Can Do | What They Cannot Do | Dual Mentor Framework

Integrated with the 8-Week Voice Up Planning & Readiness Guide

LCSW-Supervised | MSW Field Alignment | CSWE Competency Framework

What Is Voice Up

Voice Up is a structured personal and professional development system that helps people turn lived experience and purpose into tangible, real-world impact. Every week, participants answer focused questions, reflect in writing, build something concrete, and meet with a mentor — creating a consistent rhythm of growth, output, and accountability. What makes Voice Up distinct is not inspiration or advice, but production: by the end of the program, participants have real portfolio pieces, defined next steps, and documented proof of progress. Voice Up is not clinical treatment. It does not diagnose, assess, or label participants. It is a purpose-to-action pathway that bridges identity clarity with practical, measurable outcomes — one that has been validated in accredited graduate programs, engaged nearly 3,000 participants across 900+ cities globally, and produced a 10.4% conversion rate of participants into verified creators of institutionally adopted, real-world impact.

What positions Voice Up as an institutional partner rather than a generic workforce program is a closed validation loop — three independent and converging forms of evidence: real-world demand demonstrated under constrained, no-incentive conditions; formal institutional adoption within accredited MSW and MPH programs at universities including George Washington University, New York University, Princeton University, UC Berkeley, and others; and independent academic recognition aligned with behavioral economics, communities of practice, and cognitive engagement frameworks. Across its first 15 months, the model engaged 2,941 participants generating 3,917+ documented hours and 5,385 verified program events — with 27 participants becoming verified producers whose work was adopted by institutions or communities and directly impacted 1,350+ individuals. This is the program context within which the 8-week guide, the dual-mentor structure, and the student scope framework described in this document operate.

How the 8-Week Guide Is Structured

The Voice Up 8-Week Planning & Readiness Guide translates the program model into a supervised field experience with defined roles, required documentation, and weekly accountability checkpoints. Each week builds on the last — moving students from foundational identity and research work through community engagement, resource creation, advocacy, and a summative portfolio. The guide is not a self-directed workbook; it is a structured pathway aligned to CSWE competency standards and MSW or MPH field education requirements.

The Three Roles — Who Is Involved and What They Do

Role	Who	Primary Responsibility	Accreditation Alignment
Voice Up Mentor (Non-Clinical)	Art Fuller, Voice Up Founder	Program guidance; purpose development; 60-minute weekly structured mentoring sessions; accountability for deliverables; documentation review; competency coaching. Does not provide clinical supervision or verify practicum hours for licensure.	CSWE Competency Framework (C1–C6); NASW Code of Ethics; program-level competency coaching and reflective practice
Licensed Field Supervisor (LCSW)	Licensed Clinical Social Worker	Clinical and practicum oversight; CSWE competency evaluation; practicum hour verification; university compliance documentation; all supervision requiring a licensed credential; formal mid-point and summative evaluations.	CSWE EPAS; university field education office requirements; state licensure regulations; CEPH accreditation standards (MPH programs)
Student	MSW, MPH, or equivalent graduate or undergraduate student placed through university field education	Non-clinical project-based work: education, research, advocacy, resource development, community conversation, and professional development. Weekly log submissions, reflection responses, mentoring session participation, and deliverable completion.	No clinical license required. All activities documented for practicum portfolio and competency growth evidence per CSWE field education standards.

The Weekly Rhythm — Four Elements Every Week

Every week of the 8-week guide incorporates the same four core elements, consistent with the Voice Up program model and structured to generate real outputs and documented practicum evidence, not just participation hours.

Element	What the Student Does	What It Builds
1. Focused Questions	Tracks motivation, progress, barriers, and confidence through structured self-assessment questions in the Weekly Log	Self-awareness; documented evidence of growth; practicum competency data aligned to CSWE C1–C6
2. Written Reflection	Responds to a weekly prompt tied to project focus, goals, challenges, and purpose	Communication skills; clarity of purpose; written evidence for practicum portfolio per CSWE EPAS field education requirements
3. Real Output	Creates a tangible deliverable: a resource, guide, campaign, brief, survey, or toolkit specific to their focus area	Portfolio artifacts; community impact; verified production consistent with CSWE Competency 6 (Engagement and Intervention)
4. 60-Minute Mentoring Session	Meets with the Voice Up Mentor and/or Licensed Field Supervisor for structured supervision, review, and planning	Documented practicum supervision hours; competency coaching; ethical review; scope confirmation per NASW Code of Ethics

