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Counseling Today

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We are Virginia Tech

How counselors responded to the grief and trauma on campus after the startling events of April 16

BY ANGELA KENNEDY

As a nation, we have watched and grieved with Virginia Tech. We have been moved by the images of candlelight vigils, tears, flowers and balloons. We have worn the school colors and proudly declared, "We are all Hokies today!" And we have learned about the university's motto, "ut prosim," which is Latin for "that I may serve" — the essence of what the university community refers to as "Hokie spirit."

Following that infamous Monday morning of April 16,

when student gunman Seung-Hui Cho killed 32 people and wounded numerous others before committing suicide, Virginia Tech counselor educators Gerard Lawson and Nancy Bodenhorn, both American Counseling Association members, responded quickly, serving the university community wherever they saw a need. They served the students with comforting hugs. They served by being present with the victims' families during the heart-wrenching notifications. They served their colleagues, offering

them shoulders on which to cry.

Lawson and Bodenhorn were also key players in what has come to be known as the Mental Health Advisory Group, a collaborative panel that also includes representatives from the university's Cook Counseling Center, the university psychology department, the New River Valley Community Services Board and the American Red Cross. The group met the day after the shooting to develop a strategy to provide mental

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Candles were raised high to remember the victims of the campus shootings and to show support for the university community.

Courtesy of Virginia Tech photo library

20/20 delegates start reaching consensus

Oversight Committee asking for feedback from counseling community as delegates continue discussions

BY JONATHAN ROLLINS

The Oversight Committee for 20/20: A Vision for the Future of Counseling has announced that the initiative's delegates have

reached consensus on their first 22 items. The delegates will continue to review items they have yet to reach agreement on or discuss in depth, but in the interim, the Oversight Committee is pre-

pared to receive feedback on the current consensus items from the counseling community at large (see "Consensus items," p. 27).

Each of the consensus items falls under one of seven major areas that delegates representing 29 different counseling associations and entities have agreed must be addressed to ensure the future health of the counseling profession:

- Strengthening identity
- Presenting ourselves as one profession
- Improving public perception/recognition and advocating for professional issues

- Creating licensure portability
- Expanding and promoting the research base of professional counseling
- Focusing on students and prospective students
- Promoting client welfare and advocacy

In reviewing the items on which the delegates have reached consensus thus far, Sam Gladding, an American Counseling Association past president who is serving as the facilitator for the 20/20 initiative, said a number of core commonalities have emerged. "I think commonalities center

around 1) identifying the profession as a single entity with specialties, 2) presenting the profession to the public in a positive and unified way, 3) generating research in the field of counseling apart from other helping professions, 4) establishing common core standards for the education of counselors, 5) working with undergraduate and graduate students to educate them on the value of counseling and the profession of counseling and 6) advocating for the profession of counseling and those in need of counseling services on multi-

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Indiana counselors' use of tests, assessments cleared

BY SCOTT BARSTOW

After years of hard work, licensed mental health counselors and other master's-level professionals in Indiana will be allowed to use psychological tests and assessments without having to worry about oversight from the state's psychology board. Indiana Gov. Mitch Daniels signed legislation (HB 1821) into law on May 8 that includes language repealing the state psychology board's responsibility for developing a "restricted test list." The legislation's enactment is a major victory for counselors in the state and sets a valuable precedent for other states in which counselors' ability to use tests and assessments is threatened.

Elimination of the restricted test list language follows a decade of negotiations and lobbying work. State law requiring the development of a restricted test list was included as part of the counselor licensure legislation enacted in 1997. The Indiana State Psychology Board was given authority to recommend psychological tests and assessments that would be off-limits to counselors and other mental health care providers, subject to approval by the Indiana Social Work, Marriage and Family Therapist and Mental Health Counselor Board (also known as the "tri-lateral" board). Since that time, the psychology board has several times developed long lists of restricted tests that have been objected to by the tri-lateral board and others.

A large coalition of behavioral health professional organizations in Indiana and at the national level has been working together for years to resolve the

issue. The coalition included the Indiana Counseling Association, the Indiana Mental Health Counselors Association, the American Counseling Association, the American Mental Health Counselors Association, the Fair Access Coalition on Testing, the National Board for Certified Counselors and the Council for the Accreditation of Counseling and Related Educational Programs, as well as state and national organizations representing other professionals. The restricted test list issue affected the state's school counselors, physical therapists and speech, language and hearing professionals. Professional lobbyist Mark Scherer spearheaded negotiations and lobbying work on the restricted test list. Successful resolution of the issue is a testament to the skill and perseverance of Scherer and his fellow lobbyist, Paul Chase.

The logjam was officially broken March 26 when the Indiana House Public Health Committee approved language to repeal the restricted test list. Instead, the committee established a requirement that individuals must have appropriate education and training before using a psychological test or assessment. The amendment was approved as part of broader legislation, SB 320, concerning the certification of massage therapists in the state. By March 30, negotiations between the "tri-laterals" and the Indiana Psychological Association had resulted in a compromise: repeal of the restricted test list, deletion of the specific "education and training" requirement for use of tests and assessments, and adoption of more general language stating

that when an exemption from the psychology statute's requirements is granted, the person must be practicing within the scope of his or her license, education and training.

During further consideration by the Indiana Legislature, the restricted test list provisions were deemed non-germane to the massage therapy certification bill and were instead attached to HB 1821, a separate bill establishing licensure of occupational therapists. HB 1821 received unanimous approval from the Indiana House on April 27 and from the Indiana Senate the next day.

"The demise of the Indiana restricted test list is a major victory for the counseling profession," said ACA Chief Professional Officer David Kaplan. "The coalition is to be congratulated. Defeat of the restricted test list sends a signal that counselors are well-trained to utilize assessment instruments."

Added Tom Clawson, president and CEO of NBCC, "The restricted test list being removed is not only important for counselors in Indiana, but also sends a message to counselors and for counseling all over the United States."

ACA congratulates all of the organizations and individuals, from both Indiana and across the country, who worked so hard on this issue for so many years. ■

Scott Barstow is the director of ACA's Office of Public Policy and Legislation. Contact him at sbarstow@counseling.org.

Letters to the editor: ct@counseling.org

ACA IN ACTION

ACA sponsors delegation to Egypt

In conjunction with People to People Ambassador Programs, ACA will be sponsoring a delegation of school counselors to attend the 2007 U.S.-Egypt Education Forum in Cairo Nov. 26-Dec. 2. Kelly Duncan, the executive director of the South Dakota Counseling Association, a branch of ACA, will be leading the delegation.

The delegates will attend the forum, which will include a keynote speaker, education sessions focused on school counselors and discussion sessions. In addition, delegates will visit a local school and a complex devoted to teacher training and meet with Egyptian education professionals. Participants will also tour cultural sites in and around Cairo, including the Great Pyramids of Giza, the Egyptian National Museum and the Khan el-Khalili Market.

For more information or to apply as a delegate, go to www.ambassadorprograms.org/upcomingprograms/education/kelly-duncan.asp.

Meet your job match online

Join the thousands of members who are using the new ACA Job Center site. By targeting your job search with the ACA Job Center, you may be able to turn your passion into your career. The filtered screening process for counselors makes job searches much easier.

Since the inception of the ACA Job Center in August 2006, more than 67,725 job searches have been conducted and more than 1,600 applications submitted. These ACA members know that the more you use our search feature, powered by CareerBuilder.com, the better the job matches become.

To find your dream job, go to the ACA website at www.counseling.org and click on "Career Center." From that page, click on the ACA Job Center logo. You will need to log on first with your member ID or member name and then your password. Call ACA Member Services at 800.347.6647 ext. 222 if you need a password.

Online CEU offerings expanded

Five new ACA book chapters are now available for online continuing education. Overall, ACA has more than 30 book chapters and *Journal of Counseling & Development* articles available to help counselors earn continuing education units online. In addition, there are online CEU courses in counseling ethics, cyber-counseling, grief counseling and more. Access ACA online continuing education by going to www.counseling.org/resources and clicking on "Professional Development."

While there, look for the following new book chapters:

- "Adventures in Child and Adolescent Counseling" by John Sommers-Flanagan and Rita Sommers-Flanagan (from *Tough Kids, Cool Counseling*)
- "Counselor Advocacy for Access — Addressing the Challenges of Disabilities" by Ellen S. Fabian (from *Counseling for Social Justice*, Second Edition)
- "From Blue Collar to Ivory Tower: Counseling First-Generation, Working-Class Students" by J.A. Lippincott and R.B. Lippincott (from *Special Populations in College Counseling*)
- "Online Counseling and Electronic Records" by Robert Mitchell (from *Documentation in Counseling Records*, Third Edition)
- "Separation Anxiety: Helping Children Feel Safe and Secure" by Suzanne M. (Hobson) Dugger and Laurie A. Carlson (from *Critical Incidents in Counseling Children*) ■

By the Numbers: Children's Mental Health

Statistics courtesy of Department of Health & Human Services.



- Mental health problems affect one in every five young people at any given time.
- An estimated two-thirds of all young people with mental health problems are not getting the help they need.
- Estimates of the number of children who have mental disorders range from 7.7 million to 12.8 million.

Time for counseling profession to grab reins of coaching bandwagon

(Note: The following letter was sent to American Counseling Association President Marie A. Wakefield.)

I wish to bring a matter to your attention that I believe is of the greatest concern to counselors — the growing encroachment of coaching into the domain of counseling. It is my hope that ACA will take the lead among the mental health professions in sorting out the best way to address a fast-emerging issue that has serious implications both for the public and for counseling professionals.

I am a licensed professional counselor in North Carolina, in practice since 1991. Because I also have a background in business, I recently became interested in the domain of coaching, as I see this as a potential means of taking my counseling skills into the business world, where coaching has gained a strong foothold. Thus, I enrolled in a coach training program that purports to specialize in training mental health professionals who wish to learn coaching skills and become certified by the International Coach Federation. The ICF has established a dominant presence as the standard-setting body in the coaching profession. It is not alone, however, in developing the field of coaching. Academic institutions are now beginning to incorporate coaching into their curricula, some adhering to the standards of the Graduate School Alliance for Executive Coaching.

Let me say that I believe coaching can serve a vital function, especially in a business environment. However, over the last six months as I have become acquainted with the coaching world, I have seen that much of what goes on under the rubric of coaching — especially “life coaching” — is none other than much of what counselors have been practicing for years. Let me add that numerous of my coaching classmates have no clinical background. Coach training programs in general have no admission criteria, and so, for the price of tuition and successful completion of the coursework and examinations, most anyone can receive that program’s certification. As far as I know, no state has any licensure law yet concerning coaching, and anyone — whether they have gone through such a pro-

gram and are certified or not — can call themselves a coach.

Now we have a marketplace in which counselors are facing competition from coaches who, comparatively, have far less training or credentialing in many cases. I was flatly faced with this reality just last week when a client mentioned that she had arranged for her teenage son to work with a “life coach” in hopes that this person will help her son become better focused on future goals and college plans. My impression was that a coach seemed less threatening to mother and son than a counselor, because seeing a coach carries no possible stigma of mental illness.

Herein lies the dilemma for counselors and allied professionals: Because our professions have been understandably concerned with educating the public about mental illness and its treatment and with establishing ourselves as experts in the eyes of the public and insurance providers, we have neglected the message that we are also the professionals who can provide skilled, professional help with nonpathological life issues and transitions, future planning, goal setting, etc. In fact, I would wager that this constitutes much, if not most, of what counselors do on a daily basis. Those who have created the coaching profession have obviously recognized an opportunity to satisfy the public’s desire for non-pathologically based help, and they have quickly created a well-marketed, highly visible alternative to counseling. (The program I have been involved with strongly emphasizes marketing strategies while introducing students to basic coaching techniques.)

Now mental health professionals are realizing that we, too, had better jump on the coaching bandwagon or lose much of our livelihood to others who are far less trained and not even licensed. The desire of many mental health professionals to take up coaching is also fomented by their frustration with managed care constraints and their wish to have an alternative way to earn a living. In my conversations with other coaching students, including counselors, social workers and psychologists, I have become quite informed about a high level of discontent within the helping professions and the need to develop professional alternatives. Surely this in itself

is a matter ACA will want to address on behalf of its members.

With all of this as prelude, I write to urge ACA to consider strategic ways of helping counselors embrace coaching — ways that can protect the integrity of the counseling profession and simultaneously raise the bar for the coaching profession. Coaching is clearly here to stay, and many think that licensure is only a matter of time. We not only need to address counselors’ needs to practice in more fulfilling ways, but we also need to protect ourselves from potentially being shut out from what we are highly skilled in doing, once legislation does take effect. In short, we need to demonstrate that coaching is a subset of counseling and that it is clearly within our scope of practice.

I can think of no better way to achieve this than to create an ACA division for coaching and to overtly acknowledge that coaching is a part of our profession. I believe this strategy would be far more effective than trying to compete with coaching as a separate domain. If specialty certification within our profession is deemed necessary to claim coaching proficiency, so be it. (Interestingly, my coaching program’s classes are eligible for continuing education credits through the National Board for Certified Counselors, so some overlap already exists.) The point is, counselors need a way to remain within the counseling profession and to be equipped to claim coaching as a part of what we do.

Meanwhile, as we find ways to embrace coaching, we need to be preemptive in regard to legislation, making sure that definitions of counseling include language about coaching. We should also have a voice in establishing legal and ethical standards and oversight for coaching.

As ACA president, I hope you will begin a major initiative that will have defining effects on how counseling and coaching interrelate. I believe this matter has real urgency, as coaching is gaining greater and greater visibility and acceptance. We cannot afford to turn a blind eye to this issue, and time is of the essence. Please let ACA members know how we can move this issue forward and create a clear strategy for helping counselors embrace coaching, set

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The mission of the American Counseling Association is to enhance the quality of life in society by promoting the development of professional counselors, advancing the counseling profession, and using the profession and practice of counseling to promote respect for human dignity and diversity.





Hattitudes of gratitude: Glancing in the leadership mirror

Organizations are not machines with precision parts. They involve all kinds of people and relationships. People with ideas, potential, insight and vision. People who follow and people who lead.

The American Counseling Association is composed of more than 40,000 members and 60 staff members, and both of these groups perform as leaders on a daily basis. Leadership is not about tenure or title, being on top or out front. By definition, leadership is the process of persuasion — how an individual influences, inspires, motivates or affects the thoughts, feelings and actions of others. In the variety of hats we wear, consciously or not, we influence others to use their potential, call on their determination, embrace change, think strategically and

undertake endeavors beyond their comfort zone. Finding meaning implies finding a connection between what we do, who we are and what we consider valuable.

It is not the title of an organization's events or the presidential theme that gets remembered, but rather the sustained presence of values that brands the organization. As the leadership values become more entrenched, they spread throughout the organization. It is neither the complexity of the changes nor the continuation of conventional standards that matter so much, but rather the innovative contributions that promote growth in the profession and the organization. It is not the number of initiatives that are ultimately appreciated,

but the strategies that mobilize effective practices and services, truly meeting the needs of our members and the public we serve.

We are a multitasked, multidisciplinary, multicultural and multitalented organization with innumerable accomplishments, products and services. Among the accomplishments:

- Receiving the Summit Award for our support of the victims of Hurricane Katrina
- Earning inclusion of licensed professional counselors as mental health providers in the Department of Veterans Affairs
- Being designated an official nongovernmental organization of the United Nations, which gives ACA greater

recognition in speaking out on the needs of counseling around the world

- Recognition of *Counseling Today* with multiple APEX awards for distinguished news and feature articles

ACA has also participated in several events and given sponsorship support to others in the past year to increase our presence. Among them:

- The Voice Awards, which raised the awareness level of the stigma faced by those with mental health disorders
- National Children's Mental Health Awareness Day
- The PBS special *Retire Smart, Retire Happy*
- The PTA's Commitment to America's Children Gala
- The Educational Round-

table: Meeting the Needs of Children in Foster Care

The ACA leadership understands the meaning of call and response:

- Whenever tragedy struck, many ACA members rallied to volunteer their services without hesitation, as demonstrated in the immediate aftermath of Hurricane Katrina, the shootings at Virginia Tech and the tornadoes in Kansas.
- Collaborative efforts to attain licensure in Nevada and California have been gaining strength.
- ACA stepped up to the plate to support counselors who were facing various testing issues related to the use of appropriate assessment tools.

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News & Information

ACA Announces Dr. Bradford Keeney as one of the Keynote Speakers for Hawaii...
ACA's News Volume IX, Issue No. 9 (April 20, 2007)...
The latest issue of ACA's News is online in this issue: ACA Responds to Tragedy at Virginia Tech... Honolulu, Hawaii - Site of 2008 ACA Conference & Exposition... ACA Conference Call for Proposals for Educator Sessions and Learning Institutes... Fact Fact - Counselors Number 601,500 in US... John Rucker - Dedicating ACA Staff Member Passes

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Offering sincere thanks

June is the month when the change of seasons combines with transitions between some of life's most important experiences. For instance, some graduate students complete their studies and prepare for life as new counseling professionals. In our personal lives, some of us will begin to count down the days to our summer vacation with family and friends. At the American Counseling Association, the month of June concludes our fiscal year. It also means that the time has come for me to acknowledge the work of our leadership as they move on to other challenges and opportunities.

Both collectively and individually, the leaders in ACA's branches, divisions, committees, task forces and governance have accomplished

much this year regarding the promotion and enhancement of the profession. To all of you who dedicated yourselves to the elected and appointed leadership positions you assumed this past year, I thank you for your hard work and commitment. I know your efforts are not always acknowledged. In some instances, you may not even be sure that you made much progress in the task that was set before you as a leader. Please trust me when I tell you that the thousands who were involved in leadership *did* make a difference. All of you who were part of leadership undertook many responsibilities this past year, and you really did accomplish very positive things for the profession as well as for those whom you serve.

I would be remiss if I did not

take a moment to express a special thank you to this year's ACA president, Marie Wakefield. Her passion to ensure that professional counselors do all they can to help society was consistently demonstrated through her tireless efforts as our president this year. Marie expressed concern for children, families and those adults who are facing life's challenges. She also took the extraordinary step of working to develop current and emerging leaders in our association. To say she seemed tireless in her pursuits to represent ACA would be an understatement.

Many of you know that Marie is fond of wearing hats, several of which have a certain "uniqueness," shall we say, in what they represent to her when she delivers a presentation. If I were to pick a hat to

represent the year she has served as ACA president, I would find one with a world globe on it, and it would include people from all walks of life. To me, this hat would represent Marie's care and concern for all people in the world. Further, it would show that a better and more compassionate world starts with one person who wants to make a difference.

Each ACA president under whom I have served has brought his or her own unique style and message to the office. I have appreciated Marie's ability to persevere at finding common ground on issues being discussed. Her desire to help make "counseling" a household word and her efforts to promote the professional counselor were also admirable traits that will be hallmarks of her presidency.

So, on behalf of the entire staff of ACA, we want to express our thanks for her work this year as our president, her support of our efforts and the positive way in which she advocated for the counseling profession.

I also want to reiterate my thanks to all who served this year in leadership. At the same time, I want to let those of you who will be taking office on July 1 know that the staff and I stand ready to assist you as we continue to let the public and others know of the good work being done by professional counselors.

As always, please feel free to contact me with any questions, comments or suggestions by e-mailing ryep@counseling.org or calling 800.347.6647 ext. 231.

Thanks and be well. ■

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Counseling services in schools? Deal!

Celebrity Howie Mandel among those who join with advocacy organizations on Capitol Hill to promote children's mental health services



Howie Mandel shared his personal story at the National Children's Mental Health Awareness Day briefing.

BY ANGELA KENNEDY

The American Counseling Association and the American School Counselor Association were among the cosponsors of the second annual Capitol Hill briefing to draw attention to National Children's Mental Health Awareness Day, May 8. ACA and ASCA collaborated with other national mental health, counseling and education organizations, led by the Substance Abuse and Mental Health Services Administration, to shed light on the need for comprehensive children's mental health services in schools and communities.

The briefing, "Children's Mental Health: Key to Achieving Success in Schools and the Community," was held so members of Congress and their

staffs could hear real-life stories told by individuals who have struggled with mental illness, illustrating the need for state and federal improvements in mental health care. The program emphasized the positive impact effective school- and community-based mental health services have on children, youth and their families.

"National Children's Mental Health Awareness Day creates an opportunity to raise the profile of children's mental health issues and lower the stigma that prevents so many from seeking help," said Mark Weist, honorary education spokesperson for the event and director of the Center for School Mental Health Analysis and Action at the University of Maryland. "Together, we can provide the necessary school-based mental health services for children and

youth with serious mental health needs and give them the support they need to thrive in their communities."

Individuals representing the many sides of children's mental health care joined Weist as honorary spokespersons at the briefing, sharing personal experiences and providing their perspectives on the service delivery system.

Howie Mandel, acclaimed comedian and host of the popular TV game show *Deal or No Deal*, was the honorary consumer spokesperson at the event. He shared his personal experiences managing obsessive-compulsive disorder and mysophobia, which is the fear of germs. Mandel discussed his childhood growing up with a mental health need and how the stigma surrounding mental health affected his decision to

seek help as a teenager. "The things I got expelled for, hit for and punished for as a child, I get paid to do as an adult," he said, adding that channeling his energy into the creative arts helped him achieve success. He also said he is supportive of nontraditional therapies, including play and art therapy, to help children work through their issues.

As expected, Mandel used humor in relaying his message about the need for mental health services. But he also spoke candidly and passionately, saying he is adamant in his views that mental health should be part of the curriculum in schools. He spoke highly of his youngest son's school, a private academy in California, for setting time aside each day for the children to openly express their thoughts, worries and fears. A

professional trained to recognize "red flags" and help those students who may need additional counseling services supervises the discussion.

The stigma of seeking counseling needs to be addressed not only in schools but also in life in general, Mandel said. "Mental health isn't a problem if you educate people. I've had people tell me, 'I've heard you don't like to touch things, you count things. Well, I do too. What do I do?' Well, you don't call a host of a TV show. That's the problem."

Additionally, Mandel said he would like society to become open to the idea of preventative mental health therapy — counseling before a significant problem occurs. "If you aren't diagnosed but you just want 'therapy,' someone to talk to, it's not covered by insurance," he

lamented. "They have to 'find' something to diagnose. That's what has to change. It's about prevention."

Deborah Marriott Harrison, an advocate for children and youth with mental illnesses and their families, served as the event's honorary family spokesperson. She shared her battle to secure appropriate services for her two sons living with bipolar disorder and addressed changes in the delivery system that would have improved the experience for her and her family. She agreed with Mandel that mental health curriculum should be presented in health classes. Her son Scott also shared details about his experience as a student with bipolar disorder and advocated for changes to increase the availability of mental health services in the school system.

Marvin Alexander, a 20-year-old licensed social worker from Arkansas, was the honorary youth spokesperson. Alexander was diagnosed with bipolar disorder, attention deficit-hyperactivity disorder and oppositional defiant disorder as a child. He discussed the challenges of growing up in Chicago and learning of his mother's crack addiction. With a streetwise yet empathic air about him, Alexander spoke of overcoming those obstacles, advocating for himself and navigating the juvenile justice system as a youth. "I was criminalized instead of being treated. They said I was a menace to society, but there were other people who saw differently," he said. Eventually, with the help of counseling and the right medication, he was able to turn his life around. He will

soon begin an advanced graduate studies program at the Barry University Graduate School of Social Work in Miami Shores, Fla. Alexander urged the audience to help normalize mental health needs and dissolve the stigma associated with seeking treatment.

The group of honorary spokespersons was joined by event moderator Carl Bell, professor of psychiatry and public health at the University of Illinois at Chicago, and Gary Blau, branch chief of the Child, Adolescent and Family Branch of SAMHSA's Center for Mental Health Services. "Mental health is essential to overall health," Blau said. "Mental health services should be family driven and youth guided, meaning families have primary control in decision-making and young people have the right to

be empowered and educated in their treatment plans. Comprehensive school-based services work. That's the one thing these success stories have in common — a system of care. We need to continue our efforts to implement mental health services in schools. This isn't going to end here."

"The briefing put a very real face to the need for mental health services in schools," said ACA President Marie A. Wakefield, who was in attendance with ACA Chief Professional Officer David Kaplan. She added that she hopes those who attended the briefing now will work toward sharing ideas and best practices to fill that need.

The Capitol Hill briefing was hosted by its founding partners, including the Bazelon Center for Mental Health Law, the Federation of Families for

Children's Mental Health, Mental Health America, the National Alliance on Mental Illness and the National Association of Social Workers. Additional cosponsors included the National Association of School Psychologists and the School Social Work Association of America. National Children's Mental Health Awareness Day is an annual event celebrated during the first full week in May, which is Children's Mental Health Awareness Week. ■

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extensive experience to provide a broad overview of the law and the potential areas of liability that counselors may encounter in their day-to-day practice. This edition is revised in accordance with the 2005 ACA Code of Ethics and contains information on current federal and state law to guide counselors in making crucial legal and ethical decisions. Not only do the authors answer questions on how the law affects counseling practice, they also provide concrete answers for counselors trying to act in the best interest of their clients.

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Lessons for the student who teaches

I walked down the hall, my heart pounding with each step. I took slow, deep breaths, hoping that my hands would stop shaking, even as I continued to think: “Will they take me seriously? Will they respect me as their teacher, even though I am almost the same age as them?” I had been asking myself the same questions all summer in preparation for teaching my very first class as a graduate student. I checked my reflection in a window and smoothed down my hair. More lip-gloss.

Why was I so nervous? Prior to counseling, I had spent almost my entire life onstage acting, singing and dancing. I had been center stage in dozens of shows, performing in front of crowds both small and large. Shouldn't I have kicked this stage fright thing already?

The reality was that I felt more nervous walking to Classroom 260 than I ever did on stage in front of thousands of people. In retrospect, my nervousness stemmed from the fact that this time, the “performance” was all on me. No scripted lines to read, no choreography to learn, no melody to practice. I had to write the script and deliver it without any dress rehearsal. No more relaying someone else's thoughts. This time I had to be the creator as well as the purveyor of information.