Verified Real-World Impact — What This Model Produces

The Voice Up model has produced 27 verified producers whose original work was adopted by institutions or communities, directly impacting 1,350+ individuals. These outcomes were achieved under conditions of no financial incentives, unpaid academic credit structures, and after-hours participation — establishing that the model converts purpose into measurable impact at a reproducible rate. Representative examples include:

Student	Institution	Verified Outcome
Caroline Maschke	American University	Influenced national legislation on colorectal cancer; met with U.S. Senator; created public advocacy website
Emily Metheny	Loyola University Maryland	Book adopted by multiple schools and a local family services agency using Federal Title I funding
Alison Wintermute	Hope College	Partnership with Cedar Creek Institute; pre-order of 400 books for community presentations
Brian Nelson	Temple University	Neighborhood clean-up in Philadelphia; community mobilization of students including elected official engagement
Leehi Machulski	Princeton University	Contributed to development of a student athlete mental and behavioral health app; world-ranked athlete
Nabilah Kabia	North Carolina A&T	Implemented program in local school setting for elementary students
Sahitya Kommuru	Tufts University School of Medicine	Authored a medical book on PCOS

Purpose of This Guide

This guide consolidates and clarifies the foundational framework governing all student participation in Voice Up programs. It draws directly from the Clinical Scope & Supervision Clarification embedded in the 8-Week Planning & Readiness Guides and expands that framework into a standalone reference document for students, mentors, supervisors, and university partners.

Every student activity, every mentoring session, and every deliverable in the 8-week guide is designed to operate exclusively in the non-clinical space. This guide makes that boundary explicit, explains how the two-mentor structure enforces it in practice, and aligns each element of student participation to the applicable accreditation standards — CSWE EPAS for MSW programs and CEPH standards for MPH programs.

Understanding the lines between what students can and cannot do — and knowing which mentor holds which responsibility — is not optional background reading. It is the foundation of safe, ethical, and professionally sound participation.

Section 1: What Students Are Authorized to Do

All Voice Up student activities fall exclusively within six non-clinical categories. These categories are consistent across both the Athlete Burnout guide and the Little Minds Matter guide. Students operate in these domains throughout all 8 weeks of the program.

✓ AUTHORIZED STUDENT ACTIVITIES — NON-CLINICAL SCOPE

Education: Developing and sharing age-appropriate, evidence-based awareness resources. This includes writing burnout guides, children's mental health materials, toolkits, and curricula using accessible, non-clinical language.

Research: Conducting literature reviews, case study analysis, and policy research. Students read, synthesize, and translate academic and professional knowledge — they do not generate clinical findings or diagnose conditions.

Advocacy: Creating social media campaigns, policy briefs, and community outreach materials. Students use their research and community engagement to build public awareness and make the case for institutional change.

Resource Development: Creating guides, toolkits, curricula, and written materials for distribution through schools, libraries, athletic departments, or other community partners.

Community Conversation: Structured, non-clinical conversations with community members — athletes, parents, educators, coaches, and other stakeholders. These conversations are used to gather perspective, test assumptions, and shape project design. They are never clinical interviews or therapeutic interactions.

Professional Development: Documented reflection, competency growth tracking, and participation in structured mentoring sessions. Students build their practicum evidence portfolio through weekly logs, reflection questions, and CSWE competency self-assessments.

Examples of Authorized Student Activities by Week

The table below provides concrete examples of what falls within student scope at each stage of the 8-week journey.