My quivering hand reached out and opened the door. I walked to the podium, put my bag down and stared out into a sea that contained 50 pairs of eyes. After gulping down the lump in my throat, I said to myself, “If you don't buy it, they won't.” I made the decision to stop questioning myself and simply become their teacher, or at least to ignore the nervousness and pretend to be fully confident. Fake it until I make it, as they say.

One more deep breath for good measure and then start with an introduction. It had never occurred to me that the four semesters of teaching that undergraduate class would be filled with excitement, bemusement, stress, fear, disappointment, success and relief (to name only seven of the numerous feelings I went through).

After that whirlwind experience, I felt the need to write down what I had learned so as not to forget. Since then, I've whittled down that list of lessons learned and identified five that seem to fit everyone. My hope is that other graduate students might gain some insight from my experience so they will be better prepared than I was when assuming teaching responsibilities.

Ask for help

I taught while taking classes and doing clinical practicum. With only 24 hours in each day, I found it necessary to enlist the aid and support of others to get through this experience while maintaining my sanity (and some modicum of sleep). Self-care is an important lesson when we become counselors, and it is just as imperative to remember when teaching. Having been accused

once or twice of being particular about how I like things done — I believe the term used was “control freak” — I had to fight my instincts to do everything on my own. Instead, I sought out others for help.

I started with those who had taught the class before, asking to borrow their materials. This was enormously valuable, because it allowed me to compare my ideas for the class with actual methods used in the past and even provided me with a chance to steal some good concepts from past professors (with their permission, of course). This approach gave me a jumping off point for lessons and also helped fill in the gaps where my plans were lacking.

My load was also greatly lightened when I enlisted the help of teaching assistants (TAs). The pool of candidates was made up of fellow graduate students and undergraduates

who had taken the class before. People who had taught in the past were able to recommend students who wanted to be TAs. After teaching for a semester, I extended the invitation for students from my classes to work as a TA in future classes.

I quickly learned to be cautious in selecting those who could be trusted to uphold my standards. One student asked if she could be my TA the following semester. I had to weigh the benefits of having another person to help run small groups and grade journals against the deficit of not fully trusting this person to maintain my standards. The additional help would have been nice, but I had to consider whether she would take full responsibility for all that the position demanded. The moral of this story is to seek out help, but do not accept it blindly.


Be creative

My experience as a student taught me that the chances of actually reaching students are much greater if the class is kept interesting. That might sound simple, but when all 50 of my first semester students seemed to learn in different ways, I realized the challenge was much more complex than I had ever comprehended when I was a student.

The use of diverse teaching methods seemed to help the greatest number of students absorb the information. So I started all my lesson plans with a PowerPoint lecture, which helped those who learned by seeing, hearing and writing. I followed that up with a movie or TV clip that exemplified my point of focus. This method was entertaining and drew in other students to the lecture.

Continued on page 32

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Questions and answers with ACA President-Elect Colleen Logan



Colleen Logan with her son, Brendan.

INTERVIEW BY
ANGELA KENNEDY

Next month, Colleen Logan will take on a new title as she steps into the leadership queue to become the next president-elect of the American Counseling Association.

Logan, a “20-plus”-year member of ACA and one of the founders of the Association for Gay, Lesbian and Bisexual Issues in Counseling, is the associate dean of the College of Psychology and Behavioral Sciences at Argosy University in Washington, D.C. In addition, she was recently named vice president for academic affairs at Argosy University-Dallas. She resides in the Washington metro area with her partner, Deborah, and son Brendan. The couple is expecting the birth of their second child in August.

Counseling Today caught up with Logan to learn more about

her ambitions for the profession and the association.

Counseling Today: What motivated you to run for ACA president?

Colleen Logan: I really believe that I have the passion and energy to lead our organization in terms of greater success and professional identity and ultimately greater quality service to those whom we serve.

CT: How do you see the organization now, and how do you want it to look after your term?

CL: I would like to see our membership increase. I would like to see counselor professional identity grow even stronger and continue to stand head and shoulders with our sister mental health organizations. I would like professional counselors to remain on the forefront when it comes to dealing with trauma across all levels and experiences. ACA’s

collaboration with the American Red Cross in response to Hurricane Katrina illustrated that counselors are on the forefront when it comes to helping everyday people with everyday problems during devastating times. I would like to see professional counselors have an even greater impact as well as presence in terms of media and how counselors are making a difference every day in people’s lives. I want to not only increase our membership but also increase the visibility of professional counselors.

CT: What’s a current hot topic that interests you?

CL: I am very excited that as a result of the combined efforts of ACA and AMHCA (the American Mental Health Counselors Association), professional counselors are now able to provide services to veterans and their significant others. I am also interested in the devastating impact of bullying and the myriad ways professional counselors can intervene and stop the cycle. Hot topics to me include the growth of our organization and what professional counseling really means, what we do for our members and ultimately what our members do to help people. I think we need to continue to find ways to make ACA necessary for our members so that, in turn, we can provide quality, affirmative services to the clients we serve.

CT: What inspired you to become a counselor?

CL: My father. He was the greatest influence in my life. He was a Presbyterian minister and helped everyone around him. He talked to everyone. He just would listen, hear and connect with people, and I wanted to do that. I wanted to ... hear people’s stories and help.

CT: Who is the most influential person to you professionally?

CL: I would list some of the great pioneers in our field — Courtland Lee has been my mentor, and Patricia Arredondo. I have been very influenced by their writings, leadership and vision.

CT: What are you most proud of among your professional achievements?

CL: I’m proud of AGLBIC, how it’s grown and how it’s part of the tapestry of ACA. AGLBIC came from the outside to have a seat at the table, and now it’s part of ACA. It was fraught with challenges along the way from a number of sources, but since 1995 it’s grown.

I think AGLBIC has had a positive influence on the greater organization. The members and leaders of AGLBIC have had an enormously positive impact on me throughout my professional life. AGLBIC has been a source of strength and pride throughout my relationships, the birth of my son and the anticipation of the new baby. As AGLBIC has grown and increased its presence, my sense of pride and self-worth has grown exponentially. (*Note:* Logan was the co-chair of AGLBIC when it was an organizational affiliate, before it earned division status in ACA. At the ACA Convention in Detroit, the division changed its name to the Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling, effective July 1.)

CT: Fill in the blank. Colleen Logan was the ACA president who _____?

CL: Changed the world one person at a time.

CT: The next few questions deal with the goals statements you provided when you were running for the office of ACA president. Explain your thoughts on revamping ACA marketing strategies.

CL: I think we really need to access someone who is “Hollywood” — someone like a Susan Sarandon, like an Ellen DeGeneres, Oprah. I say that knowing I’m aiming for the top, but it’s those kinds of people who can make it real for those who aren’t in Hollywood. For example, Ellen DeGeneres, right before she hosted the Oscars, was interviewed by Barbara Walters. She talked about how she dealt with her

mom's depression and used laughter. How she was sexually abused and how she had to deal with a very successful career, then to come out and lose it all. The power of her words and the way she's overcome adversity— those are the kinds of high-profile stories that need to be told. I really believe we need to engage with a high-profile person who gets counseling.

CT: You mentioned that ACA needs to align with sister organizations. Why do you feel this is important, and which organizations do you suggest?

CL: I think we should continue to strengthen our relationships with our own divisions as well as sister organizations. We can do this by continuing our lobbying efforts with our own divisions and partners. We can continue our working relationships and partnerships with such organizations as the American Psychological Association, the American Association of State Counseling Boards and the National Association of School Psychologists as we bond together to ensure parity and quality mental health services for all.

CT: Another one of your goal statements reads, "Promote respect for human dignity and diversity by disseminating our competencies related to multiculturalism, diversity and advocacy." Could you elaborate on that? Could this be a marketing aspect?

CL: I think it is part of who we are and ultimately would be a marketing tool. What I teach my students is that when you walk out of my class, I want you to know one thing, and that is you can sit down with anyone at any time and begin a relationship. That's what it's all about — the relationship. That's the foundation of counseling, so having dignity and respect for everyone is a cornerstone. If we sit down and make a connection with someone no matter their background, experience or story, then I think that's how we make a difference.

CT: You've mentioned the need to build a strong sense of professional identity within the field. What are your thoughts on the progression of counselor professional identity?

CL: I have a story — I tell a lot of stories. When I first

started out as a counselor, I wouldn't correct people if they said I was a psychologist because it had more prestige. Ultimately, I learned that I am a counselor through and through and I believe in counseling, and that really is the best fit for me. But I think a lot of people still struggle with that — what is a counselor? What does that mean? How are we different? How are we the same? What are the skills that we bring to the table? I think our identity is critically important. I would like to help ACA answer those questions better, across many levels, divisions, organizations, etc.

CT: So what's the next step?

CL: Steps have been taken in terms of new strategic thinking over the last year such as the 20/20 Vision for the Future initiative that includes 29 major counseling organizations. I know there's talk about a signature product. I think that will help. I think we need to spend some time in *Counseling Today* and on the ACA website talking about professional identity. We've talked about it through Listservs, but we need to mas-

sage that into a description we can all carry. I don't know that I have all the answers to it, but I know that it's missing. I don't see that pride in counseling, and I want to help grow that.

CT: In answering questions posed to the ACA presidential candidates last year, you wrote, "I think the biggest challenge facing ACA is finding ways to creatively meet the needs of our changing membership." What are your suggestions?

CL: We've got to get better at connecting with the graduate students. I know we have made great strides in making those connections, such as creation of the Graduate Student Task Force. Already this group is actively participating in the larger organization as evidenced by the booth in Detroit as well as the graduate student-sponsored workshops. We need to continue to find ways to access and mentor the graduate students who are new and are part of our organization.

CT: What advice do you have for those just starting their counseling careers?

CL: Get involved. By getting involved you learn a lot more

about counseling and what issues are on the forefront. The most exciting thing for me when I joined ACA was that I got to go into a room and sit and listen to the people who were on the backs of my textbooks. It was phenomenal.

I remember one of my first conferences, and there was Patricia Arredondo speaking, talking — talking to me, a little graduate student from the University of Virginia. She heard my ideas and connected with me and I had just seen her on the back of a book — a book, by the way, that changed my life in terms of multiculturalism and diversity. I later invited her to come talk with my students, and I could see them transform because they were in the presence of someone they had only read about. But now they could talk with that person.

CT: What's been the biggest challenge for you professionally?

CL: Wanting to do it all. I mean, I love to practice, I love leadership, organizations, my profession, I love connecting with people — and I want to

do it all. I think the challenge for me has been learning to prioritize and make sure I take time to smell the roses, so to speak. To just "be" and enjoy it. It always feels like there is so much to change and so much work to do. That's been a challenge.

CT: What has been the most rewarding experience for you?

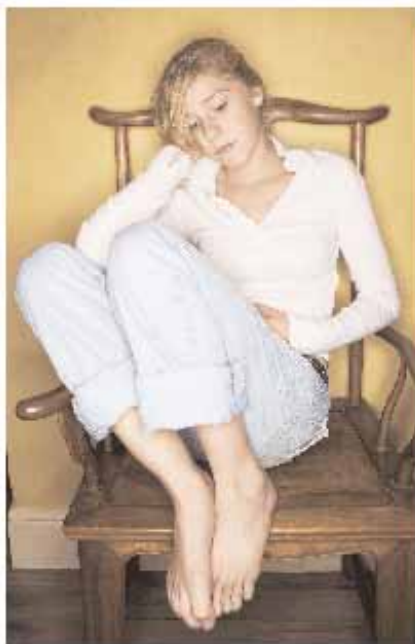
CL: The birth of my son and watching him grow and thrive.

CT: What are your ambitions or goals for the future?

CL: What immediately comes to mind is that I want to be a good mom. I want to make a difference — an enormous difference in this world — so that my two children have the opportunity to experience life at its fullest without prejudice. They are part of a unique family, but it's their family. ■

Angela Kennedy is a senior writer at *Counseling Today*. Contact her at akennedy@counseling.org.

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Learning to say goodbye

As I prepared for my session with the 16-year-old teen, I knew it would be our last meeting. For the past two months, we had been planning for this end. Instead of having weekly sessions, as had been the norm for the previous five months, we had been meeting every other week. She had said she was doing better and didn't need to come to counseling as much. I had agreed with her assessment of growth.

During our last session before this day, she had reported that she felt it was time — time for her to attempt life without my aid. I had concurred. She was ready. Her goals had been met, her perspectives had changed and she was more confident in her ability to make choices that reflected what she really wanted in life. In her new world, I was no longer needed.

Waiting for her to arrive, I thought about the first time we met. Her mom and stepdad had been concerned for a variety of reasons. Her grades had dropped in school, she was not spending as much time with her friends and she had a new boyfriend. This boyfriend had been her parents' worst nightmare. Not only did they think he was directionless in life, but he also treated her poorly.

During our intake session, my client had done something that most teens

rarely do — she had agreed with her parents. I was amazed that such a bright 16-year-old had gotten herself tangled up in such an unhealthy relationship. Our later counseling sessions often centered on the theme of poor relationships. She had a high level of insight into the connection between her poor self-esteem and her choice in boys. She was also aware that her sexual choices continued to damage her view of herself. In particular, I remembered the day she sauntered into my office, fell back into the plump loveseat and said to me, "Let's talk about sex." As I recounted the hours I had shared with her, a lump formed in my throat. Today would be the last chapter in our story we had created together.

Her blunt honesty was one thing I had come to love about her. As a beginning counselor who had just finished my master's degree, I was still under the delusion that I wasn't supposed to develop real feelings for my clients. I was supposed to be an unbiased professional who provided my clients a neutral space to explore themselves and their world. I could reflect content, feelings and meaning while still maintaining a safe distance. After all, she was the client. I was the helper. We had certain roles to play. I quickly discovered that the space in the room became quite small when I entered

into an authentic relationship with another human being.

In truth, my clients affect me deeply. They share their stories — their hurts, their successes and their failures. They humble me with their transparency, and they frustrate me with their defenses. They move in the direction of their goals, and they slump back into old habits. They blame everybody in the world, and they courageously look within. And eventually, they stop coming to see me. I have learned that these endings, whether planned (as in the case of this teen) or premature (as in the case of clients who disappear) are perhaps the hardest part of therapy for me.

I never learned how to end my relationships with clients. Don't get me wrong: My training *did* teach me how to terminate counseling with clients. I knew how to assess goal attainment and identify clues from the client, both spoken and not, that suggested possible completion of therapy. My education had prepared me to summarize growth and movement with the client, and I had learned how to prepare the client for possible backsliding after counseling ended. I knew to offer clients the chance to return should they identify additional work that needed to be done. I never was challenged, however, to consider what it would be like to say goodbye to clients who had invited me into their most intimate inner worlds.

This hesitancy to say goodbye was very evident to me as I met with this teen for our final session. There were moments of silence during our session that had never occurred before. We lingered in the room beyond our 50 minutes. I took much longer than usual writing her a receipt for payment, then sat frozen, watching her long brown hair sway back and forth as she walked away from me. Though it has been more than two years since our last encounter, I still feel a sense of loss as I reflect on the time we spent together. She has probably graduated from high school by now. At least I hope so. She could be in a healthy relationship, or she could be in one that is even worse than the relationship we spent hours dissecting. Did she finally find peace in her family situation? Has she been able to truly accept her stepdad as a permanent figure in her life? Was she able to integrate all the insight she obtained through therapy, or did old, bad habits remain too known and familiar to replace? The questions remain unanswered. Even today, the ambiguity feels like a heavy shawl wrapped around me.

One of the many things I have learned through the process of becoming a helper is how very uncomfortable I am with ambiguity. I do not like stones

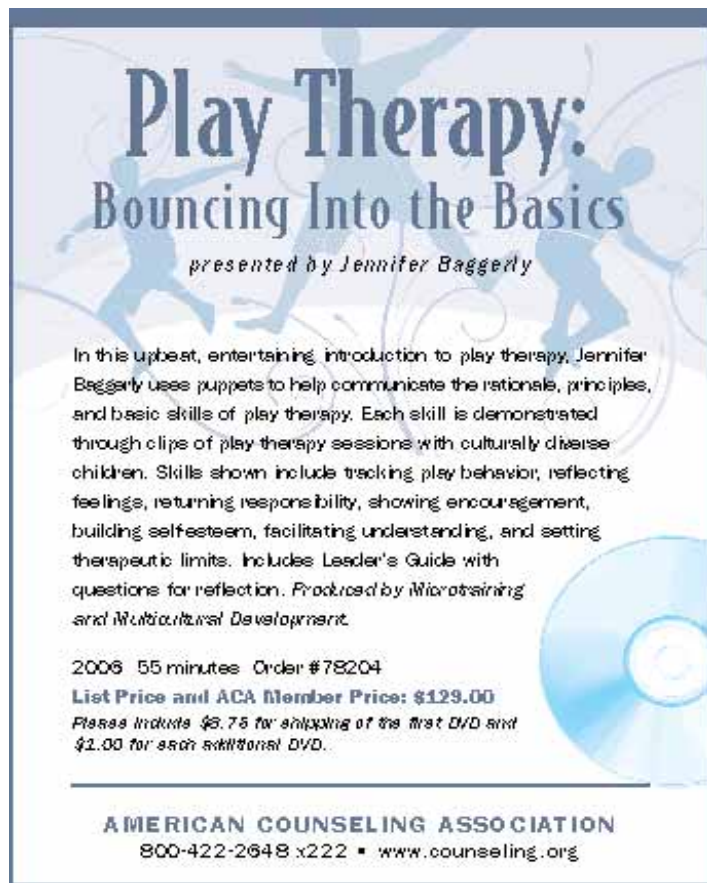
turned, plans unfinished or stories left incomplete. This is one of the most difficult things for me as a counselor because counseling is not designed to be a lifetime relationship. Clients eventually leave and continue their lives without us. My role as a companion for clients lasts but a season. I am not privy to the end of their stories, and I struggle to accept not knowing as a permanent characteristic of my work.

Recently, I successfully ended counseling with another client whom I had been seeing for approximately one year. Our relationship had been hard won; she and I both struggled for a long time to truly connect. She worked through many defenses to trust me and to look at herself, while I was forced to challenge my own level of patience as I waited for her to be ready. For so long, I saw no progress and wondered why she returned each week. We had even talked about it, and she had never been able to give me a reason for persevering in therapy. She said she wasn't getting any better, yet each week I greeted her as she arrived in the waiting room right on time. Many months in, something changed, and she began making unbelievable progress.

Before I knew it, she said she was ready to attempt life without our weekly meetings. As we discussed ending counseling, she asked if it was hard for me when clients left. I think the underlying question related to her continued uncertainty about whether my care and concern for her were genuine or merely a service I provided for a fee. After our session, I thought about this for a good while. I concluded that my heart is not something I can offer in pieces, nor is it something I can fake. I would be lying if I said all clients moved me equally. Yet even the clients with whom I do not connect affect me because I am acutely aware of the distance between us and bothered by my inability to give myself fully to that person.

These two glimpses into my experiences are examples of how hard it is for me to say goodbye to my clients even when they are fully ready and we have adequate time to voice our farewells to each other. But even harder are the endings that are premature. Even as I sit and type this, my mind wanders, thinking of those who lived at the boys' ranch where I completed my first master's internship. Much work remained to be done when I left, yet my hours were complete and the semester was over, determining the end of my relationship with the boys. Resistant to me at first, the boys had slowly allowed themselves to form a bond with me. I felt I was leaving them right as

Continued on page 25



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**AMERICAN COUNSELING
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Counseling on the corporate frontier

Applying traditional group therapy techniques to business clientele

BY STACY NOTARAS MURPHY

Imagine counseling a newlywed couple working through the transition as their two different sets of children move into the same house. You might need to help the blending family navigate issues of authority, daily routine and finances, plus personality clashes and space-sharing struggles. As the counselor, you would assist with communication processes so that all family members are heard and validated, while aiming to bring the family to a new level of understanding.

Bree Hayes, president of the Hayes Group consulting firm in Mobile, Ala., recently faced this very scenario — with one twist.

The “parents” were two pharmaceutical companies about to merge, and the “children” included their employees from around the world.

“One company was old and traditional, while the other was hip, young and European,” Hayes recalls. “It was exactly the same dynamic you would expect in a family. The traditional company thought the ‘new kids’ were moving in on their territory, as if in a restructured family, where mom marries a new dad and brings his kids in — it’s certainly not the Brady Bunch! The old kids say, ‘They’re in my room, touching my things. I don’t like them. Why did you do this to us?’ That’s the same sort of thing

that you hear when two companies merge.”

Hayes, an American Counseling Association member and former president of the Association for Specialists in Group Work, a division of ACA, has made a thriving career out of applying her group counseling skills in a business environment. Her virtual consulting firm boasts associates around the world who help corporate clients with strategic planning programs. She notes that her lifelong interest in groups and a background in counseling set her apart from others working with the same business model. “A lot of the people who do what I do came up through an MBA program, a very different path. I came up through counseling, and group work has been my passion since I was in school,” she explains.

If counselors can think about company management teams in traditional therapeutic group dynamics terms, such skills applications do make sense. Chuck Kormanski, an ASGW former president who is an

adjunct professor at the University of Pittsburgh at Johnstown, has studied the applications of group work in business environments, publishing articles and books on group processes. His research brought him from counseling into business administration, and he now teaches students from both fields.

Drawing parallels between group counseling and business consulting, Kormanski gives the example of the “strategic planning” process. “The foundation of strategic planning is basically a mission statement, value set and a vision, and that is, in many ways, counseling stuff,” he says. “Clarifying values, understanding purpose and visioning, describing what you want to become and how you want to change. You break your vision into critical issues and begin goal setting. In business they call it action planning, but in counseling we call it good old-fashioned goal setting.”

Kormanski says counselors helping businesses with strate-

Continued on page 34

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CounselingToday Quiz – June 2007

As you are reading the following articles you should be able to answer the questions below. This is an "open-book" exam. Use this page or a photocopy. Mark your answers by pressing down hard and completely filling in one circle per question. Then mail it with a \$18 payment to the address below. Please do not send cash.

"The Corporate Frontier"

- According to Komarek, the foundation of strategic planning is basically:
 - a. a mission statement
 - b. a value set
 - c. a vision
 - d. All of the above
- In a first session with a business client, Neur says credibility is established by:
 - a. demonstrating the same core counseling skills as with a counseling client
 - b. asking good questions
 - c. collaborating on how to approach the problem
 - d. All of the above

"Counseling Services in Schools? Deal!"

- All of the following statements are true about Mandel EXCEPT:
 - a. He finally sought help for his own disorders as an adult.
 - b. He celebrates his son's school, which sets time set aside each day for the children to openly express their thoughts, worries and fears.
 - c. He was once punished for the things he now gets paid to do.
 - d. He spoke about the importance of prevention.
- All of the following are part of Alexander's personal story EXCEPT:
 - a. his mother was addicted to drugs.
 - b. he was diagnosed with three different disorders as a child.
 - c. he overcame an addiction to methamphetamine.
 - d. he advocated for himself and navigated the juvenile justice system.

"Questions and Answers with ACA President-Elect Colleen Logan"

- What is Logan most proud of among her professional achievements?
 - a. The growth of AGLBC.
 - b. Connecting with graduate students and helping them get involved.
 - c. Advocacy for mental health benefits and insurance reimbursement.
 - d. All of the above.

"Behind the Book"

- Studer laments that when she began as a high school counselor, she was not mentored by an experienced school counselor.
 - a. True
 - b. False

"ACA Journal Spotlight"

- From 1950-2000, ___ percent of US men have been working in either Realistic or Enterprising areas.
 - a. 50
 - b. 60
 - c. 70
 - d. 80
- The cited study showed statistically significant differences in scale scores reflecting substance abuse, defensiveness or codependence found between adult children of alcoholics (AOCAs) and non-AOCAs.
 - a. True
 - b. False

"We Are Virginia Tech!"

- All of the following statements except ___ are true of the day classes resumed.
 - a. More than 200 mental health volunteers were mulling the halls and campus grounds.
 - b. Mental health teams were in each of the classes that had lost a student.
 - c. Mental health teams were in each of Cho's former classes.
 - d. The grief really began to set in.
- Bodenhorn notes all of the following helpful community gestures EXCEPT:
 - a. the Hokie cheer at the convocation.
 - b. the directive to "go where you get the most hugs."
 - c. the accessible support groups.
 - d. the message boards.

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Freeing both hands to help

Greetings. In the dedication of his 1973 book, *In One Era and Out the Other*, Sam Levenson wrote to his new granddaughter, “We leave you a tradition with a future. The tender loving care of human beings will never become obsolete. People, even more than things, have to be restored, renewed, revived, reclaimed and redeemed and redeemed. Never throw out anybody. ... As you grow older you will discover that you have two hands. One for helping yourself and the other for helping others.”

I believe this aptly describes the role of the American Coun-

seling Association Foundation. The ACA Foundation exists to facilitate the use of both hands: to help counseling and counselors and to help the people whom we serve. We do that through the donations of counselors and others interested in supporting our activities.

The ACA Foundation has three major programs. We support the Counselors Care Fund, which originally was developed to assist those harmed by Gulf Coast hurricanes Katrina and Rita as well as those helping the harmed. We support the Growing Happy and Confident Kids project, which is designed to put books in the hands of

elementary school counselors and other counselors who work with elementary-aged children. These books deal with a range of emotional literacy topics such as diversity, grief and self-esteem.

Our third program is to support the activities of ACA, its leaders and its members, particularly counseling students. This includes sponsoring students to attend the ACA Annual Conference, the annual student essay contest and the weekly “Counseling Corner” columns that are distributed to newspapers nationwide.

Neil deGrasse Tyson, writing in the magazine *Natural*

History, describes how having a cosmic perspective is necessary to expand understanding, assess our place in the universe and be humble and even spiritual as a result. But it also reminds us not to lose sight of the fact that “uncounted people walk this Earth without food or shelter,” every day “people kill and get killed” and “powerful people rarely do all they can to help those who cannot help themselves.”

The ACA Foundation’s mission is to “support counselors and the American Counseling Association by developing programs that promote human dignity and diversity.” We are seri-

ous about this mission and welcome your support in carrying it out.

I look forward to your input, thoughts and suggestions. Please contact me via e-mail at Goodman@oakland.edu or by sending a note to: Jane Goodman, Chair, American Counseling Association Foundation, 5999 Stevenson Avenue, Alexandria, VA 22304. ■

Jane Goodman is chair of the ACA Foundation.

Acts of violence creating many liability concerns for universities, counseling centers

BY PAUL NELSON

The shootings committed by Seung-Hui Cho at Virginia Tech University caused a jolt to insurance companies that cover mental health professionals. Copycat events could have an impact on liability insurance rates if it is established that counselors failed to intervene appropriately.

Potential liability claims arising from the deadliest school shooting in U.S. history will hinge on whether school authorities and counselors were negligent in their actions related to the campus violence that occurred on April 16. The question of whether the school had an adequate emergency management plan in place to prevent the tragedy has also been raised.

The American Counseling

Association Insurance Trust recommends careful file documentation whenever counselors deal with a client who has a propensity for violence. It is also important to maintain close communication with other agencies that may have treated the client.

In a case reported in the news, a client came to an agency in an acute state of anxiety and anger. The intake counselor told him he would be referred to another agency that could be more helpful to him. The client stopped at a gas station on the way home and shot two people, including an individual who happened to be a social worker.

In the interest of openness and freedom, it is often difficult for counselors to make the decision to intervene when a client exhibits possible warning

signs. There will be increasing pressure for counselors and other mental health professionals to take action, however, if more incidents such as the one involving Cho take place in the future.

Following are some points for counselors to consider in file documentation of clients:

- Observations recorded at the beginning of each session are essential in evaluating client progress.
- The documentation should be contemporaneous, meaning it identifies treatment at the time it was given.
- The best documentation reflects all the steps that were taken.
- Noting a consultation with a peer or supervisor is a way to document an extra measure of care.

- Avoid comments in the notes that criticize the client or make light of his/her circumstances.
- Try to develop a history of any violent behavior.
- Note when you have reminded the client about aspects of the informed consent agreement.

Additional pointers on documentation are available on a free CD, *Risk Management Strategies*, offered by the ACA Insurance Trust. To obtain a copy, call the ACA Insurance Trust office or e-mail your request to pnelson.acait@counseling.org.

On a related note, coming in June is a new book published by ACA, *The Counselor and the Law*, by Anne Marie “Nancy” Wheeler and Burt Bertram. Chapter 9 gives a concise overview of file documen-

tation. The book is 227 pages and available through www.counseling.org/publications, Order #72857.

If you are not covered by an individual professional liability insurance policy, or if you rely on your employer-provided coverage, you could find yourself in a vulnerable position, exposing your career and even your personal assets to settle claims. The ACA-endorsed malpractice protection offered through HPSO provides you with your own individual limits of coverage in line with today’s defense costs and high court awards. For details, go to www.acait.com. ■

Paul Nelson is the executive director of the ACA Insurance Trust. Contact him at pnelson.acait@counseling.org.



Medicare Coverage of Licensed Professional Counselors

Legislation is pending in the House of Representatives that would improve Medicare’s mental health benefit by establishing coverage of services provided by counselors. Reps. Barbara Cubin (R-Wyo.) and Bart Gordon (D-Tenn.) have introduced H.R. 1588, the Seniors Mental Health Access Improvement Act, which would cover licensed professional counselors’ services under Medicare. In addition, Rep. Pete Stark (D-Calif.) has introduced H.R. 1663, broader legislation that would cover counselors under Medicare and take several other steps to improve Medicare’s mental health benefit. Enactment of these bills would significantly increase access to mental health care for seniors and individuals with disabilities.

Who to Contact
Your Representative

Capitol Switchboard
202.224.3121

www.house.gov

Suggested Message:

“I am calling to ask that the representative sign on as a cosponsor of two important bipartisan bills to improve Medicare coverage of mental health care: H.R. 1588 and H.R. 1663. Each of these bills would establish Medicare coverage of state-licensed professional counselors, increasing access to mental health care for beneficiaries. Thank you for your consideration.”

ACA Resource

Peter Atlee
800.347.6647 ext. 242
patlee@counseling.org

Internet briefing paper:
www.counseling.org/publicpolicy

Capwiz “Contact Congress!” site:
<http://capwiz.com/counseling>

Appropriations for the Elementary and Secondary School Counseling Program

For the sixth year in a row, President George W. Bush has proposed an education budget that would eliminate funding for the Elementary and Secondary School Counseling Program. ESSCP is the only federal program expressly devoted to supporting counseling programs in our nation’s schools. The impact of the Bush budget would be devastating for school communities supported by this vital program, ending services to thousands of students in 88 school districts across 30 states and the District of Columbia. Children would lose counseling and mental health services, and school personnel would lose their jobs. Please call or write your members of Congress to ask for their support for increasing — not cutting — funding for ESSCP during their work on 2008 spending legislation.

Who to Contact
Your Senators and Representative

Capitol Switchboard:
202.224.3121

www.senate.gov
www.house.gov

Suggested Message:

“I am deeply concerned about President Bush’s proposal to eliminate funding for the Elementary and Secondary School Counseling Program in his Fiscal Year 2008 education budget. ESSCP is the only federal program devoted expressly to supporting counseling programs in our nation’s schools. The school counseling program is important to me and to hundreds of thousands of students across the country.

I’d like the senator/representative to reject the president’s proposal to eliminate funding in FY 2008 for ESSCP. In addition, I urge the senator/representative to support an appropriation of \$75 million for ESSCP in FY 2008. This would allow support of counseling services in secondary schools for a similar amount as was provided for elementary schools in fiscal years 2006 and 2007.”

ACA Resource

Chris Campbell
800.347.6647 ext. 241
ccampbell@counseling.org

Internet briefing paper:
www.counseling.org/publicpolicy

Capwiz “Contact Congress!” site:
<http://capwiz.com/counseling>

Parity of Insurance Coverage for Mental Health and Substance Abuse Treatment

Legislation is expected to be voted on soon in committees within the House of Representatives to establish parity of health insurance coverage for mental health and substance abuse treatments. Federal law prohibits health plans from using lower dollar coverage limits for mental health treatments than for other types of care but still allows the use of discriminatory copayment requirements, inpatient coverage and visit limits for mental health care. Although most states have enacted mental health parity laws, these laws vary from state to state and don’t apply to self-insured health plans. A new federal parity law is needed to close these loopholes and to help improve coverage for substance abuse treatment.

Please call or write your representatives to ask them to vote *for* H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act, when it comes before them, and to vote *against* amendments to weaken the bill.

Who to Contact
Your Representative

Capitol Switchboard:
202.224.3121

www.house.gov

Suggested Message:

“I am calling to ask the representative to vote for H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act. For far too long, mental health and substance abuse insurance coverage has been limited through the use of arbitrary and discriminatory copayment requirements and coverage limits. I’d like the representative to vote *for* H.R. 1424 and to vote *against* any amendments to weaken the bill’s requirements.”

ACA Resource

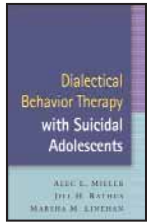
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Dialectical Behavior Therapy With Suicidal Adolescents

By Alec L. Miller, Jill H. Rathus, and Marsha M. Linehan, 2007, Guilford Press, 436 pages, \$40, ISBN 978-1-59385-383-9



Alec Miller, Jill Rathus and Marsha Linehan begin their text, *Dialectical Behavior Therapy With Suicidal Adolescents*, with a grim picture: Suicide is the third leading cause of death among 10- to

19-year-olds in the United States, nearly 20 percent of middle and high school age groups report having seriously considered suicide in the past year and 8.8 percent of adolescents (more than 1 million teenagers) have attempted suicide.

The numbers are truly staggering. Perhaps even worse, existing empirical literature provides little guidance about how to intervene because very little research exists on the effectiveness of either 1) treating adolescent suicidal behaviors by treating an underlying mental disorder or 2) treating adolescent suicidal behaviors directly. But once they've underscored the real and pressing need — and the woefully absent model for intervention — the authors offer a reason for hope. Through a well-articulated, keenly focused yet flexible approach, the authors develop a comprehensive and adaptable strategy for anyone working with adolescents who are experiencing multiple problems and struggling with suicidal ideation and behavior.

The early chapters of the book meticulously review research on suicidal individuals, explicate dialectical behavior therapy (DBT) and illustrate how DBT programs can be set up for adolescents and their families, with particular emphasis on alternating behavioral extremes that are termed dialectical dilemmas. While these chapters are essential, Chapter 10 is especially noteworthy. In it, Miller, Rathus and Linehan address how to adapt standard DBT skills training (mindfulness, emotion regulation, distress tolerance and interpersonal effectiveness) to the needs of adolescents and their families. Better yet, they introduce a new component of skills training, labeled “walking the middle path,” designed specifically for adolescents. The central focus in this new module is helping adolescents and their families find an effective balance between acceptance and change so they can resist alternating between extremes. The ultimate goal is a new way of experiencing the world in which opposing views can be considered and integrated into personally effective and balanced behaviors.

The real treasure of the book, however, is its three appendices. The first is a series of 30 mindfulness exercises for adoles-

cents. The exercises are simple, smart and developmentally appropriate ways to make what might otherwise seem like abstract concepts quite direct and immediate. The second appendix outlines the lecture and discussion points for clinicians teaching adolescents and their families about the middle path. These guides are excellent and, not surprisingly, written in an accessible, purposeful and reasonable tone. Finally, the third appendix offers reproducible handouts for the new module and, though intended for use with suicidal adolescents, might provide excellent preventative instruction for a much wider group of young people.

Miller, Rathus and Linehan's text represents a significant step forward in addressing the serious problem of adolescent suicide. More broadly, the text provides a model for how to bring the benefits of DBT to a more diverse audience and ought to be a must-read for anyone interested in the ongoing evolution of DBT.

Reviewed by Nona Wilson, associate professor of counseling and educational psychology at St. Cloud State University in Minnesota.

Therapeutic Communication: Developing Professional Skills

By Herschel Knapp, 2007, Sage Publications Inc., 285 pages, \$40.99 (paperback), ISBN 978-1-4129-3774-0



It is often difficult to find texts that devote comprehensive coverage of communication skills geared toward helping professionals, specifically those in training. Likewise, it can be a daunting

task to find an interactive text that provides a very practical and applicable approach to communication for practicum students. This book just might change that perspective, however.

Herschel Knapp's book on the role of communication within the helping professions is an excellent resource and class text for a practicum course in counseling. Knapp developed this volume as a resource for students and counselor educators to easily reference when learning about and practicing the skills necessary to initiate and maintain effective therapeutic relationships. His book addresses this complex topic by presenting these skills one at a time while utilizing an array of pragmatic, interactive activities to demonstrate proficiency required by practicum students.

Several components of this book make it a top-notch resource. First, Knapp provides a thorough reason or rationale for using specific skills in a therapeutic environment. For example, he cites validation as an important communication skill

necessary to “support the client by providing positive assurance that the client's feelings, actions and thoughts are appropriate per the client's unique situation and perspective” (p. 95). He then offers instances of potential interactions between a counselor and client to demonstrate use of this skill.

Second, there are suggestions that will help students and counselors looking for dialogue to use specific communication skills when appropriate. For instance, Knapp discusses “how important non-judgmental attitudes are” (p. 18) when students and counselors attempt to establish rapport with their clients. He notes that nonjudgmental attitudes can be communicated nonverbally, such as through inflection or vocal tone. Students and counselors must be intentional and accountable for their communication patterns, as these patterns are essential to the success of the helping process.

Knapp offers transcriptions of sessions with clients that provide both the counselor-in-training and the counselor educator strategies to engage in short-term communication role play exercises in the classroom. The author also reiterates the importance of balancing emotional dynamics that occur in counseling sessions by utilizing specific communication tools, such as communicating self-disclosure when the counselor recognizes transference is occurring or being self-aware of nonverbal communication during silence.

Overall, this is a very well-written and comprehensive text for graduate students in counseling as well as professional counselors looking for effective therapeutic communication skills. Counselor educators can use this text in practicum to foster a clinical environment in which students learn how to utilize and hone their professional therapeutic communication skills.

Reviewed by Christopher P. Roseman, assistant professor at the University of South Dakota.

Collateral Damage: The Psychological Consequences of America's War on Terrorism

Edited by Paul R. Kimmel and Chris E. Stout, 2006, Praeger Publishers, 203 pages, \$49.95 (hardback), ISBN 0-275-98826-0



This collection of research studies, done by a team of 15 psychologists, explores the negative psychological effects of the U.S. war on terrorism on Americans of all ages and ethnicities.

These studies include surveys, interviews, media analysis, observations and clinical assessments.

Each densely written chapter discusses a different aspect of the U.S. war on terrorism and identifies psychological repercussions, while offering suggestions for policy changes and educational curricula to potentially minimize these negative effects. The overuse of terror alerts, increased rhetorical framing by politicians and the media, and magnified in-group views of “us and them” (p. 13) are among topics this book explores.

The psychological effects discussed range from Americans' apparent willingness to have civil liberties reduced, public support of stricter immigration policies and increased support of military action. Heightened levels of hate crimes against people of Muslim and Arab origin are noted as well.

In one chapter, Rhoda Unger discusses a variety of studies conducted after 9/11. These studies demonstrate a relationship between perceived threat and fear for one's self-identified group and hostile responses to other groups and nations. The 17-fold increase in anti-Muslim hate crimes reported by the FBI in 2001, as compared with 2000, bear out this tragic dynamic (p. 25).

In another chapter, Bernice Lott investigates the effect of conformity pressures through the examination of negative responses to dissenting views of the Iraq war. These pressures potentially lead to “groupthink” (p. 70), which can be detrimental to independent decision-making and the democratic process.

The authors make many recommendations, such as increased educational programs emphasizing critical thinking and anti-bias curricula, promotion of positive intergroup relations at a cognitive level, a fuller range of noncoercive international policies and the need to desensationalize terrorism in the media.

This comprehensive view of the psychological effects of the war on terrorism is a valuable resource for counselor educators as well as counselors in all areas of expertise. The war on terrorism will be an important variable in the mental health of Americans for many years to come. This book compels the reader to become involved in helping to minimize the negative psychological effects through implementation of innovative programs. It also encourages counselors and others to bring informed, active voices to the discussion of these important issues.

Reviewed by Taylor E. O'Hara, a counselor education graduate student at Adams State College in Colorado. ■

Ruth Harper is the column coordinator for Resource Reviews. Submit reviews for consideration to Ruth.Harper@sdstate.edu.

Letters to the editor: ct@counseling.org

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(NBCC, Fall 2004)

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Third quarter ACA fiscal report

BY THELMA T. DALEY

In an effort to keep the American Counseling Association membership fully informed and simultaneously comply with Governing Council policy, quarterly fiscal reports are issued in *Counseling Today*. This quarterly report (summarizing Jan. 1-March 31) represents the third report for the fiscal year ending June 30, 2007.

The balance sheet presented with this report is intended to reflect ACA's financial position at a given point in time. This balance sheet gives a picture of the association's financial position as of March 31, 2007. As of March 31, ACA owned \$7,875,995 in assets. Of these assets, \$6,746,857 was in cash and investments.

On March 31, the association's liabilities included vendor fees of approximately \$622,690, staff salaries and benefits of \$444,415 and fees collected on behalf of related organizations of \$101,416. Member benefits to be fulfilled total \$3,428,056 and appear as a liability because ACA receives membership revenues annually while providing member benefits monthly.

As this balance sheet indicates, ACA's net worth on March 31 was \$3,279,418, indicating that the association remains financially healthy. However, efforts to

ensure the association's long-term stability must continue.

As of March 31, the association reported \$162,506 in excess revenues over expenses. ACA's revenues are more than \$297,000 higher than those reported last year. Expenses incurred through the third quarter of this fiscal year are approximately \$41,431 higher than those incurred last year. The ACA Financial Affairs Committee will continue to monitor revenues and expenditures on a monthly basis. ACA will continue its legislative activities and maintain efforts to provide increased programs and benefits to its members.

ACA's Financial Affairs Committee, in collaboration with the administrative staff and Governing Council, convenes monthly to evaluate the financial position of the association and to recommend pertinent action. Quarterly reports are provided to the membership via *Counseling Today*. If you have questions about this report or need clarification, please contact ACA Treasurer Thelma T. Daley by telephone at 410.542.0176 or via e-mail at ttd_1@msn.com. ■

Thelma T. Daley is the ACA treasurer for Fiscal Year 2007.

AMERICAN COUNSELING ASSOCIATION

BALANCE SHEET

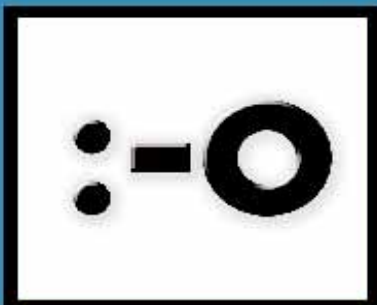
MARCH 31, 2007

ASSETS

Cash & Cash Equivalents	\$6,746,857
Accounts Receivable (net of allowance for doubtful accounts of \$39,734)	467,387
Prepaid Expenses	60,407
Deposits	15,398
Inventory	278,452
Fixed Assets (Net of Accum. Depr.)	307,494
Total Assets	\$7,875,995

LIABILITIES AND FUND BALANCE

LIABILITIES:	
Due to related organizations	101,416
Accounts Payable	622,690
Accrued Salaries, Annual Leave & Payroll Taxes	444,415
Deferred Revenues	3,428,056
Total Liabilities	4,596,577
FUND BALANCES:	
Unrestricted Fund Balances	(95,277)
Designated Fund Balances	3,212,139
Prior Period Adjustment	0
Retained Earnings	162,506
Total Fund Balance (Deficit)	3,279,418
Total Liabilities & Fund Balance (Deficit)	\$ 7,875,995



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3.	Atlantic Monthly	\$14.99	---	17	Ebony	\$11.00	---	53	Kiplinger's Retirement Report	\$14.99	---	78	Romans World	11	---
4.	Aviation History	\$9.99	---	18	Elle	\$7.00	---	54	Ladies Home Journal	\$0.49	---	79	Sawyer	14	---
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6.	Better Homes & Gardn	\$11.00	---	30	Esquire	\$2.30	---	55	Marie Claire	\$9.99	---	81	Shops	\$3.00	---
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18.	Cooking Digest	\$15.00	---	42	Harper's Bazaar	\$2.30	---	67	Outside (N)	\$0.00	---	93	US Weekly	\$9.00	---
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JUNE

NAMI National Convention
June 20-24
San Diego

The 2007 Annual National Alliance on Mental Illness Convention will be held at the Town and Country Resort and Convention Center. NAMI welcomes both members and nonmembers to attend its convention. NAMI bills itself as the nation's largest and most influential grassroots advocacy group working on behalf of both consumers and families. For more information, go to www.nami.org.

COMING EVENTS

AMHCA Annual Conference
July 26-28
New Orleans

The American Mental Health Counselors Association will hold its annual conference at the Hotel Monteleone in the French Quarter. The theme of the conference is "Growth Out of Adversity." The scheduled keynote address will be delivered by Donald Meichenbaum, founder of cognitive behavioral modification. Go to www.amhca.org for complete details and to register.

International Conference on Violence,
Abuse and Trauma
Sept. 15-20
San Diego

The 12th International Conference on Violence, Abuse and Trauma (formerly the International Conference on Family Violence) is a cost-effective, multidisciplinary conference that brings more than 1,500 people and agencies together in an effort to create violence- and abuse-free homes, communities and societies. The convention will be held at the Town and Country Resort and Convention Center. Specialized trainings and continuing education credits are available by attending the Affiliated Training Institutes. For additional information, call 858.623.2777 ext. 427, e-mail IVATConf@alliant.edu or visit www.ivatcenters.org/conference/index.html.

FYI

Stephen Freeman, head of the Department of Counseling at Texas A&M University-Commerce, has announced the creation of *The Journal of Graduate Student Scholarship in Counseling*, a national online, peer-reviewed professional journal devoted to showcasing the scholarship of graduate counseling students. Kathryn Oden and Chester Robinson will serve as coeditors for the journal, with the Editorial Board to include four to five current or retired faculty and seven to eight advanced doctoral students. As the students graduate, they will

become faculty representatives on the Editorial Board.

Selected doctoral students will have had training in research methods and statistics and must have completed at least half of their doctoral program. Faculty board members' reviews and comments will be shared with student Editorial Board members during the process to help them gain valuable insight into the peer-review process.

The journal is currently seeking nominations and applications for student board members. Students must submit a current vita, a sample manuscript and a current transcript of their graduate studies to Kathryn Oden, Assistant Professor, Texas A&M University-Commerce, Department of Counseling, Education North 202, Commerce, TX 75429-3011.

Alternately, students can e-mail the required materials to Kathy_Oden@tamu-commerce.edu or fax them to Oden's attention at 903.886.5780. The journal also seeks manuscript submissions from graduate-level counseling students. Submission guidelines are available at www.JGSSC.org.

Call for papers, manuscripts

The Family Journal is a journal published by the International Association of Marriage and Family Counselors, a division of the American Counseling Association. *The Family Journal* is soliciting manuscripts for a special issue on the topic of infidelity. This is a topic area that most couples therapists face, but which they are seldom prepared to handle.

The goal of this special issue will be to assemble a series of articles from practitioners in the field to share their expertise and experience in dealing with this often overwhelming issue. The scope of articles may range from specific treatment issues or populations related to infidelity, to methods of training family counselors to assess and treat couples during or following the disclosure of an infidelity. Please send all submissions or inquires via e-mail (preferably) to ppeluso@fau.edu, or send via U.S. mail to: Paul R. Peluso, Ph.D., Florida Atlantic University, Bldg. 47, Room 270, 777 Glades Rd., Boca Raton, FL 33498. The deadline for manuscripts is Sept. 1.

The Association for Gay, Lesbian and Bisexual Issues in Counseling, a division of the American Counseling Association, is inviting submissions for *The Journal of LGBT Issues in Counseling*. The intent of this quarterly journal is to publish articles relevant to working with sexual minorities and of interest to counselors, counselor educators and other counseling-related professionals who work across a diversity of fields, including in schools, mental health settings, family agencies and colleges and universities. The journal welcomes the submission of articles that reflect issues pertinent to the health of sexual minority individuals and communities. Articles

should focus in one of the following areas: (1) new research in the field of counseling, (2) a review of the literature that critically integrates previous work around a specific topic, (3) introduction of new techniques or innovation in service delivery within the counseling field or (4) theoretical or conceptual pieces that reflect new ideas or new ways of integrating previously held ideas.

All submissions should be prepared according to the guidelines of the most recent *Publication Manual of the American Psychological Association*. Generally, submissions should be no longer than 30 pages. However, AGLBIC will consider longer papers on a space-available basis. Manuscripts should be sent as attachments to the e-mail address below. All work should be done in Microsoft Word. Tables and figures should be used only when essential, and illustrations or graphs should be embedded in your manuscript at the appropriate place. Make sure to include author contact information, including phone and e-mail. If accepted for publication, final manuscripts should be publication-ready when submitted. It is the authors' responsibility to secure permission to use any copyrighted materials within their manuscripts. Indicate in the cover letter which of the four journal focus areas best fits your article.

It is expected that authors follow the most current *ACA Code of Ethics*. It should be understood that authors bear full responsibility for the accuracy of all references, quotations, tables, figures and the overall content of their article.

Submit articles to Ned Farley, editor, *The Journal of LGBT Issues in Counseling*, at nfarley@antiochsea.edu. Initial confirmation will be sent via e-mail. Also include all appropriate signed copies of the Manuscript Submission and Limited Copyright Transfer Form required by Haworth Press Inc. This form is available online at www.haworthpress.com/pdfs/Jmanuscript.pdf and should be mailed to Ned Farley, Ph.D., The Center for Programs in Psychology, Antioch University Seattle, 2326 Sixth Avenue, Seattle, WA 98121-1814.

The editorial board of *The Wisconsin Counseling Journal*, the journal of the Wisconsin Counseling Association, is seeking manuscripts for possible inclusion in the Fall 2007 volume.

The journal is focused on topics of interest to Wisconsin's counselors, including the following four areas:

- Innovative methods
- Theory and research
- Professional development
- Current issues affecting counseling and counselors

Individuals interested in submitting a manuscript should contact Mark Gillen at mark.gillen@uwrf.edu or 715.425.3890. Visit www.wicounseling.org for more information.

JADARA, the journal for Professionals Networking for Excellence in Service Delivery with Individuals who are Deaf and Hard of Hearing, is seeking manuscripts containing original scholarly research or practice in the field of deafness with school, community, clinical, social service or other related applications. Manuscripts must:

- Relate to deafness and be between 2,500 and 4,500 words
- Be prepared according to the *Publication Manual of the American Psychological Association*
- Be prepared in MS Word format and submitted to the editors via e-mail at dfeldman@mail.maconstate.edu
- Include an abstract of less than 100 words

Manuscripts should include keywords for the manuscript subject matter as well as all coauthors' names, titles and addresses, including e-mail addresses. Manuscripts under consideration by another periodical should not be submitted to *JADARA*.

Following preliminary review by the editors, manuscripts will be sent to members of the Editorial Review Board. Authors will be notified when manuscripts are selected for publication. Those not accepted will be returned for revision or rejected as unacceptable for the journal.

Multicultural Learning and Teaching is a new multidisciplinary international journal devoted to the education of people from multicultural backgrounds. Emphasis is placed on the interpretation of research literature and recommendations for the practice of multicultural education. Appropriate topics for articles include identification, assessment, labeling/categorization, placement and instruction of underachieving, at-risk, urban, rural, linguistically different or exceptional children, youth and adults with diverse multicultural life experiences and backgrounds.

Manuscripts on family or community-related services, legislation, litigation and professional preparation are also of interest. Additional information, including guidelines for authors, is available at www.mltonline.org.