Week	Authorized Activity Examples
1	Writing a personal story narrative; developing a professional purpose statement; having a conversation with a fellow athlete or field professional to gather perspective
2	Reading and summarizing peer-reviewed literature; identifying research gaps; translating academic findings into accessible language
3	Reviewing NCAA policies, state legislation, or school mental health frameworks; mapping community resources; building an advocacy statement
4	Completing a reflective growth journal; preparing a self-assessment for supervisor consultation; receiving and documenting feedback
5	Conducting structured community conversations with waivers signed; completing a DEI audit of project materials; gathering perspectives from coaches or child advocates
6	Drafting core resource materials (guides, toolkits, curricula); sharing drafts for feedback; revising based on community input
7	Launching a social media awareness campaign; writing a policy brief; connecting work to institutional advocacy goals
8	Finalizing resource deliverables; presenting to cohort; completing summative self-assessment and 90-day action plan

Section 2: What Students Are Not Authorized to Do

The following activities are expressly outside the scope of student participation. These restrictions are not optional guidelines — they are non-negotiable program requirements that protect participants, protect students, and ensure compliance with university practicum standards and applicable licensing regulations.

⚠️ PROHIBITED STUDENT ACTIVITIES — OUTSIDE CLINICAL SCOPE

Therapy of any kind: Students do not provide individual therapy, group therapy, psychotherapy, or any form of therapeutic treatment. This prohibition applies in all settings — in person, virtual, written, or via social media direct message.

Clinical assessment, diagnosis, or treatment: Students do not assess mental health conditions, make diagnostic impressions, create treatment plans, or implement clinical interventions. This includes informal assessments, self-report questionnaires administered with clinical intent, or any language that implies clinical evaluation.

Direct clinical care: Students do not provide direct services to individuals in a clinical capacity. Community conversations are educational and relational — not clinical encounters.

Crisis intervention: Students do not perform crisis intervention of any kind. If a participant discloses a mental health crisis, the student must immediately stop the interaction, express calm care, and activate the escalation protocol — they do not attempt to stabilize, assess, or manage a crisis clinically.

Clinical advice or counseling: If any participant asks a student for therapy, counseling, or clinical advice, the student must clearly explain that they are not a licensed clinician and cannot provide clinical services, and must offer to connect the participant with appropriate licensed resources.

Independent mandated reporter decisions: If a student becomes aware of a situation involving potential abuse, neglect, or a minor in distress, they must immediately stop the interaction and contact their Licensed Field Supervisor. Students do not make independent mandated reporter decisions — they escalate immediately.

The Non-Clinical Language Standard

Students must apply a consistent standard to all written and spoken communication: the language of education, not the language of clinical practice.

Clinical Language — NOT Permitted	Educational Language — Required
"Based on what you have described, you may be experiencing burnout."	"Research identifies these as common early signs of burnout in athletes."
"I would recommend you see a therapist for this."	"These are some licensed mental health resources available to student athletes."
"I think you are struggling with identity loss during your transition."	"Many athletes describe identity shifts during the transition out of sport — here are tools that can help."

Clinical Language — NOT Permitted	Educational Language — Required
"Let me help you process what you are feeling."	"I appreciate you sharing that. I am not a clinician, but I can share some resources and connect you with someone who can help."
"It sounds like this child might have anxiety."	"This resource helps children learn to recognize and talk about their feelings."

Section 3: Participant Safety Protocol

The following protocol is mandatory for all students and must be reviewed before Week 1 and discussed with the Voice Up Mentor in the Week 1 Mentoring Session.

ESCALATION PATHWAY — ALL SAFETY SITUATIONS

Step 1 — Stop: Do not continue any interaction that raises a safety concern.

Step 2 — Stabilize: Remain calm. Express care. Do not attempt clinical intervention.

Step 3 — Contact Voice Up: Reach them immediately. Provide 988 as a resource.

Step 4 — Notify Voice Up Mentor: Contact Art Fuller at info@voiceup.life.

Step 5 — Document: Record in your Weekly Log what occurred, what you did, and who you contacted.

Situation-by-Situation Response Guide

Situation	Required Student Response
A participant expresses emotional distress during a conversation	Stop the conversation. Express care calmly. Do not attempt to counsel or diagnose. Refer the individual to a licensed mental health professional or appropriate campus/community resource.
A participant discloses a current mental health crisis or safety concern	Do not attempt crisis intervention. Calmly acknowledge the disclosure. Immediately contact your Licensed Field Supervisor and/or Voice Up Mentor. Follow your university's mandated reporting and crisis referral protocols.
A minor participant shows signs of distress, abuse, or neglect	Stop the interaction immediately. Do not question the minor further. Contact your Licensed Field Supervisor immediately. Follow mandated reporter requirements under applicable state law.
A participant asks the student for therapy, counseling, or clinical advice	Clearly and kindly explain that you are not a licensed clinician and cannot provide clinical services. Offer to connect them with appropriate licensed resources.