Bulletin Board submission guidelines

Entries for the Bulletin Board must be submitted via e-mail to akennedy@counseling.org with "Bulletin Board" in the subject line. Paragraphs should be in a Word document, single-spaced, justified and Times font in black. Please provide a contact person with an e-mail address or phone number to call for more information. Do not send submissions with tables, tabs, bullet points, logos/letterhead, colors or uncommon fonts. Submissions are subject to editing. The rolling deadline is the 10th of every month by close of business, ET. ■

they were opening up to me. That seems like a pretty poor reward for trusting me. I still wonder what happened to each of them.

I also wonder what it is I fear in saying goodbye to clients. Do I fear relapse that will prove my ineffectiveness as a counselor? Do I fear the clients will question how I truly felt about them? Do I perhaps fear that clients will forget about me, thus proving my lack of importance? Is ambiguity really the root of my difficulty in endings, or is it something much deeper within?

Most of our professional struggles reflect our personal vulnerabilities, so I have spent time trying to understand what it is within me that fears goodbyes. In the process, I have reflected on some of the painful goodbyes I have endured. One of my earliest memories is the death of my beloved cat Midnight when I was in kindergarten. I remember my mom sitting on the bed as she woke me one morning and telling me, "Midnight has been hit by a car and is in heaven now." I still remember those exact words 23 years later, and I remember the way my heart ached as I stood watching my dad bury her in our garden. Perhaps that was the first time I understood that love hurts because, eventually, we have to say goodbye.

Last summer, a member of my doctoral cohort graduated and moved back to his home state. I respected him greatly

and had come to depend on him for his wise counsel and empathetic understanding. Whenever he walked in the door, I knew we were going to have a meaningful conversation and I would leave feeling edified. Knowing my tendency to avoid goodbyes and wanting him to know what he had meant to me, I hosted a going away party for him and his family. Afterward, just days before he moved home, I ran into him in the school parking lot. We discussed his travel plans and the possible job opportunities awaiting him. As we chatted, I knew this was most likely the last time I would see him unless our paths crossed at some future professional conference or gathering. I wanted to acknowledge this and say goodbye, but something kept me from doing so. Instead I rambled on and said everything but what I really wanted to say. When we parted with "see you later," I felt a sense of sadness and regret that I could not verbalize to him how he had impacted my life.

I still find the reason for my discomfort with goodbyes elusive. One hypothesis I have considered is that goodbyes tend to prove what I fear most: If I enter into deep relationships in which I allow another person to truly know me, I will end up hurt. Past betrayals have taught me this lesson. And so, because of this fear, I tend to maintain a safe distance from people. I connect but not too deeply. I am friendly but rarely offer my

full self, even though this is my desire. Perhaps that is why it is hard for me to say goodbye to clients. In these relationships, even though my clients never know much about me outside the role of counselor, I am more of the person I want to be — accepting, giving and courageous. For the time our relationship lasts, I experience parts of myself that I want to integrate into my personal life. During our times together, I am brave and open. Yet when they walk out of my office, my defenses re-emerge, and I maneuver personal relationships with caution.

Much has been written about the ways in which individuals review their lives as they approach death. It seems that death, when it is known to be close, asks us to reflect on the ways we have lived. I have always thought that if I live my days with the end in mind, I will be more productive, more intentional, more loving. Perhaps goodbyes challenge me to do the same. Perhaps I do not like the endings of relationships because they often highlight how I *wish* I had engaged other people. And, possibly, client goodbyes are difficult for me because they bring to mind all the goodbyes I have not done well in my personal life.

I am not quite certain about all the reasoning for my discomfort with goodbyes. What I do know is that I desperately want my clients to find healing and growth within our relationship together. I want to be a safe refuge, a person who

does not use my position to fulfill my own needs. I want to welcome clients with open arms when they arrive and release them with confident hope as they leave. I am also coming to understand that to cope with all the goodbyes that will occur in my professional career, I must challenge myself to grow in my personal relationships so that unresolved hurt and fear do not spill over into my professional relationships.

While I hope to grow in my understanding and management of termination, I never want to be untouched when a counseling goodbye occurs. However, I want these goodbyes to be healthy, full of celebration and hope, and focused solely on the client, not overshadowed by the pain of my own personal regrets in relationships. This is my charge and challenge as I continue to find my way through this often confusing and painful process of growth as a professional counselor. ■

Cheyenne Pease-Carter is a doctoral student in the counselor education program at the University of North Texas. Contact her at cpease-carter@coe.unt.edu.

Jeffrey A. Kottler is the column coordinator for Finding Your Way. Submit article ideas or manuscripts to jkottler@fullerton.edu.

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ple levels — local, state and national.” Gladding says the 20/20 delegates will continue to refine the consensus items as well as work toward agreement in other areas. “We are in our second year of hard work addressing problems that have beset (the counseling profession) for a long time,” he says. “We have 29 counseling entities at the table involved in this initiative, and there is not a political agenda or ego agenda in this group. We do not and may not agree on everything, but there is honesty and frank discourse going on. We will continue to work as long as needed. Counseling has had a divisive past. It is time to leave that behind so that we may serve others better and advocate for the profession as other helping professions do.”

Work groups

Work groups are focusing on each of the seven major “problem” areas. Each work group has written a report on its respective area and included recommended action steps to address the problem. All the 20/20 delegates began

reviewing these action steps at the ACA Convention in Detroit, where they started reaching consensus on items within each area.

After discussions have concluded, the 20/20 delegates will provide a document detailing each of the items on which they have reached consensus. Each delegate will then take that document back to their sponsoring organizations and ask them to sign off on it as a way of showing their support for a common vision for the counseling profession.

Currently, there is no deadline for the 20/20 delegates to reach consensus or present a final document. “Although we don’t want this to drag on too long, we’d rather do it right than to set specific timelines,” said ACA Chief Professional Officer David Kaplan, a member of the 20/20 Oversight Committee.

Counseling Today asked each of the individuals chairing one of the seven work groups to provide brief comments on both their focus area and the 20/20 initiative as a whole. (Note: Joy Whit-

man, who is chairing the work group on focusing on students and prospective students, was not available for comment before *Counseling Today’s* deadline. Whitman is the delegate for the Association for Gay, Lesbian and Bisexual Issues in Counseling.)

Lynn Linde, chair, work group on strengthening identity; delegate for ACA Southern Region

“Identity — who we are as a profession and what we do — underscores all aspects of our profession. It directs what we do as professional counselors and how we represent ourselves. Identity drives counselor certification, program accreditation, marketing, public relations and public policy issues, and outreach to stakeholders and other similar professions. It is also one of the factors that drives what services and resources the association offers members and potential members. Without a strong sense of our identity, what separates us from other professions? Identity is what makes us distinct, different and unique.

“All of the statements on which (the delegates reached consensus in this focus area) relate to the concept that professional counselors share core commonalities. There is a body of knowledge and skill shared by all professional counselors which is, or should be, reflected in our training programs and the accreditation of those programs. This united philosophy should be reinforced for students, who should be encouraged to be members of the professional associations. I believe agreement on these issues is an important step toward strengthening our identity in that they focus on those things that make us the same.

“The diversity around the room (among the 20/20 delegates) is a

strength but also makes it that much more difficult to come to agreement on issues. I was reminded what a huge task this really is. ... But I was also struck by the professionalism of the delegates and their commitment to working on this task. To paraphrase what Sam Gladding said at the end of the meeting (in Detroit), other groups have tackled this same issue, gotten to this point where it seemed too hard and walked away. We are committed to moving ahead. ... Once we come to agreement on these issues, we will be able to strategically move into the future and to go where we need to be as a united profession.”

Thomas Clawson, chair, work group on presenting ourselves as one profession; delegate for the National Board for Certified Counselors

“Professions seen by the public and legislators as unified receive stronger support. Counseling has so many groups with separate voices that we need to coalesce with an agenda of consensus. ... As in every work group, consensus items (were those that) seemed the least threatening. I believe this is where we must start: with issues that are important and that have universal appeal. We have so much that we inherently agree about that we need to focus in this arena first.

“I am hopeful that the process will continue so that we do not reach an artificial point of creating a report. I stated in the Detroit meeting that extending this process that has been making progress is a logical next step. The group of delegates is thoughtfully adding important perspectives to a needed dialogue. ... I am a veteran of four previous leadership gatherings to plan future strategies to enhance our profession. Such initiatives are part of dynam-

Continued on page 28

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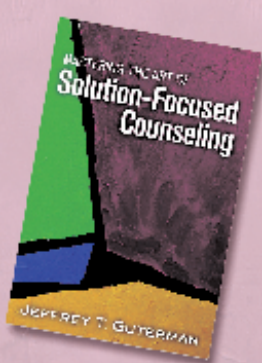
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Show professional pride with membership pins

American Counseling Association members can now wear their pride on their sleeves — or more accurately, on their lapels! ACA is honoring its 10-, 25-, 50-year and lifetime members by presenting them with beautiful, newly designed commemorative ACA membership pins, accompanied by a note from ACA President Marie A. Wakefield.

ACA will send this symbol of recognition as soon as members who hit these milestone membership anniversaries renew for their anniversary year. There is no need to call ACA Member Services to receive your anniversary pin.

ACA has also designed a general membership pin, which debuted at the ACA Convention in Detroit. The pins are now available for order online in the bookstore section of ACA’s website (www.counseling.org) for \$5.

Both the anniversary pins and the general membership pins are gold-tone metal with a clasp back and prominently feature the new ACA logo.

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Consensus items

The delegates working on the 20/20: A Vision for the Future of Counseling initiative reached consensus on the following items at the American Counseling Association Convention in Detroit. The delegates will continue to refine the consensus items as well as work on other items they have yet to reach agreement on or discuss. The counseling community at large is encouraged to provide feedback on the current consensus items by going to the ACA website at www.counseling.org/2020feedback.

Strengthening identity

- The counseling profession should develop a paradigm that identifies the core commonalities in the profession.
- Identify through research the body of core knowledge and skills shared by all counselors. A work group will be identified and charged with finding the research that identifies the core knowledge and skills shared by all counselors. This investigation shall include an analysis of counselor education programs and relevant publications and a survey of counseling professionals. **Rationale:** The philosophy of a unified identity lends itself to a body of core knowledge and skills. Once these are identified, or reaffirmed, then the common body of knowledge and skills can form the discourse to unite the profession.
- Counselor education programs shall reflect a philosophy that unifies professional counselors who share a body of core knowledge and skills. Our unified identity is that we are one profession but, as a result of the areas in which we practice, we may have specialty training.
- Reinforce for students that the counseling profession is a single profession composed of counselors with specialized areas of training. **Rationale:** As in other mental health professions, students developing their identities as counseling professionals need to begin identifying with a unified profession before graduation in order to maintain this philosophy as practicing professionals.
- The accreditation of counseling programs must reflect one identity.

Presenting ourselves as one profession

- Investigate the best structure for the future of counseling.
- Develop a process to create a working group for the purpose of

creating a common counselor identification that would allow for additional designations of special interests and specialty practices. Consider combining current specialties or designations to four areas of concerns. **Rationale:** Professional associations of counseling should consider their size and vitality with the intention to combine some groups. Specialties might be designated according to setting (e.g., school), practice (e.g., substance abuse), societal group (e.g., geriatric) or modality of practitioners (e.g., group).

- Unify the profession while respecting our specialties.

Improving public perception/recognition and advocating for professional issues

- Present a clear definition of counseling to the public. **Rationale:** We must first start with ourselves. An essential first step is to get counselors on the same page as to the definitions of a professional counselor and the counseling profession. In addition to establishing agreement within the profession, we must work toward reflecting this in our licensing standards. Current structure of professional organizations promotes fragmentation rather than unity. Once agreement is achieved, we can then through strategic large-scale marketing and the availability of the proper tools promote the profession to the public. The current level of marketing has not seemed effective in making counselor and counseling “household” words. We must increase our visibility.
- Unify for a stronger, more defined voice at the state and federal levels.
- Merge one definition of counselor across the different states. **Rationale:** Uniform definitions will aid in presenting a more uniform profession to the public, managed care companies and to legislators. Additionally, uniform curricular and licensing standards will enhance counselor portability and enhance recognition/participation of counselors within third-party reimbursement and state/federally funded programs.
- Unify to work with managed health care to benefit all counselors. **Rationale:** As key gatekeepers in access to qualified professionals, we must work more closely with the insurance indus-

try. They must understand who we are, what we do and the outcomes associated with counseling interventions. We must illustrate the similarities and differences between the counseling profession and other mental health professionals.

Creating licensure portability

- Establish common counselor preparation standards. **Rationale:** Preparation standards move the profession forward. CACREP and CORE can contribute toward acceptance of counselors as legislated providers in federally funded programs and the unification of training standards through a bold position of a single training model. This model would be similar to those already used by our sister professions of psychology (APA), social work (NASW) and marriage and family (AAMFT).

Expanding and promoting the research base of professional counseling

- Encourage interest in research by practitioners and students.
- Emphasize research on counseling methods currently used and expand use and emphasis upon both qualitative and quantitative research. **Rationale:** Much of the research in counseling has been direct outcome research. Through direct outcome research, counselors would be in a better position to posit “best practices” in the field. At this time, many of the “best practices” are dictated to counselors by mental health professions other than counseling.

Focusing on students and prospective students

- Work with undergrads and undergrad programs.
- Highlight the value and promote mentor/practicum/internship relationships.
- Endorse/require student involvement in professional counseling associations.

Promoting client welfare and advocacy

- Offer ongoing education and training for counselors on client and student advocacy using, for example, the ACA Advocacy Competencies. **Rationale:** Attending to client welfare and advocacy is one primary focus of a helping profession, therefore training

in how to promote and advocate for our clients becomes an essential skill for counselors. Our profession should continually focus on providing professional development in the “how” for advocacy. For example, the Advocacy Competencies could be a foundation for this training (Lewis, House, Arnold & Toporek, 2005).

- Identify one advocacy project that would be completed annually within a selected community as a way to strengthen our counseling identity, present ourselves as one profession and improve public perception. **Rationale:** This yearly project would move us from talking about advocacy to demonstrating how counselors can produce positive effects on social issues.
- Promote optimum health and wellness for those served as the ultimate goals of all counseling interventions.
- Encourage evidenced-based, ethical practice as the foundation for counselors in training and professional counselors’ interventions across settings and populations served. **Rationale (also applies to previous item):** These bullet points are in line with *The Counseling Profession as Advocates for Optimum Health and Wellness*, which was adopted by the Governing Council of the American Association for Counseling and Development, now the American Counseling Association, July 13, 1989. At that time, all divisions of ACA were directly affiliated and endorsed this position. Wellness models based in counseling have been the foundation for significant research that helps to form evidence-based practice in counseling (e.g., Myers & Sweeney, 2005). Promoting wellness in all its dimensions — within families, schools, business, industry, government and the community at large — therefore draws upon the unique history and philosophical roots of counseling as a profession. As other disciplines, business, government and others now recognize the merits of wellness and prevention as national policy and good business, professional counselors are needed to help with its implementation in all settings for the benefit of all people. ■

ic, growing professions. We are setting yet another path for future goals and cementing past successes to develop a strong, forward-moving profession."

Caroline Wilde, chair, work group on improving public perception/recognition and advocating for professional issues; delegate for the Ameri-

can Rehabilitation Counseling Association

"In order for counseling to thrive, we must help the general public and legislators understand what counseling is, who we are, what we do, what our academic preparation is, etc. We have to advocate for ourselves, as no one else is going to. Visibility and perception are key to

social acceptance of counseling as a household word and funding support.

"I think, in general, consensus was reached (on four items from this work group) because these items reflect the core values that unite us as counselors and promote our profession. These items are aspirational in nature and reflect the mission of the

20/20 effort in general. It is possible that once articulated in more concrete terms, consensus could be harder to reach.

"I am honored to be a part of such an important task. It is essential to the health of our profession. I witnessed a great amount of commitment to the profession and respect for diversity of ideas even when it was

clear that not everyone agreed. ... I think that we need to focus the time ahead on tackling those areas in which there was disagreement or lack of consensus. This is historically where things have come to a standstill. This will require a 'seeking to understand' mentality and then exploration of ways to bridge differences, a decision to accept unresolved differences or possibly even a parting of ways. ... Having said that, I was impressed by the commitment to the 20/20 mission. I believe all the members demonstrated great passion for the counseling profession, respect for one another's perspectives and that they are committed to asking and answering the hard questions."

J. Barry Mascari, chair, work group on creating licensure portability; delegate for American Association of State Counseling Boards; member of 20/20 Oversight Committee

"Portability is important for two reasons. First, it makes new graduates seamless in terms of the job market, and, second, it is a reflection of the end product of professional preparation. Unfortunately, everything that is unresolved in counselor preparation standards seems to be reflected in licensing standards.

"I am not exactly sure why this item ("Establish common counselor preparation standards") received consensus. I can only speculate that there is recognition among the delegates that we need to come to more clarity on training if we are to be seen as a separate profession from psychology and social work. I also suspect that since these (20/20 delegates) are people with strong counselor identity ... they recognize the value in the CACREP standards envisioned a long time ago. We have studied the history of our profession and are aware of the struggles to achieve licensure. Counseling has such a rich history, and looking at how far it has come, the delegates might see anything else as taking a step backward.

"There is strength in numbers as a profession, and I still believe that despite our specialties and different work settings, it is in our collective best interests to be seen as one profession — period. Others may feel differently, so we have work to do. ... I know there have been several initiatives like this before, none of which continued through to conclusion and implementation. For various reasons, they ended without achieving the broad objectives. The

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20/20 delegates seem to have a different feel as a group, almost a sense that what we are doing transcends our own interests. Many times we have remarked that the stars have lined up at this time in some unusual constellation. It may be our time to address the previously unaddressable.

"This group represents some of the best, most visionary thinkers in our field. If we cannot collectively figure out how to jump some of the hurdles that are preventing the counseling profession from reaching its potential and expanding the public's recognition of our value, no one can. ... I love the counseling profession and certainly would like to see us do something bold and visionary — something that will secure a healthy future for the new counselors who follow us."

Bret Hendricks, chair, work group on expanding and promoting the research base of professional counseling; delegate for the International Association of Marriage and Family Counselors

"We believe that research is vital to the counseling profession because research defines the profession. Counseling is a relatively new profession and is evolving constantly. Outcome research is necessary for counseling to continue its evolution. Professional counselors do not need to look to persons in other mental health specialties to define 'best practices' for counselors. Counselors need to define best practices for the counseling profession. Research by counselors must be encouraged so that the counseling profession may continue to grow and flourish.

"We were able to reach consensus easily because we all agree that effective research is necessary for the counseling profession to maintain and gain even more credibility. As a profession, counseling is based upon the premises of human development and strength development. The counseling profession is based on a positive growth model instead of a deficit model. As a committee, we agree that counseling research needs to fulfill a two-pronged mission. First, we need to educate the public about what counseling has to offer society as a whole. Second, we need to consistently deliver the message to professional counselors and the public that counseling interventions are effective. We must present a unified professional stance to the public while respecting diversity within the profession.

"The 20/20 project encourages proactive strategic planning for the counseling profession. We must look forward to encourage growth of the profession and define goals for the future. As a dynamic profession, we need to collectively combine our visions of what counseling is and what it can be so that future generations may benefit from the foundations that we are establishing today."

Rebecca Schumacher, chair, work group on promoting client welfare and advocacy; delegate for the Association for Specialists in Group Work

"Client welfare and advocacy is a primary focus of our helping profession. ... One particular point (of consensus) that is significant: 'Encourage evidenced-based, ethical practice as the foundation for counselors in training and profes-

sional counselors' interventions across settings and populations served.' The significance of this item is 'evidence-based practice.' With accountability and outcomes critical in these times, this item is of particular significance.

"The importance of 20/20 is that our profession, which has multiple specifiable interests, is dialoguing with one another and sharing perspectives of the

profession. This can only increase our awareness and sensitivity to the diversity within our profession." ■

Jonathan Rollins is the editor-in-chief of *Counseling Today*. Contact him at jrollins@counseling.org.

Letters to the editor: ct@counseling.org

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Relocation tips for counselors

It's summer. Time for rising temperatures, long vacations and, for many families across the United States, relocation to a new home. If relocating to a different state is in your summer plans, do you know how to effectively make the move?

Review your plan for counselor incapacitation or termination of practice

If your relocation causes you to terminate a practice, you'll want to have a good exit plan in place. As stated in the 2005 *ACA Code of Ethics* in Standard C.2.h., "When counselors leave a practice, they follow a prepared plan for transfer of clients and files. Counselors prepare and disseminate to an identified colleague or 'records custodian' a plan for the transfer of clients and files in the case of their incapacitation, death or termination of practice."

Determine where you stand on licensure

Just as "location, location, location" is the battle cry for real estate moguls, "licensure, licensure, licensure" is the bottom line for counselors. If relocation is prompted by your own career move, then it's likely that you already know where you stand in regard to licensure in your new location. But if you are the trailing partner in a job transition, the first item on your professional to-do list should be to

contact the state licensure authority to begin the process of establishing a license to practice.

In most states, professional counselors are licensed by a state board of professional licensure (which may have other names), while school counselors are governed by the state board of education. The American Counseling Association has developed some helpful publications that sort out the requirements for licensure: *Licensure Requirements for Professional Counselors: A State-by-State Report and A Guide to State Laws and Regulations on Professional School Counseling*. Both are available for a nominal fee through ACA's publications department. In addition, much of this information is available on ACA's website at www.counseling.org/Counselors/LicensureAndCert.aspx.

Fill in the gaps if necessary

If you're moving to a state that requires more classroom or supervision hours for licensure than you have earned, you'll need to make up the difference. The state licensure authority should have a list of approved supervisors available on request (a fee may be charged), and you can access a directory of accredited programs at the CACREP website (www.cacrep.org) for the additional coursework you

need to complete. **Note:** Completing a 60-semester-hour CACREP-accredited program in mental health counseling would satisfy the current academic requirements in most states that have licensure.

Identify organizations in your area that provide counseling services

The Substance Abuse and Mental Health Services Administration has a website (<http://mentalhealth.samhsa.gov>) that is useful as a sourcing tool for counseling positions. In the top right-hand column of SAMHSA's home page, click on the box titled "Services Locator" (look for the map of the United States). This takes you to the "Mental Health Services Locator," which provides a pop-up list of all U.S. states and territories.

Select a state or territory, and you will receive a list of mental health resources for your selection: lists of mental health facilities, a directory of mental health services, a state resource guide, suicide prevention programs ... in short, a directory of agencies and private practices that provide mental health services. That list may be sorted by city.

So, let's say you have just moved to Phoenix. You can click on Arizona, choose Phoenix, then scroll through five pages of mental health care

Share your insights

What does "dress for success" mean in your office in these days of casual attire? If you have comments that you'd like to share for a future article in "Your Counseling Career," e-mail Amy Reece Connelly at acacareers@counseling.org.

providers in that city. Arm yourself with a map (or knowledge of the local geography), and you can augment your list with providers in surrounding communities.

This is the beginning of a prospect list. While it may not be comprehensive, if you combine these findings with those in the Yellow Pages, United Way agency listings and local chamber of commerce directory, it's a good start for tapping into the mental health community of a specific geographic area.

Ladies and gentlemen, start your networking!

Before you even settle into your new community, you can begin the networking process via telephone and e-mail. Contact mental health professionals in the area and tap into information about the employment situation there. You may even uncover an opportunity that hasn't yet been advertised.

Even if you don't plan to relocate, check out www.aascb.org

The American Association of State Counseling Boards has

been working on the issue of licensure portability for counselors. On the website, you can learn more about the intricacies of licensure portability, including the many variances from state to state that can sometimes make it difficult to establish licensure when relocating. You can also download an application to add your credentials to the National Credentials Registry. Inclusion in the database will certify your credentials (education and supervision) and safeguard the information for future use.

These guidelines should get you moving in the right direction after you determine that relocation is in your future. Moving your personal belongings and establishing Internet service is up to you. ■

Amy Reece Connelly is the manager of ACA Career Services. E-mail questions to her at acacareers@counseling.org. Telephone consultation is available to ACA members by appointment.

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C-AHEAD announces special journal issue on wellness

*Submitted by Colette Dollarhide
Dollarhide.1@osu.edu*

The Counseling Association for Humanistic Education and Development is pleased to announce a special issue of *The Journal for Humanistic Counseling, Education and Development* devoted to counselor wellness. Titled "Toward a Culture of Counselor Wellness," the special issue features an introduction by Gerard Lawson, Elizabeth Venart, Richard J. Hazler and Jeffrey A. Kottler, and contains the following articles:

- "Counselor Wellness and Impairment: A National Survey" by Gerard Lawson
- "Keeping Ourselves Well: Strategies for Promoting and Maintaining Counselor Wellness" by Paige N. Cummins, Linda Massey and Anita Jones
- "What Individual Counselors Can Do to Sustain Wellness" by Elizabeth Venart, Sonya Vassos and Heather Pitcher-Heft
- "Spirituality and Counselor Wellness" by Craig Cashwell, D. Paige Bentley and Amy Bigbee
- "Wellness Among African American Counselors" by Norma L. Day-Vines and Cheryl Holcomb-McCoy
- "Wellness in School and Mental Health Systems: Organizational Influences" by Mark E. Young and Glenn W. Lambie
- "Tapping Into the Wellspring of Wellness" by Samuel T. Gladding

In addition, a yearly feature of the journal will be designed to address important issues of contemporary humanistic counseling and education. For the Fall 2008 issue, a special section will be devoted to examining "Strength-based Counseling Across Settings." A call for proposals will be issued this summer.

ARCA's 50th anniversary conference fast approaching

*Submitted by Irmo Marini
imarini@utpa.edu*

The American Rehabilitation Counseling Association Board has been busy preparing for its 50th anniversary educational training conference. The conference will be held in Tampa Bay, Fla., Nov. 8-10, with a free preconference disaster training workshop included in your main conference registration fee. An outstanding slate of sessions is set, with four breakout sessions concurrently and plenty of options from which members can choose.

With the low cost of registration and five-star hotel accommodations, plus

plenty to do within walking distance of the Hilton, this promises to be an excellent return to ARCA's stand-alone conference. Full details for registration and hotel bookings are available both on the ARCA website (www.arcaweb.org) and in *The Rehabilitation Counseling Bulletin*.

The ARCA Board is also exploring various venues for members to obtain continuing education units and exploring video stream sessions, downloading audio and/or video presentations on iPods, and downloading presentations to your computer with your credit card to watch at your leisure.

In other news, ARCA reps to the Council on Rehabilitation Education (Dennis Maki) and CORE Standards (Irmo Marini) will have their terms end in July. Mark Stebnicki and Michelle

Pointer, respectively, will replace them for three-year terms. A special thank you on behalf of ARCA is extended to Dennis Maki for once again donating the royalties from his book. This year, he specifically requested that the proceeds go to the Charlene Kampfe fund to financially assist students and student chapters. Finally, ARCA would like to thank Jan La Forge as she rotates off the board after having served three years.

We look forward to seeing you all in Tampa Bay. Strength in numbers.

ASERVIC bids farewell to editor, offers conference update

*Submitted by E.H. Mike Robinson III
erobinso@mail.ucf.edu*

It is difficult to believe that almost a year has flown by since I started doing this news column. It has truly been a

pleasure to serve the Association for Spiritual, Ethical and Religious Values in Counseling, an organization that speaks to the heart and soul of counseling.

I would like to publicly thank Suzanne Hamilton. The next issue of the ASERVIC newsletter will be her last issue as editor. Please take time to send her a note of appreciation. The newsletter has been outstanding under her watch. Communication is the lifeblood of an organization, and the newsletter is our primary vehicle for getting information to our members. Suzanne has consistently prodded us all to get that information to her so she can get it to the readers. Thank you, Suzanne!

An ASERVIC Conference update:
With Cheri Smith and Judy Miranti

Continued on page 43

Tired of playing the same old games?

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We would then discuss the clip and compare it to the PowerPoint presentation, which was particularly useful for students who learned by talking. Students who learned best experientially received the greatest benefit from practical follow-up exercises that challenged them to apply their lives and circumstances to the lesson.

The best model for imparting information seemed to be one that used wide-ranging techniques. We've all experienced teachers who lectured for three straight hours or had a PowerPoint presentation that included 500 slides. Look around those classrooms, and you will find students sleeping with their eyes open, listening to their iPods, reading the school newspaper or text messaging their friends. I wanted to do my best to avoid this at all costs!

Maintain composure

Prepare yourself in advance for things to go wrong! How well do you recover from the unexpected? Students would ask me questions for which I had no answer, challenge me on their grades or show up an

hour late for class and still expect full credit for the day. I learned not to get shaken by unforeseen circumstances, such as the time I forgot my Zip drive, which held my complete PowerPoint lecture. My only choices were to either ad lib an entire lesson plan or admit that I had not acted as responsibly as I could have. Learning to preserve my poise and sense of dignity in the face of this discord was a huge new learning task.

Another unexpected situation occurred when students wanted to be more than students to me. There is room for transference and countertransference in the student-teacher relationship, just as there is in the client-counselor milieu. I had to learn to balance distance and closeness with students, as I do with clients. It takes conscious effort not to become more invested in the students' education than they are themselves, while at the same time maintaining concern, support and obligation. Some students also wanted to extend the boundaries from teacher to friend. But creating multiple relationships with students is unethical because, as a

teacher, you need to evaluate them as impartially and objectively as possible. How will you react when one of your students asks for your phone number in hopes that you can hang out (or even go on a date)? I believe in the motto put forth by the Boy Scouts: Prepare for the worst, but expect the best.

Continual self-assessment

I constantly asked myself whether the students were getting the best class and teacher possible. Sometimes things just didn't go as expected, so flexibility became key when part of the lesson plan wasn't working and change was needed. Becoming rigid or lazy can also make us uncompromising and sloppy.

At the end of each semester, students completed evaluations that assessed their satisfaction with me as a teacher, as well as the class content and assignments. Student comments were great in helping me modify areas that needed adjustment. The TAs were also useful as sounding boards. Many were former students willing to express explicitly which parts of the class they felt were not

as effective as they could have been. My head still swells with ideas of how I could have improved those classes even further.

Stay motivated

There were many times I cursed the day a class roster was assigned. Sometimes I felt that no one was listening and the students were just there to get a grade, not to learn. In some cases, this was true, but you can't let those students turn you off from believing that others want everything they can get out of the class. Sometimes it was a struggle not to become jaded and lose the excitement for teaching. I knew I couldn't reach all the students, but there were always those who truly wanted to be there. Some of these students would even take the lessons and share them with peers, friends and family. Only by believing in what I was teaching were others likely to believe in it as well.

Reflecting on the four most stressful semesters of my graduate school career, I wish I had taken more time to enjoy myself. At the very least, the hammy actress in me should

have reveled in the fact that I had a somewhat captive audience to perform for every week.

Teaching that class provided something very special: a chance to stop being a counselor and start becoming a counselor educator. I am so grateful for that chance to increase my repertoire of skills and broaden my counselor identity. These lessons learned should follow me into all my future endeavors, which I hope will include teaching again. I will never forget where it all began: Classroom 260. Maybe they will help you on your professional journey as well. ■

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Letters to the editor: ct@counseling.org



Written and compiled by
Scott Barstow, Christopher
Campbell and Peter Atlee

ACA working in support of House parity legislation

The American Counseling Association is helping coordinate coalition efforts in support of legislation before the House of Representatives to establish parity of insurance coverage for mental health and addictive disorder treatment. H.R. 1424, the Paul Wellstone Mental Health and Addiction Equity Act, would prohibit health plans that cover more than 50 employees from covering mental health and addictive disorder treatments differently than general medical services.

The bill would not require health plans to offer mental health coverage, but would require those that do to provide coverage in an equitable manner, using treatment limitations

that are no more restrictive than those applied to substantially all comparable medical and surgical benefits covered by the plan. Health plans would be required to cover the same range of mental illnesses and addiction disorders covered by the federal employee health plan used by members of Congress. Unlike a similar parity bill before the Senate, S. 558, the House parity bill would not supersede any state law that provides consumers with stronger protections, benefits, rights or remedies.

On May 2, Reps. Patrick Kennedy (D-R.I.) and Jim Ramstad (R-Minn.), the sponsors of H.R. 1424, joined other representatives at a press conference outside the Cannon House Office Building to address the importance of enacting the legislation. Among those speaking in support of the legislation was House Speaker Nancy Pelosi (D-Calif.). Said Kennedy, "This is a public health crisis that in some way impacts every family in America. It's time to break down the barriers to good mental health and addiction treatment." Added Ramstad, "This is not just another public policy issue. This is a life-or-death issue for millions of Americans."

ACA is working with other mental health and addiction advocacy organizations in support of H.R. 1424. Although the bill is supported by the House leadership and currently has 267 cosponsors (more than half the membership of the House of Representatives), supporters are concerned that attempts will be made to weaken or stall the legislation during committee consideration. Failure to pass the legislation this year would push its consideration into an election year, complicating its chances for enactment.

ACA members are encouraged to contact their House members to ask them to pass H.R. 1424 as introduced, without the adoption of any weakening amendments. For more information, contact Scott Barstow with ACA at 800.347.6647 ext. 234 or via e-mail at sbarstow@counseling.org. Or go to ACA's websites at www.counseling.org/publicpolicy and <http://capwiz.com/counseling>.

Counselor TRICARE provision clears its first hurdle in House

On May 11, the House Armed Services Committee approved H.R. 1585, its version of legislation to authorize defense

spending for Fiscal Year 2008, including language to establish independent practice authority for licensed TRICARE mental health counselors. The legislation next goes to the House floor, where it is expected to pass. This would mark the third year in a row that the House has approved language to remove the physician referral and supervision requirement for counselors' services under TRICARE, the health care program for U.S. service members and their families.

Senate Armed Services Committee staff and the Department of Defense continue to oppose removing the physician referral and supervision requirement for outpatient psychotherapy services provided by licensed TRICARE mental health counselors. ACA met with committee staff earlier this year in a fruitless attempt to change their position. Given the staff's opposition, removal of the referral and supervision requirement will occur only if a majority of senators are convinced to approve an amendment within the Senate Armed Services Committee or on the Senate floor, or during the House-Senate conference negotiations on the defense authorization bill later this

year. Consequently, ACA and the American Mental Health Counselors Association have been making lobbying visits to as many Senate offices as possible, focusing primarily on members of the Senate Armed Services Committee.

More information on this issue will be included in next month's issue of *Counseling Today*, as Senate action on the FY 2008 defense authorization bill was expected by the end of May.

Another important upcoming deadline is in June, when the Department of Defense Mental Health Task Force is scheduled to release its report on improving mental health care for service members. The task force's report is expected to call for significant changes to outdated TRICARE policies and procedures, while stressing the importance of giving service members easier access to mental health services. Consequently, the report should lend additional support to ACA's calls to remove the physician referral and supervision requirement. ■

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gic planning or team building ought to consider the traditional group stages set forth by Bruce Tuckman and Mary Ann Jensen: forming, storming, norming, performing and adjourning. "Even with management teams who already work together in an office, there will be a forming stage when you're helping them look at team building — getting-acquainted skills, goal setting and organizing. And those are typically counseling issues," he says.

Hayes agrees that counselors are in a unique position to help corporate groups reach their goals. "We have two major skill sets," she says. "One is understanding human development — understanding the people inside the structure of the groups and how each of them is changing over time. The other piece is group dynamics — stages of groups, approximating leadership styles, enabling those groups to reach their full potential."

Counselors should promote their advantageous understanding of group relations when courting business clients. "I feel almost smug that I accidentally have the best skill set that I could have to do this work," Hayes says. "I look at the people from an MBA background and think, sure, they know how to read an annual report better than I do, but they don't have that human

development/group dynamics notion of what it is to work in an organization. You gain so many skills in your training as a counselor. You match those with what I think are the natural instincts people who go into our field tend to have anyway, and you have a pretty darn good combination for understanding problems quickly."

The business of businesses

Gary Williams and Anita Neuer, both ACA members, founded WorkLife Consulting in Birmingham, Ala., a few years ago after tax records revealed that much of their private practice counseling workload included business consultation with groups. They note that the pay is better for consulting, and both agree that diversifying into corporate counseling has been both exciting and rejuvenating. "I love counseling work, I really do," Williams says, "but I find it's a wonderful diversion to get out of the office and really problem-solve in a very different way than you do in the therapist's chair."

Their consultation work ranges from sitting in as group process observers during staff meetings to leading multi-day corporate retreats. "When we are doing consultation with a management team, we start out as the group leaders, and by the end of our work, we try to

shift that responsibility back to whoever is supposed to have it," Neuer says. "We participate by doing the group leadership techniques of process observing and keeping them in the here and now." Neuer says she and Williams often model the dual roles of "content facilitator" and "process observer" and explain their approach to help teach effective group strategy.

Preparing for a weekend management team workshop, Williams notes that he and Neuer must pay close attention to the mix of information and experiential process to hold the clients' interest. In contrast to a personal retreat that a therapeutic client might take, corporate retreats may include less-than-enthusiastic participants, intricate power differentials and lofty expectations from upper executives.

"The process of planning meaningful activities over a two-day period takes an incredible amount of creativity and planning to engage that many people for that period of time," Williams says. "I enjoy that process, but it's challenging because with those types of people, if they for a second think that you are talking about fluff, they will disengage immediately. It has to be a good mix of fun, entertainment, contests, but where active learning is taking place all the time."

The two also have developed a curriculum to teach management supervision to new managers. It taps into the business environment's appreciation of didactic learning. "The curriculum is loaded with counseling skills and even counseling theories, but we don't frame it that way," Williams explains. They may teach behavioral theories to help clients understand how decisions are made, how to work through conflict resolution or even developmental theories that can help managers interpret the motivations of their employees.

"We don't usually tell them that we're teaching a counseling theory, but that's what we're doing, and it works," Neuer says. "It has really helped to show managers that they can do other things than just fire people, which is exactly what they're used to doing. We help them see that if they continue to fire people, they will continue to have a weak team. We teach group stages — forming, norming, storming — to show that if they continue to fire people and their turnover is always high, they will always have a new group and can never really be productive."

Pricing these services is key to establishing credibility in the corporate environment, but this is a task many counselors find difficult. Williams recalls an

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early corporate client paying the bill and then requesting a meeting to talk with the two partners. "He said, 'You are so out of line with your pricing. It's a joke what you're charging!' But we didn't know (we were underpricing our services). He was absolutely right. We changed our fee structure, and suddenly we got more business."

Today, Williams jokes that whenever a corporate client asks about their fee, he lets Neuer handle the question. "Companies expect to pay at least \$250 an hour for one person, and counselors who typically charge \$60 a session think they can't charge that much money," Neuer says. "But if you underprice it, the perception is that it's undervalued and must not be worth it. It's much easier to start out high and back off a little bit rather than try to increase your fees after being too low. That's been a challenge for us. If either of us was better at planning, we might have handled that earlier on."

Neuer and Williams emphasize the importance of remembering traditional ethical guidelines when working in a corporate environment. "You should not do therapeutic counseling in an organization. Not at all," Williams says. "People do it, and some of them are very good, but some of them don't know the line. They go into an organization to do consulting work and then find themselves up to their necks in therapy with individual people. It's a great way to get sued and lose credibility."

Neuer agrees: "We are doing business consultation with 50 people from one company. If any person on that team thought they needed marriage counseling, while we each do that work, we absolutely would not do it for them, but refer them out to another colleague."

Creating credibility

While the parallels between counseling skills and corporate consulting may seem obvious, success depends on careful planning, as traditional group counseling techniques often need modification to be accepted by a business client.

"Group skills really are easily transferable into team development and management in a business setting. But it's the way that it's done that dictates success," Neuer advises. "If we start off sounding like touchy-feely little counselors, corporations will not listen. You start by helping them talk about results. Instead of asking, 'How does it make you feel that you have this conflict on the team?' you say something like, 'How is the conflict negatively affecting your bottom line?' You get them thinking in their own terms. That's how you establish credibility, and that's how you start the work."

Counselors who are approaching businesses for consultation opportunities should understand that their role will be very different from that in a traditional counseling relationship, according to

Neuer and Williams. "The way that you establish credibility in a first session with a counseling client is by really demonstrating those core counseling skills — active listening, congruence, empathy," Neuer says. "Conversely, in a first session with a business client, credibility is established by the questions that you ask — do you ask good questions or not? If you ask the right questions, they become aware of how much they need you. They need you to be the expert to tell them how you're going to go about fixing it. They don't need you to join with them and collaborate on how you're going to approach the problem, which is what you do in individual counseling."

Williams recommends becoming well-informed about a company's business, including the business climate, language and competition, before beginning the consultation, and then interviewing the potential client first rather than allowing the client to interview you. "You ask the questions and assume a bit of a leadership role right away," he says. "That's really what they want you there for, but that's a big shift for counselors. Counselors are more likely to sit back and let them talk for a while, but that's not going to work in this environment."

Kormanski agrees that the transition into corporate work requires different skills. "One of the most important points I like to make with counselors is that even though they have the skill set to work with corporations, they don't necessarily have the experience," he says. "First of all, you speak a different language. A counseling language is not a business language. It's really like going into another country that doesn't speak English and telling people how to do things. We know that all disciplines have their own vocabulary, and when you get caught up in more than one, you have to think very carefully. People who really want to use this stuff in a business setting have to go out and get some business experience, maybe a couple short courses on management or organizational development. They need to have something to get them familiar with the business world, and it would help to have some practical experience."

Hayes jokes that "you have to be old" to do this work well. "You will have trouble getting into the senior level of management work. They're really looking for some gray hair, not only to be scholarly, but also to have some life experience," she says.

Counselors endeavoring to work with corporate clients should understand that it takes time to become a known and respected consultant, Hayes says, adding that having a contingency plan for paying bills and health insurance is vital. "You have to start by literally giving it away. I began by calling the Rotary Club and the chamber of commerce, looking for luncheons that need-

ed speakers. I spent a year or two of my life giving (my consulting services) away, just to get out there. It's like being a physician. You can't really market it; you have to have people telling other people."

Counselors can't be shy about working to get their name out there, Hayes notes. A networking plan should include talking to friends and family, befriending the local newspaper or TV station and joining community groups, she says. But above all, she recommends being patient and allowing your reputation to grow. Doing good work is the best marketing plan.

"It's not as hard to sell our services as consultants anymore," Hayes says. "Managers these days are a whole lot smarter and savvy about psychological issues than most people would think. They really understand that human re-

sources are the more valuable resources." This climate offers many opportunities for counselors to make inroads, she says. "These CEOs aren't stupid. They're reading the same books that a lot of us counselors are reading. They're very hip to psychological issues; they know that it's a very stressful position to be in and they're looking for ways to take care of themselves and their employees." ■

Stacy Notaras Murphy is a pastoral psychotherapist at PC&CC in Washington, D.C., and a contributing writer for Counseling Today. Contact her at smurphy@pastoralcounselingdc.com.

Letters to the editor:
ct@counseling.org

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2007 / 2008 Division, Region & Branch Calendar

Information subject to change

June 2007

June 21-22

Oklahoma Counseling Association
Summer Institute & Retreat
Western Hills Guest Ranch Bunkhouse
Information: Sherry Bynum
405.364.7818
shebyn@sbcglobal.net

June 23

Washington Counseling Association
Transitional Board Retreat
City University-Renton, Third Floor
Renton, Wash.
Information: Pam Van Der Does
208.755.6121
wcaexec@roadrunner.com
www.wacounseling.org

June 29-30

Louisiana Counseling Association
Executive Board/Leadership Retreat
The Wesley Center
Woodworth, La.
Information: Diane Austin
lca@shreve.net

July 2007

July 6-8

National Career Development
Association Global Conference
Sheraton Seattle Hotel and Towers
Seattle, Wash.
Information: Suzy Mygatt-Wakefield
425.828.6186
mygattwakefield@comcast.net

July 11-13

Arkansas Counseling Association
Leadership Development Institute
Jonesboro, Ark.
Information: Tammy Romines
tromines@wcs.k12.ar.us

July 12-14

Tennessee Counseling Association
Leadership Development Conference
Cookeville, Tenn.
Information: www.tncounselors.org

July 13-14

Nebraska Counseling Association
Summer Leadership Conference
Kearney, Neb.
Information: Kevin Kaminski
kampal@juno.com

July 21

Maryland Association for Counseling
and Development Board Meeting
Annapolis, Md.
Information: Katherine Barrett
410.757.2806 or 410.437.2400
kbarrett@aacps.org
www.loyola.edu/MACD

August 2007

Aug. 10

Association for Adult Development and
Aging Mini-Conference: Aging Across the
Life Span — New Visions
Lamar University
Beaumont, Texas
Information: Carolyn Greer
greercarolyn@peoplepc.com

September 2007

Sept. 13-15

New Mexico Counseling Association
Annual Conference: Bridging the Gap —
Connections in Counseling
Albuquerque, N.M.
Information: 505.863.6176
nmcailinda@yahoo.com
www.nmca-nm.org

Sept. 14-15

Colorado Counseling Association
Fall Conference: A Rocky Mountain
Connection
Longmont, Colo.
Information: LaVerne Jordan
lavernejordan@denverseminary.edu;
Debbie Gemar
Debbie.gemar@denverseminary.edu

Sept. 15

Maryland Association for Counseling
and Development Leadership Conference
Location TBA
Information: Katherine Barrett
410.757.2806 or 410.437.2400
kbarrett@aacps.org
www.loyola.edu/MACD

Sept. 23-25

Nebraska Counseling Association
Annual Conference
Lincoln, Neb.
Information: Kathy Schinker
kschink@inebraska.com

Sept. 30–Oct. 1

Texas Counseling Association
Directors of Guidance Conference
DoubleTree Austin Hotel
Austin, Texas
Information: Jennifer Cullen
512.472.3403 ext. 10
Jennifer@txca.org

October 2007

Oct. 4

Minnesota Counseling Association
Annual Conference: Globalization
and Best Practice
Marquette Hotel
Minneapolis, Minn.
Information: Louise Jackson
ljackson@bemidjistate.edu

Oct. 5-6

American Counseling Association
Midwest Region Leadership Conference
Marquette Hotel
Minneapolis, Minn.
Information: Kelly Collins
kelcollins1976@cox.net

Oct. 6-10

Louisiana Counseling Association
Annual Conference
Baton Rouge Hilton Capitol Center
Baton Rouge, La.
Information: Diane Austin
lca@shreve.net

Oct. 11-13

Washington Counseling Association
Fall Conference
(WCA Fall Board Meeting during the
Fall Conference, date/time/place TBA)
Seattle Southcenter Doubletree
Seattle, Wash.
Information: Pam Van Der Does
208.755.6121
wcaexec@roadrunner.com
www.wacounseling.org

Oct. 17-19

Puerto Rican Professional Counseling
Association 30th Annual Convention:
Counseling for Peace and Social
Coexistence
Ponce Hilton Golf & Casino Resort
Ponce, Puerto Rico
Information: Nelson Vazquez Espejo
787.798.2173
presidentelecto@consejeriapr.com

Oct. 18-20

Illinois Counseling Association Annual
Conference: The Language of Counseling
— Development of Identity & Shared
Meaning
Holiday Inn Select & Convention
Center
Tinley Park, Ill.
Information: 877.284.1521

Oct. 18-21

American Counseling Association
Southern Region Annual Leadership
Development Conference: Cherishing
Our Past, Envisioning Our Future
Williamsburg Hospitality House
Williamsburg, Va.
Information: Jeff Siskind
407.322.1735
jeff_siskind@scps.k12.fl.us or
jeff_siskind@bellsouth.net

Oct. 24-26

Kentucky Counseling Association
50th Annual Conference Celebration
(Professional Development Workshops,
Oct. 23-24)
Executive West Hotel
Louisville, Ky.
Information: Barry Adams

barry.adams@hickman.kyschools.us
www.kyca.org

Oct. 25-27

New York Counseling Association
Annual Conference: Rally in Rochester —
Counselors Uniting to Nurture the Ties
That Bind Us
Rochester, N.Y.
Information: www.nycounseling.org

Oct. 26-28

New Jersey Counseling Association
Counselors Retreat
Fairview Lake Environmental Center
Newton, N.J.
Information: Ann Adornetto
609.714.0222
ms.adornetto@comcast.net

Oct. 31–Nov. 2

All Ohio Counselors Conference
Hilton at Easton Town Center
Columbus, Ohio
Information: Tim Luckhaupt
ocaohio@yahoo.com
www.cdeducation.org/aocc/prog
(available approximately Sept. 1)

November 2007

Nov. 1

Oklahoma Counseling Association
Board of Directors Meeting
Location TBA
Information: Sherry Bynum
405.364.7818
shebyn@sbcglobal.net

Nov. 1-4

48th European Branch-ACA
Annual Conference
Bad Herrenalb, Germany
Information: Zena Bowen
zenabowen@yahoo.com
www.online-infos.de/eb-aca/main.htm
or www.eb-aca.org

Nov. 2

Oklahoma Counseling Association
Fall Conference
Moore/Norman Vocational Center,
Penn Campus
Information: Sherry Bynum
405.364.7818
shebyn@sbcglobal.net

Nov. 7

Arkansas Counseling Association
Legislative Session
Hot Springs, Ark.
Information: Angie Waliski
angiewaliski@hotmail.com

Nov. 7-9

Arkansas Counseling Association
62nd Annual Conference
Hot Springs, Ark.
Information: Jenene Alexander
jalexander@harding.edu

2007 / 2008 Division, Region, & Branch Calendar

Information subject to change

Nov. 7-9

Virginia Counselors Association
Annual Convention
Renaissance Portsmouth Hotel
Portsmouth, Va.
Information: 800.225.8103
www.vcacounselors.org

Nov. 7-10

Texas Counseling Association 51st
Annual Professional Growth Conference
AmericanBank Center; Omni Bayfront
Tower; Omni Marina Tower
Corpus Christi, Texas
Information: Jennifer Cullen
512.472.3403 ext. 10
Jennifer@txca.org

Nov. 8-10

American Rehabilitation Counseling
Association 50th Anniversary Educational
Training Conference: Counseling and
Crisis Interventions for Individuals
With Disabilities in Critical Times
Hilton Tampa Airport West Shore
Tampa Bay, Fla.
Information: www.arcaweb.org/

Nov. 8-11

American Counseling Association
Western Region Conference
Embassy Suites Hotel San Francisco
Airport-Burlingame
Burlingame, Calif.
Information: 877.602.8059
admin@cacounseling.org

Nov. 8-11

Michigan Counseling Association
Annual Conference: Counseling for
All Seasons of Life
Amway Grand Plaza
Grand Rapids, Mich.
Information: Pat Faircloth
solace1@comcast.net

Nov. 9-10

Association for Assessment in
Counseling and Education
2007 National Assessment Conference
Georgia State University
Atlanta, Ga.
Information: theaaceonline.com

Nov. 10

Maryland Association for Counseling
and Development Workshop
Loyola Graduate Center
Columbia, Md.
Information: Katherine Barrett
410.757.2806 or 410.437.2400
kbarrett@aacps.org
www.loyola.edu/MACD

Nov. 10

New Jersey Counseling Association
Essentials of Supervision: Becoming an
Effective and Ethical Clinical Supervisor
Location TBA
Information: www.njcounseling.org

Nov. 13-16

Alabama Counseling Association
Annual Conference
Birmingham Sheraton Hotel/BJCC/
Medical Center Forum
Birmingham, Ala.
Information: Ervin L. "Chip" Wood
ALCA
217 Daryle Street
Livingston, AL 35470

Nov. 17-20

50th Annual Tennessee Counseling
Association Conference
Nashville, Tenn.
Information: www.tncounselors.org

Nov. 28-30

Florida Counseling Association
58th Annual Convention: Counselors —
Navigators of the Future
Plaza Resort and Spa
Daytona Beach, Fla.
Information: 407.628.0793
fcaoffice@aol.com
www.flacounseling.org

December 2007

Dec. 8

Nebraska Counseling Association
Public Policy & Legislation
Mini Legislative Institute
Various Sites
Information: Kevin Kaminski
kampal@juno.com

January 2008

Jan. 24-26

Idaho Counseling Association
Annual Conference
Owyhee Hotel
Boise, Idaho
Information: Sue Holmes
suem@holmes.myrf.net

February 2008

Feb. 8-9

Oklahoma Counseling Association
Mid-Winter Conference
(Feb. 7, OCA Pre-Conference and
Board of Directors Meeting)
I-40/Meridian Biltmore
Oklahoma City, Okla.
Information: Sherry Bynum
405.364.7818
shebyn@sbcglobal.net

Feb. 20-23

North Carolina Counseling Association
Annual Conference
Sheraton-Research Triangle Park
Research Triangle Park, N.C.
Information: Terry Robinson
td_robin@bellsouth.net
www.nccounseling.org.