Situation	Required Student Response
A student experiences personal distress triggered by project content	Stop work. Contact your Licensed Field Supervisor or a personal support resource. Do not continue project activities while in distress. Notify your Voice Up Mentor.

Section 4: The Two-Mentor Structure

Every Voice Up student is supported by two distinct roles. These roles are separate, non-interchangeable, and both essential. Understanding the difference between them is required for university practicum compliance and licensure alignment.

Role	Function	Credential	Scope
Voice Up Mentor — Art Fuller, Voice Up Founder	Program guidance; purpose development; accountability for Voice Up deliverables; weekly 60-minute structured mentoring; documentation review; competency coaching aligned to CSWE framework	Not a licensed clinical supervisor. Provides program mentorship and oversight only.	Non-clinical program scope only. Does not provide clinical supervision, evaluate practicum hours for licensure, or fulfill university clinical field education requirements.
Licensed Field Supervisor — University-Designated LCSW	Clinical and practicum oversight; CSWE competency evaluation; practicum hour verification; university compliance documentation; all supervision requiring a licensed credential	Licensed Clinical Social Worker (LCSW) or equivalent licensure as required by the student's university field education office.	Clinical and practicum scope. Responsible for all clinical oversight, risk management, mandatory reporting obligations, and licensure-aligned supervision.
Student	Non-clinical project-based work as defined in Sections 1 and 2 of this guide. Participates in both mentor relationships as specified.	No clinical license or credential required for student participation in Voice Up.	Non-clinical educational scope as defined throughout this guide.

Why Both Roles Are Required

The dual-mentor structure exists because Voice Up operates at the intersection of two distinct domains: purposeful community advocacy work (guided by the Voice Up Mentor) and professionally credentialed MSW field education (supervised by the Licensed Field Supervisor). Neither mentor can fulfill the function of the other.

- **The Voice Up Mentor (Art Fuller)** brings deep knowledge of the Voice Up program framework, structured weekly accountability, and mentorship aligned to the six CSWE competencies — but does not hold clinical licensure and does not provide clinical supervision.
- **The Licensed Field Supervisor (LCSW)** provides the clinical oversight, practicum hour verification, and university compliance documentation that MSW field education requires — but is not responsible for Voice Up program deliverables or weekly mentoring session content.
- **Together**, the two roles create a complete support structure: one ensures the student's purpose-driven work advances professionally, ethically, and with integrity; the other ensures it meets every standard required for licensure and practicum credit.

Section 5: The 60-Minute Mentoring Session

Every week of the 8-week program includes a required 60-minute structured Social Worker Mentoring Session. These sessions are not optional check-ins — they are formal supervision sessions that fulfill MSW field supervision requirements and build toward practicum credit.

MENTORING SESSION REQUIREMENTS

Duration: 60 minutes per session — every week, Weeks 1 through 8. Total: 8 hours of documented field supervision.

Format: One-on-one with Art Fuller (Voice Up Mentor, Non-Clinical) OR the university-designated Licensed Field Supervisor.

Documentation: All sessions must be documented in the Weekly Log at <https://voiceuplab.org/InternHourLogs>.

Scheduling: <https://calendly.com/ellingtonbooks-info>

CSWE Alignment: Each session is structured around the specific CSWE competencies addressed in that week's activities.

Scope Confirmation: Every session includes confirmation that the student's activities have remained within the non-clinical Voice Up scope.

What the Mentoring Sessions Provide

- Documented field supervision aligned to all 6 CSWE competencies
- Formal supervision records required for MSW practicum credit
- Weekly ethical review confirming all activities remain within non-clinical scope
- Professional development structured around the student's specific focus area (athlete burnout, children's mental health, or other)
- A cumulative practicum evidence portfolio built week by week

Standard Session Structure (All 8 Weeks)

Each 60-minute session follows a consistent structure adapted to that week's focus area and CSWE competency targets.