March 2008

March 15

Maryland Association for Counseling and
Development Graduate Student Seminar
Location TBA
Information: Katherine Barrett
kbarrett@aacps.org
410.757.2806 or 410.437.2400
www.loyola.edu/MACD

March 21-26

National Employment Counseling
Association Professional Development
Workshop: Celebrating the Unique
Strengths of Counseling Professionals
Honolulu, Hawaii
Information: Kay Brawley
kbrawley@mindspring.com

March 26-30

American Counseling Association
Annual Conference & Exposition
Honolulu, Hawaii
Information: 800.347.6647 ext. 222
www.counseling.org

March 30-April 1

Maine Counseling Association
Annual Conference
Samoset Resort
Rockport, Maine
Information: www.maineaca.org

March TBA

Washington Counseling Association
Spring Board Meeting
(during WSCA Spring Conference,
date/time/place TBA)
Information: Pam Van Der Does
208.755.6121
wcaexec@roadrunner.com
www.wacounseling.org

April 2008

April 3-5

49th Annual South Dakota
Counseling Association Conference
Rapid City, S.D.
Information: Kelly Duncan
605.232.6285
sdca@cableone.net
www.sdacounseling.org

April 10-13

American Counseling Association
of Missouri Annual Conference
Capital Plaza Hotel
Jefferson City, Mo.
Information:
www.counselingmissouri.org

April 19

Maryland Association for Counseling
and Development Board Meeting
Loyola Graduate Center
Columbia, Md.
Information: Katherine Barrett
410.757.2806 or 410.437.2400
kbarrett@aacps.org
www.loyola.edu/MACD

May 2008

May 2

Connecticut Counseling Association
Annual Spring Conference: Counseling
Connections 2008
Rocky Hill Marriott
Rocky Hill, Conn.
Information: Bob Schmidt
203.426.1222
serenitysh@aol.com

May 10

Maryland Association for Counseling and
Development Annual Conference
Location TBA
Information: Katherine Barrett
410.757.2806 or 410.437.2400
kbarrett@aacps.org
www.loyola.edu/MACD

June 2008

June 7

Maryland Association for Counseling
and Development Board Meeting
Loyola Graduate Center
Columbia, Md.
Information: Katherine Barrett
410.757.2806 or 410.437.2400
kbarrett@aacps.org
www.loyola.edu/MACD

June TBA

Washington Counseling Association
Summer Transitional Board
Meeting/Retreat
Information: Myrna Muto
206.226.5957
mmmuto@aol.com
www.wacounseling.org

Publicize your news

Keep *Counseling Today* readers updated year-round. Include your event notices and other news each month in either "Bulletin Board" or "Division, Region & Branch News." For guidelines on submitting news item, e-mail Jonathan Rollins at jrollins@counseling.org.

You call yourself a counselor?

Counselors in South Dakota, Oregon working to protect both consumers and licensed professionals

BY ANGELA KENNEDY

Individuals seeking mental health services may already be vulnerable due to their circumstances. And regardless, they're likely focused on their problems, not the need to ask about a counselor's credentials. Unfortunately, in the few states that only protect the title and not the profession of counseling, individuals may discover that they've trusted their emotional well-being to an unscrupulous businessperson whose name they found listed under "counseling" in the phone book.

That's the case that state licensed professional counselors in both South Dakota and Oregon are presenting to their state legislatures. The counselors have approached this as a consumer protection issue geared toward safeguarding the public and respecting the work of qualified and licensed mental health professionals.

In South Dakota, the state licensing board began receiving a number of ethical complaints about individuals who were practicing as counselors. When the board began investigating the claims, it discovered that these "counselors" didn't have licenses at all and, therefore, no actions could be taken on behalf of the victimized consumers.

Fortunately, Gov. M. Michael Rounds recently signed a practice law that will go into effect in South Dakota on July 1. "Now individuals cannot set up a private practice or engage in the practice of counseling if

they are not licensed," said Kelly Duncan, executive director of the South Dakota Counseling Association, a branch of the American Counseling Association. She adds that the practice law goes beyond licensure regulation and makes it a criminal act to advertise or practice counseling without proper credentials.

The law revises certain provisions relating to the practice of counseling, and any person engaging in professional counseling without a license is subject to a Class 2 misdemeanor. There are several exceptions to the practice law, such as professionals working in schools, federal agencies and ministries. This is because the law is essentially meant to keep unlicensed individuals from providing private mental health services. The three-year effort by SDCA members and the South Dakota Board of Counselor Examiners is being celebrated as a major step in protecting consumers in the Coyote State as well as the reputation of professional counselors.

Meanwhile, counselors in Oregon are still working diligently to persuade lawmakers to address issues related to both consumer protection and access to quality mental health care. "Last September, I got very frustrated with the state of things in Oregon regarding providing therapy to people," said Mary Lou Brophy, a licensed professional counselor with a private practice in Oregon. "I was very concerned that there are people here who were calling them-

selves therapists and counselors, but when I checked into their qualifications, they would tell me about some of the workshops they had taken. They presumed to be therapists after that. They have never been checked out in terms of education, qualifications and so on. And they don't operate under a regulatory board, so when there is an ethical violation, nothing can be done. I'm just really adamant about not messing around with people's psyche when you don't know what you're doing. Damage can be done to these clients because they are seeing people who don't have the (necessary) background or skills, and there is no recourse for the consumers. It diminishes the entire profession."

Brophy also pointed out that many of the major insurance companies refused to reimburse licensed professional counselors or licensed marriage and family therapists for services. Because of that, Brophy said many of the families referred to her went untreated. Even when offering a sliding fee scale, the cost of doing business was too much for her, and the families didn't have the disposable income to afford services.

Brophy contacted her local representative in Oregon and worked her way up the chain of government. Along the way, she and several other counselors formed the grassroots group Oregon Coalition for Consumer Protection and Choice in Mental Health Care. The group presented its argument to government officials, with the bottom line

being that mental health care is a major factor in offering complete health care.

After several meetings, the coalition nailed down language they wanted to see in a bill. Jeff Borchers, a coalition member and employee assistance counselor for a nonprofit organization in Medford, described that first draft of the bill as a bit naive. Coalition members thought the law would force insurers to allow anyone to join the panel of reimbursed mental health providers. They eventually compromised and settled for a bill that stated the insurers would remain the gatekeepers of the panels while allowing LPCs and LMFTs to apply for network reimbursement.

"More competition can't be bad in the marketplace," Borchers said. "However the insurers spin it, the more providers there are, the more likely you are to have quality providers at a lower cost." He said that the issue is about expanding the size of the provider pool for mental health services while keeping health care costs down. "This is a win-win situation to let LPCs and LMFTs into the insurance game," he said, adding that it would also benefit consumers and the insurers.

H.B. 2687

Brophy noted that the legislation pushed by the coalition, H.B. 2687, has enjoyed tremendous bipartisan support, with the Oregon House approving it by a vote of 57-7 earlier this year. The bill regulates the

mental health profession by limiting the wording that can be used in advertising. Mental health providers who are not licensed would no longer be able to use the terms professional counselor or marriage and family therapist. "In our local phone book now, you have the licensed mixed in with the unlicensed," Brophy said. "So the way it will be controlled is through the use of the language."

Additionally, H.B. 2687 includes a consumer choice proposition to add LPCs and LMFTs to an already existing vendorship mandate. "It simply adds our two titles to the list of those to be reimbursed," Brophy explained. A Senate committee hearing convened on May 9 to review H.B. 2687. A unanimous vote moved the bill ahead to the Ways and Means subcommittee on Human Services. The bill is expected to reach the state Senate with a favorable decision in the coming weeks.

Brophy encourages other counselors to get involved in advocating for both the profession and consumers of counseling services. "I'm just one little person who got upset because my clients couldn't be seen and get adequate care," she concluded. ■

Angela Kennedy is a senior writer at *Counseling Today*. Contact her at akennedy@counseling.org.

Letters to the editor: ct@counseling.org

Pushing for progress

As the webmaster for the Oregon Coalition for Consumer Protection and Choice in Mental Health Care, Jeff Borchers has posted talking points to help members correspond with their legislators about H.B. 2687 (for the complete list, go to www.oregonmentalhealth.info). Among those points:

■ **Increased consumer access:** Everyone has the right to access quality and confidential mental health care, but current statutes significantly limit access to mental health care providers.

■ **Improved consumer protection:** State boards should verify the qualifications and regulate the practice of mental health care providers, including unlicensed providers. Because unlicensed providers have never been verified by a regulatory board, there is no safety net to protect consumers of these mental health services.

■ **LPCs and LMFTs are fully qualified:** The required training for these counseling professionals meets or exceeds that of

other professionals in the mandated provider pool, and they should be compensated equally. Additionally, the competency of these licensed professionals is ensured by state boards.

■ **Mental health needs are going unmet:** These professionals are being discriminated against because they are not allowed to be included in the provider pool. This limits the resources for meeting mental health care needs. This restriction is most notable in

rural areas where mental health care provider networks are few and far between. Consequently, many rural consumers find it difficult to gain access to quality mental health care. Simply put, it's a matter of supply and demand. Furthermore, increased access to larger provider networks will translate to an overall decrease in health care costs.

■ **Insurance company provider panels have too much power:** Insurers "trump" current state laws

and the professional licensing boards by selecting certain individuals consumers may see for therapy. The negotiated contract provider panels are often closed to new applicants. Why limit access to providers who are full qualified and licensed? Companies should not be above the laws, rules and licensing boards to determine who and who is not competent to provide mental health care services. ■

— Angela Kennedy

Matching parachute color to job realities

A useful article summarizes job data collected in the U.S. census in 1960, 1970, 1980, 1990 and 2000 in terms of John Holland's six kinds of work (RIASEC: Realistic, Investigative, Artistic, Social, Enterprising and Conventional). Counselors who help people make career decisions will be interested in the breakdown of work in our economy.

Realistic type jobs have made up the largest area of employment from 1960-2000, while the Artistic job force has stood at a paltry 1 percent in each census period. Though the Investigative type has tripled in employment over the decades, still only 8 percent of U.S. jobs fit this category. This calls into question career guidance that emphasizes burgeoning growth in information and technology jobs ("I" types).

Overall, men hold fewer types of jobs, with 80 percent working in either Realistic or Enterprising areas, while women are more evenly distributed among Conventional, Realistic, Social and Enterprising areas. Jobs

available in the future are likely to be those left by retirees, so counselors need knowledge about specific occupations where older workers will be leaving. Robert C. Reardon, Emily E. Bullock and Katie E. Meyer present these and other thought-provoking analyses in "A Holland Perspective on the U.S. Workforce from 1960 to 2000" in the March 2006 issue of *Career Development Quarterly* (pages 262-274).

Brotherly and sisterly love gone bad

Sixty to 80 percent of U.S. children are involved in sibling abuse, according to several surveys, yet the problem is often tolerated as normal behavior. However, counselors Mark S. Kiselica and Mandy Morrill-Richards report negative lifetime consequences for both the perpetrators and victims of physical and psychological sibling violence in the Spring 2007 *Journal of Counseling & Development* (pages 148-161). The authors of "Sibling Maltreatment: The Forgotten Abuse"

discuss relevant research and propose treatment strategies.

Counselors should be aware that the rate of sibling violence is highest in families in which spousal abuse and adult-child abuse are also present. Boys and girls are victimized equally; however, boys tend to be perpetrators more often than girls.

In a cross-cultural study of Finland, the United States, Puerto Rico, Israel and Canada, the United States had the highest level of physical and verbal sibling aggression and the least use of discussion for resolving conflicts. Kiselica and Morrill-Richards suggest treatments based on strategies used with bullies and aggressive families as well as strength-oriented programs.

Traits of adult children of alcoholics

Are adult children of alcoholics (ACOAs) more likely than others to be alcoholics themselves? Are they more unwilling to admit that they have problems? Are their rela-

tionships more codependent? Many counselors and theorists have perceived these traits in ACOAs, but research has not provided consistent evidence.

Researchers Amy L. Jones, Dilani M. Perera-Diltz, Kathleen M. Slayers, John M. Laux and Wendy S. Cochrane improved upon previous studies. They tested the three traits in a large sample of undergraduate and graduate students ($N=229$) who were diverse in ethnicity and age, and they used a standard instrument that screens for substance abuse and includes both subtle and obvious scales for several traits (SASSI-3). Participants self-identified as either ACOAs or not, and the two resulting groups were compared on subscale scores of the SASSI-3.

No statistically significant differences in scale scores reflecting substance abuse, defensiveness or codependence were found between ACOAs and non-ACOAs. When compared with the SASSI-3 normative sample, the participants in

this study were similar in their levels of substance dependence, defensiveness and codependency. Of the entire group of participants, one-quarter were classified by the SASSI-3 as substance dependent, which is consistent with other epidemiological data on college students.

The article, published in the Spring 2007 *Journal of College Counseling* (pages 19-26), points out that students with alcoholic parents may be relieved to learn that they are not doomed to fulfill stereotypes of ACOAs. ■

Textbook author Susan X Day teaches research methods and advises graduate students in counseling education at the University of Houston. The second edition of her book *Theory and Design in Counseling and Psychotherapy* was published recently. Contact her at sxday@houston.rr.com.

To subscribe to any of the journals mentioned in this article, call 800.633.4931.

Letters to the editor: ct@counseling.org

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standards for specialization as necessary and advance the professional development of coaching among counselors with the full support of ACA.

Barbara Birge
Charlotte, N.C.

Issue dedicated to multicultural counseling strikes chord with readers

Thank you for Angela Kennedy's article "Teens leading double lives" about Muslim American students in the April 2007 issue of *Counseling Today*. I am a Muslim American female who is finishing an Ed.S. degree in school counseling at the University of South Carolina. I could really relate to the ideas of the article, which was respectfully and fairly written.

I only wish that the article could have highlighted the many stereotypes that Muslim Americans face, such as being labeled as terrorists or anti-American or that our religion oppresses women (Islam actually gave rights to women). The vast majority of Muslims denounce terrorism. One of the greatest sins in our faith is murder; Islam only allows fighting in self-defense. A huge psychological burden on Muslim Americans is the negative portrayal of Muslims and Islam in the media. Sometimes I feel as though Muslims are the only minority that it is OK to demonize, demean and stereotype.

Thank you for your balanced and respectful portrayal of Muslims as human beings struggling to find our way like everyone else.

Sheima Salam Sumer
Columbia, S.C.

My warm thanks and congratulations on the publication of the April edition of *Counseling Today* that focused on multicultural issues in counseling. The title of the front page article is wonderful — "Multicultural counseling: Not just for specialists anymore." The articles are broad-based and are an important step in moving us toward culture-centered counseling. We have traveled a long distance since Derald Wing Sue wrote the first version of the multicultural counseling competencies more than 25 years ago. Then came the National Institute of Multicultural Competence. Its impact on our field has been substantial and ranges from protests to the organization of the Giving Back to the Community project to organizing the first session of Counselors for Social Justice and the first Multicultural Conference and Summit.

I personally was appreciative of the breakthrough when a group of us were permitted to do training with the Governing Council of the American Counseling Association perhaps 10 years ago. And now the multicultural competencies have become a standard for us all. We should recall that the Divi-

sion 17 Executive Committee of the American Psychological Association refused to endorse Derald's original competencies. It took Patricia Arredondo and the Association for Multicultural Counseling and Development to bring them to the fore of ACA. Then they moved beyond our organization to APA and are now influencing other helping fields.

However, racism and other forms of oppression are still very much part of our culture. Shock jocks such as Don Imus abound, and in many areas of our country, his thoughts are the norm. We have reached a mountaintop, to paraphrase Martin Luther King. But what do we find at the top of the mountain? More mountains to climb in this continuous journey toward equality.

Many people have done hard work toward this day. We all certainly thank ACA and *Counseling Today* for your awareness and support! Let us continue and start climbing the mountains that await us.

Allen E. Ivey
University of Massachusetts,
Amherst and University of
South Florida, Tampa

Are counseling and psychology different professions or not?

I am writing this letter in response to the letters addressing the proposed changes in CACREP standards that were published in April's *Counseling Today*. I hold a Ph.D. in coun-

selor education, and I am a tenured faculty member in a counseling program. I agree that variety in faculty is an important part of a university program. I wonder then why counselor educators are not hired to teach in counseling psychology programs. If our degrees are equivalent, this should not be an issue. Yet I know of no one with my degree that is teaching in a counseling psychology program, and I know of few states that allow those with Ph.D.s in counselor education to obtain licensure in psychology.

Like Drs. (Paul) Pederson and (Allen) Ivey, I too am concerned about "guildism" — the "guildism" that prevents qualified and quality faculty from obtaining positions in universities. However, the professions are either equivalent or not. CACREP is not the first organization to propose that the professions are different. Psychology has operated under that premise for years. Perhaps it is time that counselors did too.

Paula R. Danzinger
Associate Professor and
Director, Counseling Services
Program
William Paterson University
Wayne, N.J.

President's column touches on many issues facing military families

A copy of ACA President Marie Wakefield's article, "Guarding the military home front" (February 2007), was passed on to me by a very car-

ing and concerned family member. My son is facing his third deployment to Iraq and the loss of his marriage. Her article addressed many of the issues we have attempted to walk through with him since he enlisted in 1999.

He and his wife were married seven years, have two preschool-aged children and have known each other since they were 9. Despite this "stability," neither were equipped or prepared to deal with the fear factor forced on them by combat responsibilities and re-entry into "normal" life between each deployment.

I appreciated the comment by Liza Hita in the article: "It's not unpatriotic to see these issues and understand the depth of trauma to soldiers, their children and their loved ones." Trauma — yes, that describes it.

Roni Archer
UBA Center for Counseling
Houston ■

In the May 2007 article "Making 'counselor' a household word," two names were listed incorrectly. Christy Lyons was among the presenters of the Education Session. Aneesa Bhimani, although a member of the ACA Public Awareness and Support Committee, did not attend the presentation.

We'd like to hear from you. Send your letters to the editor to ct@counseling.org.

From the President

Continued from page 5

From local communities to other continents, the ACA leadership is making a difference:

- The reinstatement of "Counseling Corner," ACA's weekly newspaper column, currently being printed in approximately 250 local newspapers, is another example of our commitment to promoting mental wellness.
- The Hans Z. Hoxter International Forum Fund was created to increase the participation of international speakers at ACA conferences — a step toward globalization of counseling collaborations.
- ACA continued as the counseling profession's designated sponsor of People to People Ambassador Programs, which foster a

unique experience of exchanging cultural and professional ideas and information. ACA delegations have traveled to China, Russia and South Africa.

As technology resources expand, ACA has also invested in professional growth and development opportunities for members through online learning programs and establishing a virtual library for the retrieval of *VISTAS* articles, ERIC digests and ACA archives. Other online services include collaborating with CareerBuilder.com to provide a counselor-specific job filter; current salary data information that matches companies, positions and job profiles of employers and employees across the globe; and the Web Idea Bank, established so

the voice of the membership could be heard more readily.

There is no limit to the tireless efforts being launched by ACA to advance the profession of counseling and the organization. The ACA leadership is committed to staying alert to the challenges of the profession. Among the resources introduced to elevate professional experiences are relevant publications, ACA Interest Networks in specialty areas and an increased selection of educational academies at the ACA Conference.

Some ACA leaders work to monitor, dialogue and initiate action to ensure that we are heard on Capitol Hill and prepared to take our issues to elected officials. There is also 20/20: A Vision for the Future of Counseling, a joint initiative with the American Association

of State Counseling Boards to address seven areas that impact the future of counseling (see "20/20 delegates start reaching consensus" on p. 1).

Issues of continued focus for ACA include Medicare coverage of licensed professional counselors, independent practice authority for counselors under TRICARE and parity of insurance coverage for mental health and substance abuse treatment.

ACA cares very deeply about what our members value and need. The momentum from our success stories will serve as a legacy for students entering the profession. The leadership of our graduate students is evident as they demonstrate a high level of enthusiasm and commitment. They have increased their presence on ACA committees, their

participation in branch and division activities and their involvement in activities during the ACA Conference.

In sharing with so many professionals what the leadership of ACA does, I am very proud to say that we represent the largest group of counseling professionals in the world. Leadership is about the opportunity to serve, conduct, grow, promote, examine, choose, connect, engage, design, build, influence, inspire, reflect, support and celebrate. As I reflect on all these accomplishments of the ACA leadership, I want to humbly express my gratitude at having been allowed to stand on the shoulders of giants in the counseling profession. It's been an honor to have the opportunity to wear so many leadership hats. Blessings. ■



Electronic billing and HIPAA compliance

Q: I have a very limited practice of about five clients per week. I use paper claims for insurance and managed care billing and do not use a computer for any client-related business. Why should I have to be compliant with HIPAA?

A: Right now, you don't have to be HIPAA (Health Insurance Portability and Accountability Act) compliant. However, we feel that is a mistake. The trend in billing insurance and managed care is electronic. Most insurance and managed care companies are encouraging electronic billing but still accept paper CMS 1500. While conversion to only electronic billing won't begin tomorrow, it is an eventuality. Insurance and managed care companies have stopped accepting handwritten CMS 1500 forms and will do the same with paper claims at some point.

Moreover, not being HIPAA compliant sends a message to your clients.

Why would the clients' other health care providers be compliant and not you? HIPAA compliance is not that difficult. All professional organizations offer some assistance.

Prepare for tomorrow today. For more HIPAA information, go to the American Counseling Association website at www.counseling.org and click on "Counselors." From that page, click on "Private Practice Pointers" (a section reserved for ACA members).

Q: I am trying different marketing ideas (e.g., mailings, website, physicians, free workshops) to expand my practice. What else should I consider?

A: Networking would be an excellent addition to your marketing plan. Successful counselors in private practice are very connected and involved with others in business, other helping professionals, clubs, organizations and societies.

You can accomplish this by joining

local, state and national organizations. For example, consider joining the local chamber of commerce, the Kiwanis, Toastmasters/Toastmistresses or a similar group. Start or join a practice group of mental health providers. Volunteer to work on a political campaign, a cause close to your heart or on the board of directors of a United Way agency. Join your state professional organization and its appropriate division or professional society and get involved.

On the national level, renew your membership with the American Counseling Association and join other national professional organizations related to your private practice. You might consider contributing to political action committees such as the Professional Counseling Fund (counselingfund.org). Try to meet and support local politicians who are favorable to your client population or causes for which you are passionate. While the cost of memberships and

donations may seem expensive, think of them as a marketing expense that very well may lead you to new business.

This is how we started. In 1997, we became acquainted through our involvement in the Illinois Mental Health Counselors Association and ACA. Getting involved can pay off in many ways. ■

Robert J. Walsh and Norman C. Dasenbrook are coauthors of *The Complete Guide to Private Practice for Licensed Mental Health Professionals* (www.counseling-privatepractice.com). ACA members can e-mail their questions to walshgasp@aol.com and access a series of "Private Practice Pointers" on the ACA website at www.counseling.org.

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Counseling in Latin America: Good news from the south



Mario Zumaya (Mexico), Andres Sanchez Bodas (Argentina), Esteban Montilla (Venezuela and St. Mary's University, San Antonio, Texas), Dana Comstock (St. Mary's University) and George Vera (Venezuela and the Universidad del Zulia, Maracaibo, Venezuela) at the Third Counseling Congress of the Americas.

BY R. ESTEBAN MONTILLA
AND DANA L. COMSTOCK

It was fiesta time in the stunning city of Buenos Aires, Argentina, where more than 400 counselors from eight Latin American countries and the United States gathered for the Third Counseling Congress of the Americas: Unfolding the Human Potential to celebrate the profession and to enjoy the warm and revitalizing *abrazo* of the local community. The gathering, held April 17-20, began with abundant embraces, kisses (an Argentine custom that humorously took some of the Venezuelan men by surprise), wine, champagne, succulent steaks and the celestial tango.

The event included more than 60 presentations on issues related to social justice, inclusive democracy, virtues and strengths, counseling theories and techniques, emerging indigenous interventions, human optimization and flourishing, education and research in counseling, strengths assessment and community involvement. Representatives from the Council for the Accreditation

of Counseling and Related Educational Programs and the National Board for Certified Counselors were also on hand to discuss ideas for the accreditation of counseling programs and the certification of counselors in Latin America.

The coordinator of the event, Andres Sanchez Bodas, the founder of the counseling profession in Argentina, wisely managed to balance serious academic and scientific discussion with a celebratory atmosphere peppered with spectacular cultural entertainment. His effort, supported in part by a grant from the NBCC International division, resulted in a commitment from participants to double their endeavors to assist people from their local communities in living their lives to the fullest as well as to ameliorate the social, mental and spiritual pains that many Latin Americans experience.

Contextual challenges

Latin America is best described as a mosaic of 500 million people who differ in terms of culture, language, religion, ethnicity, art, economics, education and social and political

arrangements. Even though Latin America is a region with a vast wealth of resources, 54 million people suffer from malnutrition, 43 percent of the population lives in poverty and one out of every five lives in extreme poverty. In the face of these challenges, this multicultural/policulture, composed of Amerindians, Blacks, Whites, Asians and Mestizos, is gathering forces to address social maladies such as poverty, marginalization, discrimination, social exclusion, oppression and exploitation.

Counseling in this part of the world is seen as an emancipating force that possesses the potential to play a key role in assisting people in all communities to optimize their lives and freeing them from social, emotional and spiritual bondage. In spite of the struggles, the technological, medical, scientific, economic, ecological and political progress already under way in this heterogeneous macro community has been cited as a key source of hope for the rest of the world.

Counseling, as described at the Third Counseling Congress of the Americas, is seen as more than a "helping profession." The discipline of counseling is thought of as a collective commitment to radically affect change for individuals through dialogue and concrete action specific to the sociopolitical context of one's life and community. The main aim of the counseling profession in Latin America is to assist people in living fulfilling lives while fostering their creative efforts to advocate for sociopolitical justice within their communities. Thus, counseling is seen as both emancipating and relational as it takes place in the context of a collaborative and

mutually empowering relationship. The goals of counseling include providing "consultants" (instead of "clients") with knowledge, skills and sources of resilience to challenge and change their respective social maladies, and assisting with the cognitive, emotional and spiritual challenges encountered in their pilgrimage toward wholeness and social optimization.

Given the contextual challenges facing counselors in Latin American, an intrapsychic theoretical framing of mental health issues does not serve the discipline well. Rather, Latin American counselors see people's struggles as the product of complex and systemic oppressive social structures. The practice of counseling involves assessing strengths, virtues, impeding factors and repressive social elements present in the person as well as in the community. Counseling is constructed as a relational experience characterized by providing ample space to voice hopes, pains and dis-solutions. It also empowers consultants with knowledge, skills and advocacy and relational competencies for the purpose of bringing about sociopolitical changes in their respective communities.

The relational emphasis in Latin America is of extreme importance because "success" is viewed through the lens of how well people relate with others and the environment. Because most Latin America cultures are collectivistic in nature, people understand themselves as part of a community where relationships are meant to be respected and nurtured by a sense of duty, justice, loyalty, solidarity and

Continued on page 48

heading up the Steering Committee for the conference set for summer 2008, it is going to be a landmark event. Please plan on participating. Please respond positively to the call for volunteers and call for programs, or just register for the conference, but please try to participate in this important event.

Plans are also well under way for next year's Spiritual Journey. Mark Young will be sharing specifics with you as the year progresses and as he returns from his sabbatical. During his year of "rest and relaxation," he wrote a book and a \$1 million-plus grant and was in the office more than when he was "working."

ASERVIC is searching for a new editor for *Counseling and Values*. If you are interested, please submit a vita and a letter of interest outlining your vision for the journal to Faith Okerson, 2535 N.W. Edensbower Blvd. #129, Roseburg, OR 97470. Or e-mail the information to Faith at okersonf@yahoo.com. Information must be sent by June 15. Candidates will be asked for letters of institutional support later.

NCDA attracting record number to Annual Global Conference

Submitted by Deneen Pennington
dpenn@ncda.org

The 2007 National Career Development Association Global Conference, to be held July 6-8 in Seattle, may become the association's best-attended conference ever. Early indications show a record number of people have already registered, and two conference hotels

have been sold out for weeks.

This year's conference theme, "Integration and Collaboration Within a Multicultural World," has attracted many international colleagues from more than 20 countries. NCDA President Barry Chung, a native of Hong Kong, has promoted the conference during his presidential travels over the past year. Chung, a new U.S. citizen, will introduce NCDA's new multicultural competencies and a new *Code of Ethics* during the conference. Featured sessions are also planned to highlight career development practices from many different countries.

NCDA is privileged to host such a wide range of career professionals from across the globe. For more information about the conference, visit the NCDA website at www.ncda.org.

AADA exploring plans for series of mini-conferences

Submitted by Carolyn Greer
greercarolyn@peoplepc.com

The Association for Adult Development and Aging, in partnership with Texas AADA, will hold a mini-conference Aug. 10 at Lamar University in Beaumont, Texas, with the theme of "Aging Across the Life Span: New Visions." A variety of workshops will be offered with five continuing education credits available.

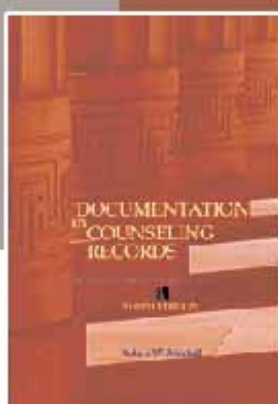
Currently, there are tentative plans to hold other mini-conferences in Illinois and New Jersey. For more information, contact AADA President Carolyn Greer at greercarolyn@peoplepc.com. ■



The European Branch of the American Counseling Association received two first place small branch ACA National Awards for "Best Membership Service" and "Best Newsletter" at the ACA Branch Awards and Dessert Reception on March 24 in Detroit. EB-ACA President Frankie Nielsen (right) accepted the awards for the branch from ACA Western Region Chair Bob Butziger.



Past presidents of the National Employment Counseling Association were honored at the Presidents Recognition and Awards luncheon in Detroit for their contributions to workforce development and employment counseling. From left: Andrew Helwig, Bill Fenson, Roberta Floyd, Cheri Butler, Kay Brawley and Michael Lazarchick. Bill Fenson will chair NECA's annual event next year in Honolulu, March 21-26. The theme for NECA's 2008 Professional Development Workshop will be "Celebrating the Unique Strengths of Counseling Professionals." Counseling professionals may submit program proposals for 30-, 60- and 90-minute sessions to Kay Brawley at kbrawley@mindspring.com. Proposals are due June 15. For more details, visit www.employmentcounseling.org.



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"Mitchell presents a realistic yet compassionate approach to the difficult balancing act of weighing agency concerns with client rights. He has achieved the impossible by creating a book on a complex topic that is accessible and thoroughly informative—as well as one that will bring a smile to your faces while you read it!"

—Lisa A. Boman, MA, JD
Legal Counsel, Kentucky Domestic Violence Association

With an expanded focus on ethical conduct and professional values, this monograph offers guidelines on how to keep client records that are legally, clinically, and fiscally sound. Mitchell provides basic information on how counselors can help protect themselves from lawsuits and allegations of unethical conduct, assist in court cases, speed third-party reimbursements, master electronic record keeping, and enhance the quality of care through effective communication. This edition contains new information on cultural sensitivity, online counseling, dual relationships, sexual relationships, and integrity.

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American Counseling Association 800-422-2648 x222

In Brief

Take advantage of new ACA renewal options

The American Counseling Association will be providing its members with multiple payment options for membership fees as of July. When renewing membership, you can choose to pay in three installments over a three-month period. Members can also renew for two years and lock in the existing membership rate. Another option is to choose automatic renewal and cut down on paperwork and reminder notices.

Each of these options will be available this summer by logging onto www.counseling.org or by calling ACA Member Services at 800.347.6647 ext. 222.

New name for AGLBIC

Effective July 1, the Association for Gay, Lesbian and Bisexual Issues in Counseling, a division of ACA, will change its name to the Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling. The decision to adopt the name change was reached at the ACA Annual Convention in Detroit earlier this year.

Reach Out and Recruit

Reach Out and Recruit (ROAR), one of ACA's membership marketing initiatives, is based on the inherent power of referral marketing. You may already regularly recommend that your colleagues join ACA, but now the association wants to encourage you to reach out even more. In exchange, ACA will reward you for your extra efforts.

Between now and March 15, 2008, ACA members can:

- Recruit two new members and receive one free book from the ACA Catalog
- Recruit five new members and receive \$50 in ACA Bucks (ACA Bucks can be redeemed on any ACA product, membership or convention registration)
- Recruit 10 new members and receive \$100 in ACA Bucks and a free ACA logo polo shirt
- Recruit 15 or more new members and receive a free one-year ACA membership, one full conference registration and a \$100 gift certificate to Amazon.com (a \$500-plus value)

In addition, all individuals who recruit five or more new members will be eligible for the grand prize drawing for a new laptop computer. Prizes will be awarded in March 2008. Other prizes will be awarded throughout the year, and all active recruiters will be eligible.

To participate in ROAR, fill out the online pledge form at www.counseling.org/sub/ROAR/pledge.htm. Be sure to provide the individuals you recruit with your name and membership number. This will ensure that you receive credit for all those whom you recruited. Your membership number can be found on your membership card or on your copy of *Counseling Today*. It can also be obtained by calling ACA Member Services at 800.347.6647 ext. 222. Only active ACA members are eligible to participate in ROAR. A new member is defined as an individual whose membership has been inactive for more than one month.

Check www.counseling.org/ROAR in the coming weeks for updates, rules and ideas on how to recruit new members. Start recruiting and earning rewards today.

Deadline approaching to recognize 'schools as centers of community'

The KnowledgeWorks Foundation, in partnership with the American Architectural Foundation, is currently seeking submissions for the Richard Riley Award. The entry deadline is July 9. This award recognizes design and educational excellence in "schools as centers of community," and the winning school will receive a \$10,000 prize.

Schools that serve as centers of community provide a rich array of social, civic, recreational and artistic opportunities to the broader community and to students, often clustering educational and municipal buildings together. These additional services and opportunities often improve student achievement and help maximize local tax dollars. All public schools, new and old, and including charter schools, are eligible for the award. Individuals are not eligible to receive the award.

For detailed information about award criteria and how to enter the competition, visit www.richardrileyaward.org.

New mental health resource available for veterans and families

The Substance Abuse and Mental Health Services Administration has launched a new section of its website that focuses on veterans and their families. The site provides critical information on prevention, treatment and recovery support for mental and substance use disorders. Publications, fact sheets and links to relevant agencies are provided along with information on SAMHSA-funded programs, agency activities and training and technical assistance opportunities.

In addition, individuals who are seeking substance use and mental health services can easily find information about local programs by using SAMHSA's treatment facility locator. For more information, visit the "Resources for Returning Veterans and Their Families" page at www.samhsa.gov/vets.

Organization warns against reactions to Virginia Tech shootings

David Shern, president and CEO of Mental Health America, has cautioned students, children, adults, educators and community leaders alike to avoid diagnosing others with mental health problems or engaging in other types of "profiling" in reaction to the shootings at Virginia Tech University.

Shern added that analyzing or discussing the mental health status of classmates, neighbors and colleagues or their potential for violence is not a productive way to deal with feelings of anxiety and fear. When disasters of any type occur, many people react with a range of emotions that may include anger, fear and depression, he said, noting that it is important for people to come together with friends and families to cope with these feelings productively. Additionally, he warned, asking "what if" questions can be damaging and counterproductive to improving feelings of well-being and community safety.

Guide helps trauma centers identify, treat problem drinking

The Substance Abuse and Mental Health Services Administration recently published a guide to help health care professionals incorporate substance abuse treatment into trauma care. "Alcohol Screening and Brief Intervention for Trauma Patients" helps trauma centers understand how substance abuse treatment can fit into their services. The guide includes a variety of screening methods to identify problem drinking and covers how to help patients who still have enough control over their drinking that they can be motivated to cut down or quit.

A collaborative effort between SAMHSA, the American College of Surgeons Committee on Trauma, the Centers for Disease Control and Prevention, the National Institute on Alcohol Abuse and Alcoholism and the National Highway Traffic Safety Administration, the guide represents a significant milestone in efforts to integrate substance abuse treatment with primary and general care. While the guide is aimed at larger trauma centers, emergency rooms, clinics and primary care physicians will also find screening methods and intervention scenarios that they can incorporate.

The guide is available online at http://ncadistore.samhsa.gov/catalog/product_Details.aspx?ProductID=17652. Free copies may also be obtained by calling SAMHSA's Health Information Network at 877.726.4727. Request inventory number SMA 07-4266.

Study links depression, first-time drug use

According to a recent report by the Substance Abuse and Mental Health Services Administration, adolescents who faced depression in the past year were twice as likely as those who did not have depression to take their first drink or to use drugs for the first time.

The report, "Depression and the Initiation of Alcohol and Other Drug Use Among Youths Aged 12 to 17," stated that in 2005, 2.2 million youths had experienced a

major depressive episode in the past year. Among adolescents who had not used alcohol before, 29.2 percent of those who faced depression had tried their first drink in the past year, while 14.5 percent of youths who did not have a major depressive episode had tried their first drink. In addition, 16.1 percent of youths who faced depression and had not previously used illicit drugs began drug use; in comparison, 6.9 percent of youths who did not have a major depressive episode began drug use.

The rates of first-time use for specific drugs, such as marijuana, cocaine, heroin, hallucinogens, inhalants and nonmedical use of prescription drugs showed a similar association between past-year depression and drug initiation. The rates of drug initiation were higher for youths who reported depression in the past year than for those who did not.

While 8.8 percent of youths overall reported depression in the past year, the rate grew gradually with age. Among 12-year-olds, 4.3 percent had faced depression in the past year, but the percentage climbed to 11.9 percent of 17-year-olds. Among young women, the rate of depression was almost triple that for young men — 13.3 percent compared with 4.5 percent. Rates across racial/ethnic groups were similar.

According to the 2005 estimates, 2.7 million youths — or about 15.4 percent of youths who had not previously tried drinking — took their first drink during the past year. Additionally, 1.5 million youths (7.6 percent of previous nonusers) used drugs for the first time.

The National Survey on Drug Use and Health is an annual survey sponsored by SAMHSA. The survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence. Copies may be obtained free of charge by calling SAMHSA's Health Information Network at 877.726.4727. Request inventory number NSDUH07-0503. ■

Interviews with the authors of books for counseling professionals

Supervising the School Counselor Trainee: Guidelines for Practice
by Jeannine R. Studer



Today's school counselors are helping students face a wider range of stressful issues than ever before. School counselors have taken on

ever-expanding roles, providing assistance in a variety of areas to growing numbers of students.

These increased demands have placed much greater emphasis on making sure school counselors-in-training are ready to provide students with the real world skills necessary to manage the stress and problems they face on a daily basis. *Supervising the School Counselor Trainee* is a practical guidebook meant to make that training process easier and more effective.

The book grew out of Jeannine Studer's experiences as a school counselor, counselor educator and coordinator for counselor education programs. It provides materials, forms, case studies and other information that can make the job of overseeing a school counselor training program, or serving as a mentor or supervisor for counselor trainees, an easier, more uniform and more effective experience.

Studer is an associate professor and school counseling coordinator at the University of Tennessee in Knoxville. A former high school counselor, she developed the first school counselor program at Heidelberg College in Ohio and was co-coordinator of the school counseling program at California State University, Stanislaus. She has published numerous articles related to school counselor education.

Counseling Today: What prompted this book?

Jeannine Studer: When I began as a high school counselor, I was fortunate in having an experienced school counselor mentor me, but there were still numerous situations for which I felt unprepared. Later, as a school counselor educator, I realized there was a lack of consistency in the ways school counselor trainees were being managed in the schools. Part of the problem was that experienced counselors who volunteered to serve as supervisors were lacking in training and materials to help them provide a uniform, effective level of supervision for their trainees. This book is meant to help remedy that.

CT: Are school counselor supervisors the main audience for this book?

JS: They certainly are a primary audience. This book provides practical information, forms and other materials to help them better understand their roles as supervisors and mentors, and to help make the supervisory experience more successful and satisfying. But the book also provides a range of materials for the person responsible for training school counselors to serve as supervisors. Too often counselors find themselves in such roles with no real training or background on how to effectively supervise counselor trainees.

We've also included a range of materials to help school counselor trainees feel more at ease as they enter this field. In addition, the book contains experiential activities, case studies, resources and other materials to make the practicum and internship courses more manageable.

CT: This appears to be a very practical, hands-on approach to school counselor training.

JS: It definitely is. School counselors tend to be very busy people. We wanted this to be a clear how-to book. While I hope that program supervisors and school counselor supervisors will take the time to reflect and assess the strategies most appropriate to each individual trainee, the main goal of this book is to provide a very practical and useful aid in managing an effective school counselor training program. That's why we've

included not only background on various approaches to school counselor training but also exercises, case studies and reporting forms that supervisors can use.

CT: What do you see as some of the most critical material in this book?

JS: I believe that the exercises we've included in each chapter are essential for learning about the supervision process and one's own role in supervision. We designed these activities for self-reflection and as a means for determining areas in which additional knowledge, skills or behaviors are needed.

CT: What are the major issues you see facing school counselor education programs and those counselors supervising counselor trainees?

JS: Role identity is still one of the biggest challenges facing the school counseling profession. When students learn about the benefits of a developmental school counseling program, but then receive supervision in a traditional, reactive program, they find it difficult to reconcile their classroom knowledge and the real world they're facing.

While the American School Counselor Association and the American Counseling Association have become strong advocates for the profession, school counselors are still being used as administrative assistants and clerical workers in too many schools. Supervisors need to be willing to be agents of change while working with counselor educators in transforming their programs to ones that will benefit all K-12 students.


Supervising the School Counselor Trainee can be ordered directly from ACA (Order #78068). The book is available to ACA members for \$27.95 or to nonmembers for \$42.95. Order by visiting ACA's online bookstore (www.counseling.org) or by calling the ACA order line at 800.422.2648 ext. 222. ■

John Lough is a communications consultant for ACA. Contact him at behindthebook@counseling.org.

Letters to the editor: ct@counseling.org

Supervising the School Counselor Trainee

Jeannine R. Studer



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Please include \$6.75 for shipping of the first book and \$1.00 for each additional copy.

"As a school counselor for more than 20 years, a site supervisor, and an adjunct instructor for school counseling practitioners statewide and overseas, I can say without reservation that Jeannine Studer has made an outstanding contribution to the field with this pioneering book. She provides a clear road map for counselors who endeavor to set trainees on their site experience on their journey toward a positive and meaningful educational experience."

— Michael Bundy PhD
School Counselor, Oak Ridge, TN

This book provides a much needed set of practical guidelines that explain the "how to" of school counseling supervision for school counselor supervisors, school counselor trainees, program supervisors, and counselor educators. Studer and her co-training authors choose current supervisory models and trends in supervision, the supervisor's role in each stage of the supervisory process, the relationship between the ASCA National Model and supervision, the use of technology, legal and ethical issues, working with difficult trainees, creative supervisory techniques, and the evaluation process. In addition, the numerous training exercises, forms, case examples, questions for reflection, supervision resources, and ethical guidelines found in this manual help to clarify and facilitate the supervision process. 2006 220 pages

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health support to the entire Virginia Tech community. “Our (original) goal was really just how we get through the next 24 hours,” Lawson says, speaking of the immediate aftermath of the event. A memorial convocation in honor of the victims was already being planned, and the Mental Health Advisory Group anticipated it would be very difficult for the entire community. “We felt strongly that there needed to be a mental health presence at the convocation,” Lawson says.

It was decided that most of the counseling work done by community volunteers and American Red Cross volunteers would be supportive in nature, Lawson says. Individuals in need of further counseling would be referred to the Cook Counseling Center. Wearing badges and purple armbands, mental health professionals passed out fliers describing what people might experience in the days following the tragic event. As Lawson explains, the mental health professionals approached the situation from a standpoint of prevention and simply tried to communicate that counseling services were available to anyone who needed them.

The Virginia Tech administration canceled classes the rest of the week, and many of the students went home to be with their families. But in preparation for their return, the Mental Health Advisory Group made calls for additional mental health support. The New River Valley Community Services Board organized a quick refresher course on brief trauma counseling for the volunteers. When classes resumed on Monday, April 23, more than 200 mental health volunteers were walking the halls and campus grounds, consoling students and watching for anyone showing signs of extreme emotional distress. Lawson made certain that mental health teams were in each of the classes that had lost a student as well as in each of Cho’s former classes.

“I was very clear with all the mental health teams that I wanted them to use language similar to this: Anything you want or need in support of your recovery we will try to help you with,” Lawson says. “I didn’t want anybody to think, ‘I have to be sicker than that kid in order to go get counseling.’ I wanted them all to know that anything they wanted, they could ask for. The door was open even if they just needed to come and say they were still so angry about this or they were still scared.”

Lawson was shocked to hear counselors in two of Cho’s classes report that students hadn’t even known he was part of their class. But in other classrooms, students struggled with feelings of guilt because they hadn’t picked up on Cho’s strange behaviors. Many students were questioning themselves and wondering if they could have done something to prevent the tragedy.

Many people were still scared to return to campus on the Monday following the shootings; on Tuesday, the grief really began setting in. “That is something that we should have predicted but didn’t,”

Lawson says. “At the end of Monday, we thought that the day (had gone) better than expected.” But the team hadn’t realized that many of the students were simply dealing with the anxiety of trying to get back to their normal routine. Once their initial anxiety wore off, much stronger feelings — fear, anger, grief — began to surface.

In addition to being in classrooms and dorms, counselors also made their presence known in the dining facility. Lawson received reports that many of the students in the dining facility were withdrawn and not making eye contact with the counselors. He decided that perhaps the cafeteria needed to be a place where students could go to get away from reminders of what had happened. He told the mental health team not to go back there the following day. However, soon thereafter, he received a call from the manager of the dining facility saying his employees were having a difficult time controlling their emotions after seeing so many upset students.

“The staff members who were serving lunch and taking the students’ money didn’t know what to say or what to do, so they were crying. It was just a very different experience on the second day of class,” Lawson says. He sent employee assistance program counselors to the dining hall with some of the volunteers to work with both the staff and the students. Dining hall employees were coached in comforting and appropriate things they could say in their encounters with the students.

In the weeks since the shooting, Lawson has begun getting back to a normal routine himself. “The day or two after the shooting — and I took this right off the ACA website — I made sure I went to the gym. As hard as it was to drive away (from the campus), it was important for me to do it. I’ve been talking to people that I know and trust, and I’ve been really selective about what I’m able or willing to take in with the news. There was nothing useful in the news after the first few days. They just wanted us to tell them how bad we are hurting.”

By throwing himself into the response efforts, Lawson says he was initially able to cope with the events. He knew, however, that eventually he needed to stop compartmentalizing and address his own self-care. “I went and saw one of the counselors, and that is probably going to continue for a while because something like this is life-changing, and I want it to be life-changing in a positive way, not a negative way.” He also hopes that in watching him, his students have witnessed a very practical example of the importance of counselor wellness as well as the need to be alert for warning signs of compassion fatigue.

A meaningful cheer

As part of the initial group of mental health responders, Bodenhorn quickly gathered informational materials on mental health and the services available to pass out to students. The director of the university’s Cook Counseling Center, Christo-



Courtesy of Virginia Tech photo library

Many students openly mourned at a convocation held the day after the shootings.

pher Flynn, had been in his position less than a year, Bodenhorn says, but was very familiar with trauma response. Flynn was at Loyola University in New Orleans during the Hurricane Katrina crisis.

“He had all of this background, which was of great benefit to us,” Bodenhorn says. “He was very clear in the planning meetings that the way we were going to go forward with this was not with the assumption that everybody is going to fall apart and need critical care. How people are going to respond to this was going to be an ongoing process.” Grief, she adds, was treated as a normal reaction to an abnormal situation.

The memorial convocation held on April 17 was extremely emotional for

had not moved from their chairs, so those are the ones I went and checked in with. Every one of them just wanted a little time to get a grip on the overwhelmingness of it. The last student I talked to knew five of the victims. He expressed to me that each of those five students who died would have wanted the cheer. It was like the convocation was for the rest of us, but the cheer was for them. That made sense to me and really helped me.”

She added that many people also appreciated the memorial message boards that were put up around campus so the university community could write to the deceased. “There was a great outpouring,” Bodenhorn says, “and it was a great avenue for students, faculty and the com-

“I wanted them all to know that anything they wanted, they could ask for. The door was open even if they just needed to come and say they were still so angry about this or they were still scared.”

— Virginia Tech counselor educator Gerard Lawson

those attending. President George W. Bush, Virginia Gov. Timothy Kaine and several distinguished guests from the university offered their condolences, prayers and encouragement. Perhaps the most inspiring message of hope came from renowned poet and Virginia Tech English professor Nikki Giovanni, who closed her address by saying, “We are the Hokies. We will prevail. We will prevail. We will prevail. We are Virginia Tech.”

“Whoever managed the convocation was a genius from my perspective,” Bodenhorn says, taking a moment to collect herself. “I will always remember the statement, ‘You go where you get the most hugs.’ That was the directive to the students.” At the end of the convocation, students with tear-streaked faces belted out the Hokie cheer. At first, Bodenhorn says she was appalled, but then the spirit and emotion behind the cheer grew to feel right.

“Afterward, I went back into the coliseum. There were about five people who

community to just write messages. I remember one that was to Ryan Clark, one of the resident assistants. It said, ‘Ryan, thank you for keeping my son safe.’ And there were some (messages) directly to Cho, about recognizing the pain he must have felt in his life.”

An avid tennis player, Bodenhorn is trying to maintain her tennis schedule and taking time out to care for herself after providing care to others in the emotionally intense days after the school shootings. “Hitting things is very productive these days,” she says of her tennis schedule, “and I’ve seen a counselor. I’m reconnecting with people and friends in my past who I had lost touch with, and that’s been very helpful. It’s going to be a long process for all of us.”

Lending a hand

Sam Gladding, a former president of ACA, wrote to Lawson and Bodenhorn to offer his help soon after the magnitude of the event became apparent. Gladding,

along with Donna Henderson and Laura Veach, his colleagues in the Wake Forest University Department of Counseling, arrived on the Virginia Tech campus the Monday morning that classes resumed to join a pool of mental health professionals and physicians volunteering to help the students, staff and faculty. Working in pairs, the mental health teams were respectful of how the professors wanted to address their returning students. The professors were told that the tragedy needed to be acknowledged and that students should be made aware of the mental health teams in class. Some professors wanted to get back to business, while others were speechless, saying they had no idea how to even start class again.

"There was a wide variance on how the professors wanted to use us," Gladding says. "We were there talking generally to classes. We weren't there to do long-term counseling but more like psychological first aid and let them know what services were available. We encountered and talked with students who knew those who had been killed or wounded, and we talked to students who were more on the periphery and did not know someone personally but still felt violated in the sense that their wonderful, tranquil institution had experienced this kind of violence. I think everyone was affected in some way."