Time Block	Standard Purpose
0:00 – 0:10	Check-in: Student shares mindset, current experience, or one thing staying with them from the week's work. Mentor reflects back themes.
0:10 – 0:25	Core Content Review: Discussion of the week's primary activity — research, community engagement, policy work, resource development, or advocacy — aligned to that week's CSWE competencies.
0:25 – 0:40	Professional Skills Development: Applied practice — translating research, applying ethical frameworks, cultural humility examination, policy case development, or resource review.

Time Block	Standard Purpose
0:40 – 0:55	Scope Confirmation & Ethical Review: Confirmation that all activities remained within non-clinical scope. Identification of any ethical tensions. Application of NASW decision-making framework as applicable.
0:55 – 1:00	Documentation & Next Steps: Confirm Weekly Log documentation items. Identify one commitment to carry forward into next week's work.

Section 6: How the Mentor Structure Integrates Across All 8 Weeks

The table below maps how both mentor roles, the 60-minute mentoring session, and the student's non-clinical project work fit together across every week of the program. This integration is consistent across all Voice Up focus areas, including Athlete Burnout & Athletic Retirement and Little Minds Matter — Children's Mental Health.

Week	Non-Clinical Mentor Focus (Art Fuller)	Licensed Supervisor Role	CSWE Competencies
Wk 1	Professional identity; personal story as foundation; purpose statement; review of non-clinical scope and participant safety protocol	Confirm role structure; review Clinical Scope Clarification; establish ethical baseline; begin practicum documentation	C1: Ethics & Professional Behavior C4: Research-Informed Practice
Wk 2	Literature review discussion; translating research into accessible language; identifying diversity gaps in evidence base	Evaluate research literacy; review evidence synthesis; confirm student's approach is educational not clinical	C4: Research-Informed Practice C2: Diversity & Difference
Wk 3	Policy and systems analysis; social justice framing; advocacy statement development; structural barriers mapping	Review policy findings for accuracy; evaluate social justice application; confirm advocacy framing is educational not clinical	C5: Policy Practice C3: Human Rights & Social Justice C4: Research-Informed Practice
Wk 4	FORMAL MID-POINT: CSWE competency self-ratings; progress review; ethical incident review; revised goals for Weeks 5–8	Provide formal mid-point evaluation; confirm practicum hours to date; assess competency growth; document any scope adjustments	C1: Ethics & Professional Behavior C6: Engagement — Self
Wk 5	Community listening debrief; cultural humility practice; participant safety protocol review with scenario practice	Evaluate community engagement approach; confirm participant safety readiness; review any distress situations encountered	C6: Engagement — Multi-System C2: Diversity & Difference C3: Human Rights
Wk 6	Resource draft review; feedback on educational language, non-stigmatizing framing, DEI representation; practitioner identity development	Review resource for clinical scope compliance; confirm educational vs. clinical language standard; evaluate intervention framework alignment	C6: Engagement & Intervention C2: Diversity & Difference C5: Policy Awareness
Wk 7	Policy brief/advocacy document review; evaluation framework development; 6-month distribution plan; professional network building	Review policy case for accuracy; evaluate outcomes framework; confirm non-clinical framing for institutional partners	C5: Policy Practice C3: Human Rights & Social Justice C6: Evaluation
Wk 8	FORMAL SUMMATIVE: CSWE competency ratings Week 1 vs. Week 8; portfolio review; summative verbal evaluation; 90-day action plan	Provide formal summative evaluation; verify all practicum hours; complete university compliance documentation; confirm 8-week non-clinical scope	All 6 CSWE Competencies — Summative Review

Section 7: The LCSW Supervision Standard — MSW Field Alignment

The 60-minute weekly mentoring session, structured around the CSWE competency framework, is designed to align with the standards of MSW field education as defined by the Council on Social Work Education (CSWE) and meet the supervision expectations of university practicum programs including Alliant University MSW and equivalent programs.

What 60 Minutes Per Week Fulfills

- 8 hours of formally documented field supervision over the 8-week program (8 sessions × 60 minutes)
- Weekly ethical review confirming scope compliance — a requirement of MSW field education standards
- Formal competency evaluation at mid-point (Week 4) and summative (Week 8), mirroring standard field supervisor evaluation cycles
- Documentation requirements fulfilled through the Voice Up Weekly Log system, which serves as the practicum evidence portfolio
- NASW Code of Ethics review integrated into the Week 1 session and applied throughout all 8 weeks

The Six CSWE Competencies and Their Weekly Integration

Every mentoring session targets the specific CSWE competencies that correspond to that week's project activities. Students are evaluated on demonstrated competency growth from Week 1 through Week 8.

CSWE Competency	Primary Weeks	How It Is Developed in Mentoring
C1: Ethical & Professional Behavior	Weeks 1, 4, 8	NASW ethics review; ethical incident review; scope confirmation; professional identity development
C2: Engagement with Diversity & Difference	Weeks 2, 5, 6	Diversity gaps in research; cultural humility practice; DEI audit of resources; representation review
C3: Human Rights & Social Justice	Weeks 3, 5, 7	Structural barriers mapping; social justice framing; policy advocacy development; equity lens application
C4: Research-Informed Practice	Weeks 1, 2, 3	Literature review translation; evidence synthesis; accessible language practice; research-to-advocacy connection
C5: Policy Practice	Weeks 3, 6, 7	Policy analysis; institutional advocacy; policy brief development; outcomes framework for policy adoption

CSWE Competency	Primary Weeks	How It Is Developed in Mentoring
C6: Engagement — Multi-System	Weeks 4, 5, 6, 7, 8	Community engagement debrief; stakeholder mapping; resource review; summative evaluation; 90-day action planning

Section 8: Quick Reference — At a Glance

Can I Do This? — Student Scope Decision Guide

Situation	Answer	Why
Write a guide on burnout warning signs in accessible language	✓ YES	Education — non-clinical resource development
Tell a participant what they might be experiencing based on what they share	✗ NO	This is clinical assessment — outside non-clinical scope
Have a structured community conversation with a parent or athlete who has signed a waiver	✓ YES	Community conversation — non-clinical engagement
Provide emotional support to a participant who begins to cry during a conversation	✗ NO — Escalate	Express care, stop the interaction, activate the safety protocol immediately
Conduct a literature review and summarize findings for my project	✓ YES	Research — within non-clinical scope
Design a social media campaign raising awareness about athlete mental health	✓ YES	Advocacy — non-clinical community outreach
Interpret a participant's disclosure and decide what support they need	✗ NO	Clinical assessment — must escalate to Licensed Field Supervisor
Discuss NASW ethics, my CSWE competency growth, and project design with Art Fuller	✓ YES	Part of the 60-minute structured mentoring session
Ask Art Fuller to verify my practicum hours for university credit	✗ NO	Practicum verification requires the Licensed Field Supervisor, not the Voice Up Mentor
Write a policy brief connecting my project to institutional change	✓ YES	Policy practice — advocacy and resource development

Section 9: Acknowledgment

This guide accompanies and supplements the Clinical Scope & Supervision Clarification embedded in the 8-Week Planning & Readiness Guide. All parties are required to acknowledge their understanding of this framework before Week 1 activities begin.

STUDENT, MENTOR & SUPERVISOR ACKNOWLEDGMENT

By proceeding with this program, all parties confirm they have read and understood this Student Scope & Mentoring Structure Guide and the Clinical Scope & Supervision Clarification in the 8-Week Planning & Readiness Guide.

Student Name: _____	Date: _____
Voice Up Mentor (Art Fuller): _____	Date: _____
Licensed Field Supervisor: _____	Date: _____
Licensed Field Supervisor Credential/License #: _____	
University / Institution: _____	

Important Links

Resource	Link
Student Handbook (Required Before Starting)	https://voiceuplab.org/StudentHandbook
Schedule First Mentoring Session	https://calendly.com/ellingtonbooks-info
Weekly Intern Hour Logs	https://voiceuplab.org/InternHourLogs
Submit References (Before Week 2)	https://voiceuplab.org/references
Participation Waiver (Required for All Community Activities)	https://voiceuplab.org/ParticipationWaiver
Saturday Global Meetings	https://voiceuphub.com/ (1:30 PM or 9:30 PM Eastern)
Submit Your Questions	https://voiceuplab.org/SubmitYourQuestions
Student Feedback (Week 4 & Week 8)	https://voiceuplab.org/StudentFeedback
Email Support	info@voiceup.life

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