Gladding was very impressed with how well Virginia Tech planned its mental health response and recovery services. "The volunteers were utilized well," he says. "Gerard and Nancy were right at the control center. They are heroes in my book. It's probably some of the best implementation that I've ever seen, and I worked after 9/11 in New York. I just think Virginia Tech did it as well as anybody could and continues to do it as well as anybody can." Gladding returned to the Virginia Tech campus to help support the mental health staff during the graduation ceremonies that took place in mid-May, roughly one month after the shootings took place.

Hindsight is 20/20

One issue that became very clear to university officials and emergency responders after the deadly school shootings was the lack of a centralized emergency response headquarters and plan at Virginia Tech. "The (American) Red Cross has a very clear protocol on how things are supposed to run in an emergency, but one of the problems we had as a university is that we are so decentralized," Lawson says. "When an emergency happens, you need some centralization." Issues arose when the American Red Cross arrived at the scene and began asking who was responsible for certain populations on campus. The university supplied multiple answers, depending on whether the population in questions involved students, staff or faculty.

"There needs to be a much clearer idea of who is going to do what in an emergency situation like this," Lawson says. "There needs to be a mechanism that says when these things happen, this is how the process needs to work. But the one thing that worked well was the fact that there wasn't any turf issues. Every-

body showed up and said, 'How can I be useful?'"

Almost immediately after the gunman was identified, the media and many other people began scrutinizing Cho's past mental health history, searching for "red flags" that were missed in hopes of explaining how the deadly incident had occurred. Lawson doesn't believe a simple answer exists, nor does he think a single agency or person is to blame.

"I don't think all the people involved had all the right pieces at the right time," he says. "The red flag question is one that keeps coming up, and after the fact, it's easier to see. It's hindsight." At one time, Cho was detained temporarily at a mental health facility but was released after a judge ordered him to seek outpatient treatment. Newspapers such as the Washington Post have reported that Cho never received the court-ordered treatment, raising questions about the state's mental health system.

"I'm not sure that anyone in the moment could have said these are the things that we could force this person to do," Lawson says. "Most of my clinical experience has been working with people in the court system, and there are a lot of scary people who come to counseling just to sit in that chair because someone makes them go. Honestly, if we want to use hindsight, we need to look back 20 years and try to figure out along the way where the system failed to support this kid and his family. Were there opportunities along the way that we can learn from in the future? It's not a popular thing to say these days, but I think in many ways the shooter was as much a victim as everyone else."

Adds Gladding, "I don't think you can make someone either seek counseling or benefit from counseling. Trying to force mental health and commitment are not an easy task, and people can find themselves released if they appear not too dangerous to others or themselves. There are people who are very good actors. I'm not sure about the blame part from all I've heard. People sincerely tried to get him help. It's much easier to speculate when you are not there in the moment."

Gov. Kaine has appointed an eight-member commission, headed by retired State Police Superintendent W. Gerald Massengill, to investigate the details surrounding Cho and how the events unfolded. The first public meeting convened May 10. Additional meetings are scheduled, and reports are to be completed by the fall.

The review panel will study the response of state, university and local agencies to the tragedy, including medical care for those who were injured, medical examination of those killed, counseling for university students and employees, and services for victims' families. The university is cooperating with the review panel and is conducting its own reviews of safety, telecommuni-



Counselor educator Gerard Lawson posed with two of his graduate students, Jennifer Slosker and Stacey Lilley, at the recent commencement ceremonies.

cations and information-exchange protocols.

Today, employee assistance program counselors remain vigilant for the Virginia Tech staff and faculty who remain on campus, and the local community services board has agreed to provide additional student assistance. ACA member Charlotte Amenkhienan, a licensed professional counselor with the university's Cook Counseling Center, says the facility will remain open over the summer. It will continue to serve students affected by the events, including those who just graduated and students who aren't currently enrolled in classes but remain in the area. The counseling center will also be working over the summer to review its internal procedures, Amenkhienan says. Additionally, Lawson is working with ACA in hopes of providing pro bono counseling services to those Virginia Tech students who have left campus and the surrounding area.

Looking forward

Many described the recent graduation ceremonies at Virginia Tech as bitter-sweet. It was a time filled with the celebration of accomplishments and the hope of new beginnings, but also sorrow at the reminder of lives lost. During graduation on May 11, the university president presented the families of the deceased with class rings. The following day, the deceased students were awarded diplomas posthumously at individual college and departmental convocations. Lawson

described the memorial portions of the ceremonies as generous and thoughtful, but realizes it had to be difficult for the parents of the deceased to watch as hundreds of other students walked across the stage to receive their diplomas. There was no mention of the gunman at the graduation ceremonies.

Despite witnessing the immediate aftermath of a horrible event that will live in history, Lawson is already looking toward the future. "We aren't going to squander the goodwill that people have extended to us. We have felt it, and it's been palpable on campus, the support from all over," Lawson says. "That's going to help us as we move forward. At the end of the day, the students, alumni, faculty and staff at the university are going to take charge of how we want to be remembered. It's not going to be how we were portrayed on the (TV news) networks during our darkest hours. When people look back, they are going to see what it really means to be a Hokie. We will not be defined by this tragedy." ■

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Hokie Spirit Memorial Fund

To remember and honor the victims of the tragic events of April 16, Virginia Tech University has established the Hokie Spirit Memorial Fund to aid in the healing process. The fund will be used to cover expenses including but not limited to:

- Assistance to victims and their families
- Grief counseling
- Memorials
- Communication expenses
- Comfort expenses

Checks should be made out to Virginia Tech Foundation Inc., with the gift designated for the Hokie Spirit Memorial Fund on the memo line. Send checks to: Hokie Spirit Memorial Fund, University Development (0336), Virginia Tech, Blacksburg, VA 24061.

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responsibility for the greater good. To speak of “self” or “selves” capable of existing as separate from the collective is inconceivable. In most of these societies, a person’s uniqueness is highly esteemed and valued but always in relation to the social responsibility of working toward the common good and well-being of all people.

Culture, history shape dynamics

Among most Latin Americans, the processing and authentic expression of emotions is key to fostering growth in relationships. The Argentine hosts of the Third Counseling Congress of the Americas communicated their hospitality by connecting in meaningful and enriching ways through the free flow of emotions. The quality of the relationships established at the conference reflected the practice of counseling in the therapeutic context. Bodas, along with his team, made sure that participants felt included and had an opportunity to share their stories, experiences, research and concerns about counseling in Latin America. The sharing took place within an atmosphere of trust, respect, mindfulness and mutual accountability. The responsibility of listening to each person was a central and sacred value throughout the conference. While there were often language barriers, plenary sessions were carefully translated and presented in both English and Spanish.

Latin American counseling leaders George Vera (Venezuela), Mario Zumaya (Mexico), Andres Sanchez Bodas (Argentina) and Esteban Montilla (Venezuela and San Antonio, Texas) challenged participants to claim their transforming role as counselors with pride. They pointed out that the discipline of counseling is emerging in Latin America at a time when there are roughly 20 mental health practitioners per 100,000 inhabitants. While acknowledging that legislation and professional standards for counselors in Latin America are essential, they said that the crucial amount of services that need to be provided by all professionals must also be taken into consideration. They also warned that counselors do not have time to skirmish with other mental health professions such as psychology, psychiatry and social work. They believe the mental health terrain is so vast in Latin America that there is space and a need for everyone.

Latin American professional counselors, as agents of change, are committed to listening to marginalized populations. Culturally, the counselors are sensitive to all forms of suffering and colonization. Their collective history involves the experiences of people in power “kidnapping” professions such as theology, sociology and psychology and proposing theoretical stances that support greedy and exploitative interests, hegemony and methods of control. This was evident

throughout the greater part of the 20th century when many European and North American mental health professionals held views that people of color were anatomically, intellectually, physiologically, neurologically and psychologically inferior. Latin American counselors are keen to the fact that Carl Jung, while presenting at an international conference in 1928, cautioned his White American audience to be aware that association with “lower races” such as Negroes would pull them down. Pioneers in the intelligence movement such as Lewis Madison Terman and Alfred Binet considered Spanish-Indian, Mexicans and Negroes genetically abnormal and held that no amount of schooling would enable them to be capable citizens. Today, Latin American counselors, as a group that shares a history of collective colonization, work cautiously and diligently not to replicate paradigms of discrimination.

Counseling congress attendees recognized and celebrated emerging indigenous theories and practices of counseling in which people are approached from a pluralistic and holistic paradigm and carefully understood from a cultural and social context. The presentations at the conference gave witness to the *mestizo*-hybrid spirit of the Latin American culture. Traditional European and North American counseling theories and practices were discussed with respect, while always affirming the emerging indigenous approaches.

Future trends

Participants committed to advancing the counseling profession in Latin America by concentrating on an effort to help human beings heal and flourish. To advance their vision, the conference leaders and attendees created the Sociedad Interamericana de Counseling (Interamerican Counseling Society, or SIC). The purpose of this new organization is to generate a space for advocacy, research, education, certification, reflection and collegiality within the Latin American counseling community. Zumaya, a counseling advocate and leader from Mexico City stated, “The creation of the SIC is an egalitarian and inclusive effort where people from all ethnicities and backgrounds are welcome.” Conference attendee Aliria Vilera, a scholar from the Universidad de los Andes in Venezuela, said that “the SIC with its plurality and inclusiveness will help Latin American counselors to fight extreme poverty, sexism, discrimination and human exploitation.” Indeed, the SIC was created in the spirit of social justice and with the intention of promoting excellence in the practice of counseling by connecting the efforts and scholarship of educators, researchers and practitioners from more than 20 countries.

The SIC currently has several efforts under way to promote the profession:

- The Comité de Acreditación de Programas Educativos y Centros de Counseling will accredit counseling and related educational programs and counseling centers in Latin America.

- The Comité de Certificación de Profesionales del Counseling is charged with certifying technical and professional counselors in Latin America.
- The *Interamerican Counseling Journal*, an online journal created to promote SIC’s ecological vision, will publish papers in multiple languages reflective of the diversity of the SIC membership.

The first meeting of the SIC will take place in Managua, Nicaragua, April 14-19, 2008. The SIC chose this location because it represents the struggles characteristic of many Latin American communities. In Managua, the unemployment rate is 30 percent and minimum-wage workers make only \$80 a month. Forty-five percent of the population lives in extreme poverty, which equates to earning less than \$1 a day.

“The location is suited for the SIC in several ways,” explained Montilla, the organizer for next year’s conference. “First, it allows for a centralized location, which considers the convenience and economic hardship involved in travel and other expenses for attendees, and second, the SIC is planning an effort that will allow the attendees to make a concrete contribution to the well-being of the community.” The latter effort is being modeled after the Day of Giving events that social justice advocates organized and hosted in Atlanta and Detroit to coincide with American Counseling Association conventions. The Day of Giving event in Managua will allow all conference attendees to spend a day providing volunteer services to assist a community struggling with the destructive aftermath of civil war and natural disaster.

The challenge of educating enough professional counselors to meet community needs in Latin America will continue for some time. Conference attendees Montilla, Vera, Bodas and Dana Comstock discussed joint ventures for master’s and doctoral programs in counseling between St. Mary’s University in San Antonio, Texas, the Universidad del Zulia in Maracaibo, Venezuela, and Holos San Isidro College in Buenos Aires, Argentina. For more information on these programs and the SIC, visit the official website, available in four different languages, at www.counselingamericas.org. ■

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In search of radical thinkers: Beyond the culture of niceness

It has been said that life is filled with paradoxes. None of us can understand happiness unless we have experienced sadness. Nighttime is the complementary dimension of daytime. Death is the final outcome of our physical lives.

Two additional paradoxes come to mind when thinking about the present relevance and future viability of the counseling profession:

- The need for radical thinkers who challenge and expand the conventional thinkers in the profession
 - The need to address the dynamic tension that exists between radical thinkers who advocate for the implementation of revolutionary changes in the profession and persons who maintain conventional helping approaches in the field
- Over the past four decades,

multicultural-social justice counseling theorists, researchers and advocates have played an important role in these two paradoxes. In the late 1960s and early 1970s, pioneers in the multicultural-social justice movement asserted that the culturally biased assumptions inherent in all counseling theories and practices were not only ineffective but also harmful when used among persons from diverse cultural-ethnic-racial groups in our society.

Operating from this perspective, these pioneers advocated for the development and use of culturally sensitive and respectful helping interventions that differed in many ways from the manner in which counselors were traditionally trained to work. Furthermore, they pointed out that the goals counselors should strive to achieve included ameliorating the psychologi-

cal distress that many clients were experiencing in their lives and helping to create healthier and more just schools, universities, organizations and communities. These pioneers also made it clear that such interventions would require counselors to work outside the comfort of their offices and implement new professional roles and services in the field.

Traditional counseling's harmful impact

In asserting their "radical" ideas, the multicultural-social justice counseling pioneers repeatedly emphasized two fundamental ways that traditional counseling theories and practices were harmful to individuals in racial-ethnic groups that are marginalized in our society. First, they pointed out that many of the basic values and beliefs underlying traditional counsel-

ing theories were in direct opposition to the values and beliefs of persons from devalued and oppressed cultural-ethnic-racial groups. This included the emphasis that traditional counseling theories and practices placed on individualistic and intrapsychic considerations. This was in contrast to the heightened value and strong belief that persons in diverse cultural-racial groups held about collectivism and interpersonal-environmental determinants of mental health.

Another obvious difference was the lack of attention traditional counseling theories placed on spirituality, as opposed to the strong role that spiritualism played in the psychology of many persons in culturally-different groups in the United States. The pioneers of the multicultural-social justice counseling movement were cognizant of the adverse impact

of imposing such culturally biased values and beliefs on clients from diverse groups and backgrounds. These clients were already adversely affected by the injustices that they routinely encountered in their lives.

Second, these "radical" thinkers promoted the notion that it is harmful to help clients learn new coping strategies that enable them to more effectively adjust to unhealthy environmental conditions without also working to foster positive changes in their clients' environments. In making this point, these pioneers pointed to the need for counselors to embrace new roles that would move them beyond the intrapsychic focus that had captivated the profession. These new roles included encouraging coun-

Continued on page 51

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selors to work as client advocates, social justice consultants, organizational development specialists, community organizers and coalition builders.

Clearly, the counseling profession has made important strides in promoting the new roles outlined by pioneers in the multicultural-social justice counseling movement. However, many persons in the field remain content to focus primarily on their clients' intrapsychic issues, while refraining from working to promote positive environmental changes. In fact, some counselors continue to state that it is simply not appropriate for counselors to "rock the boat" by working to create systemic changes in the organizations, schools, universities and communities where they work and live. These individuals are willing to conform to a status quo that perpetuates various forms of injustice, oppression and structural violence in our society. In the process, they are also inadvertently supporting the growing "culture of niceness" that has crept into our profession and many of the organizations, schools and universities where counselors work.

The culture of niceness

Joseph White, a leader in the field of Black psychology, was among the first to coin the term the "culture of niceness." According to White, this increasingly prevalent phenomenon is designed to promote an atmosphere of "niceness" and "civility" among all persons who make up the different organizations, schools and universities in our nation. Although this may sound reasonable, he asserts that the insistence on being "nice" and "civil" in the workplace has effectively undermined the right and responsibility of multicultural-social justice counseling advocates to address controversial social justice issues in their places of employment.

The culture of niceness is ostensibly designed to create a heightened level of respect and safety among all students, faculty members, administrators and staff persons. However, in the process, individuals are effectively constrained from expressing passionate views about various controversial social justice issues that adversely impact millions of persons in marginalized groups. In organizations that promote a culture of niceness, individuals are discouraged from raising controversial issues even when those issues relate directly to the educational and mental health services and the general climate of organizations, schools and universities where these individuals work.

This sort of discouragement is often done informally as part of the organizational socialization process. The informal assimilation process might include "organizational messages" intended to communicate that it is not "acceptable," "polite," "appropriate" or "professional" to raise controversial issues at work, even if those issues are directly relevant to the mission and purpose of the organizations or communities in which counselors are employed.

On a basis of a review of the multicultural counseling literature and data from our own research findings, we have found a number of common responses that occur when individuals attempt to address controversial social justice issues within workplaces where a culture of niceness has taken root. These responses include the efforts of administrators, faculty members, students and other staff persons to portray outspoken multicultural-social justice advocates as "troublemakers" and "disgruntled workers" who make other persons feel "uncomfortable" and "intimidated" when they raise controversial social justice issues. Such discrediting accusations are often accompanied by additional efforts to silence or eliminate these social justice advocates by formally or informally accusing them of creating a "hostile work environment." Although these aspects of the culture of niceness violate a person's First Amendment (free speech) rights and, in the case of counselor educators, undermine their academic freedom rights, these tactics are indeed effective in quieting the discourse about controversial social justice issues in many organizations, schools and universities.

The "quieting" effect of the culture of niceness contributes to the silencing of many counselor educators and practitioners, especially young members of the profession who feel particularly vulnerable in new employment settings. To substantiate these claims, we encourage readers to reflect on the following questions:

- How often do you hear counselors raising concerns about the ways in which cultural biases are manifested in the organizations, schools and universities where they work?
- How often do you observe counselors expressing concern about the manner in which various forms of institutional racism, sexism, heterosexism, ableism, ageism, anti-Semitism, anti-Muslim sentiments and/or other forms of cultural oppression continue to be perpetuated in the organizations, schools and universities where they work?
- How often have you and other counselors explicitly "named" these and other injustices to solicit support in ameliorating these complex problems at your school, university or organization?
- How often do you see counselors encouraging an honest discussion about the war in Iraq and Afghanistan on both moral and pragmatic grounds by promoting a peace ethic and a call to reprioritize the spending of taxpayers' monies at the organizations, schools and universities where counselors work?

For some in the counseling profession, the ideas presented above are viewed as not being appropriate or relevant for the work counselors should be doing in the field. But many others view these ideas as vital aspects of the work professional counselors need to be doing in an increasingly diverse, confusing and violent world marked by various injustices that adversely affect the mental health

and psychological well-being of millions of people.

Despite acknowledging the need to address these issues, many counselors are negatively affected by the culture of niceness that characterizes their work settings. This negative affect is reflected in:

- The hesitancy of many persons in the profession to name the cultural biases and injustices perpetuated within the organizations, schools and universities where they are employed
- The genuine fear many counselors experience when considering the negative reactions they are likely to encounter as a result of violating the informal values that underlie the culture of niceness

The paralyzing affect nurtured in organizations that foster a culture of niceness is real for many counselor educators and practitioners. However, the needs of many students and clients in marginalized cultural groups who are adversely impacted by the perpetuation of social injustices are also very real. These challenges require new approaches that extend beyond traditional counseling theories and practices. As many other persons who have been quoted in this column in the past have noted, the failure to effectively address these challenges will seriously impact the future relevance and viability of the counseling profession.


Given the important role that radical

thinkers in the multicultural-social justice movement continue to play in advancing the counseling profession beyond its current state of conventionality, we end this month's column by asking the following questions: Who are the radical thinkers in the counseling profession today? How are their ideas received by members of the counseling profession who continue to support conventional and time-honored helping theories and practices? How can we work toward addressing the paradoxical perspectives manifested by radical and conventional thinkers in the field in ways that will strengthen our profession and expand our effectiveness in promoting the dignity and development of persons from diverse backgrounds?

These questions will be the focus of next month's column. In exploring these questions, we hope readers will reflect on the importance of challenging the culture of niceness in ways that are consistent with the principles and spirit of the multicultural-social justice counseling movement. ■

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Letters to the editor: ct@counseling.org



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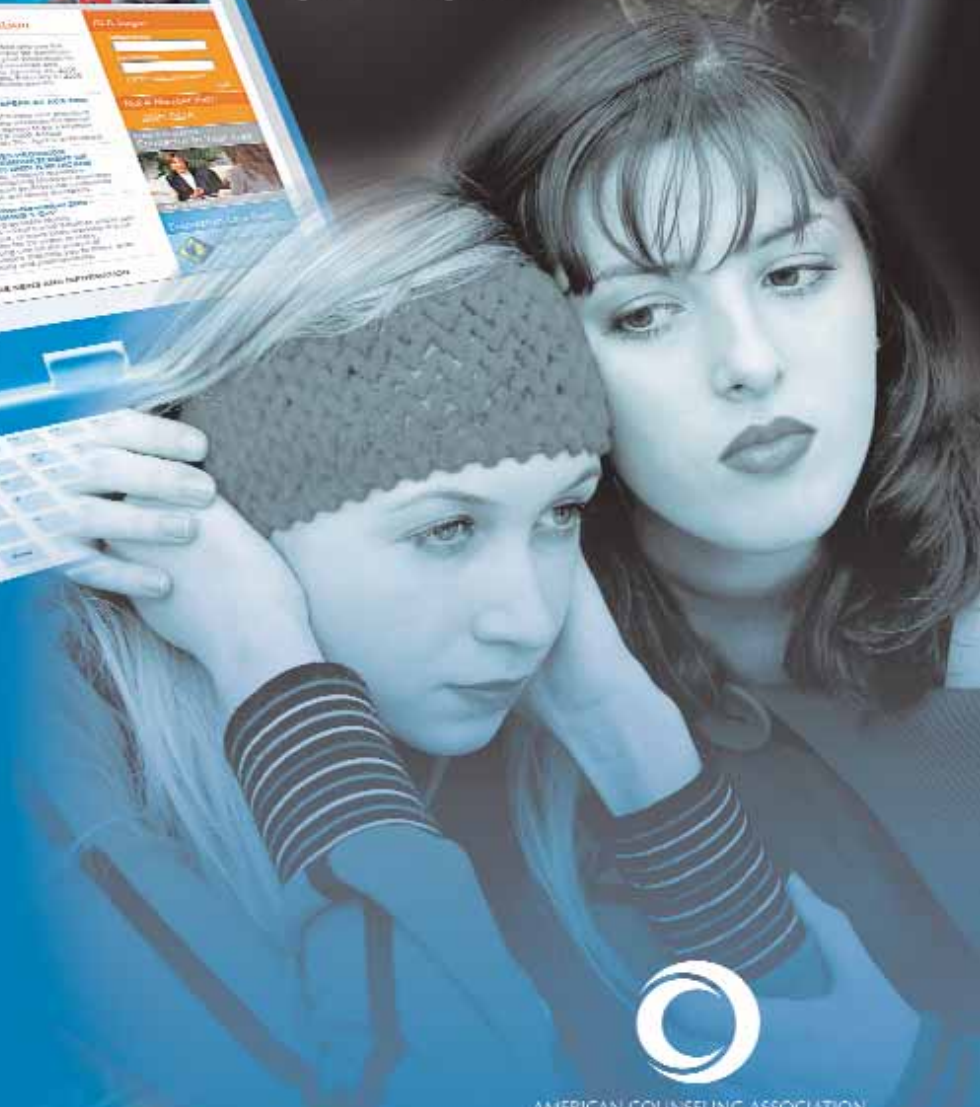
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MARYLAND

JOHNS HOPKINS UNIVERSITY Counseling Faculty Position - REOPENED

Clinical Community Counseling Coordinator

The Graduate Division of Education, Department of Counseling and Human Services offers graduate programs in School Counseling, Clinical Community Counseling, and Organizational Counseling as well as a variety of post-master's certificates. Courses are offered at three major centers and one off-site facility in the Baltimore-Washington area. The department is accepting applications for the position of an open-rank faculty member who will coordinate the Clinical Community Counseling Program. Responsibilities include teaching; advising; scholarly productivity; program development; and creating, maintaining, and enhancing relationships with human service agencies, federal agencies and businesses. Some local travel required.

Applicants must have an earned doctorate in Counseling, Counselor Education, or a closely related field with extensive experience in graduate counselor education and program development. A competitive candidate will have (a) relevant clinical experience as a professional counselor; (b) experience in and understanding of clinical community/mental health counseling; (c) experience with the CACREP accreditation process; (d) experience in urban issues and commitment to working with diverse populations; and (e) demonstrated capacity to collaborate with counseling faculty and staff. Some expertise in organizational/business counseling and prior grant-writing experience are desirable. Rank will be determined based upon the successful candidate's academic record and experience. Salary is competitive with excellent benefits including health insurance and tuition remission for family members. The position will remain open until filled. Letters of application and curriculum vitae should be forwarded to Connie Kinsley, Director Human Resources, Johns Hopkins University, 3400 North Charles Street, 203 Shaf-

fer Hall, Baltimore, MD 21218. Women and minorities are encouraged to apply.

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Partner with Product Management, Marketing, Sales and Account Management staff in their work with clients and the market to ensure delivery of high quality services and development of effective product communications and educational materials. 3. Develop and maintain cutting-edge expertise in substance abuse case management, management consult skills

and practices, and critical incident/risk assessment technologies. Provide expert support to all of LifeWorks, and specifically to the Substance Abuse Case Management, Management Line, Critical Incident and Work Issues teams through coaching, training, and intervening in critical situations. 4. Lead quality assurance efforts through the development of standards and methodologies to assure consistent service delivery to users/clients across all service delivery centers. Develop, review and report on service quality metrics and other metrics. 5. Serve as part of Eagan Management Team, sharing responsibility for call center metrics and on call responsibilities. Qualifications: This position requires a Master's degree in Human Resources, Management, or Behavioral Sciences and five to seven (5-7) years of experience in management position, and/or consultation to organizations. Position is one with a high degree of visibility and potential liability, requiring a high level

of resilience, maturity, versatility, and excellent judgment.

Extensive experience and strong demonstrated skills required in the following areas:

Substance abuse assessment/treatment. Employee relations. CISD/crisis intervention.

EAP/HR content. Demonstrated strong presentation and public speaking skills. Demonstrated strong project management skills. Strong written communications skills.

Ability to function as change agent and "lead by example. Ability to forge positive work relationships. Ability to monitor and analyze work patterns and resolve problems.

Conflict resolution and negotiation skills. Ability to foster individual and team development. Clinical licensure and/or certification strongly preferred.


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The following new vacancies are now available and are open until filled:

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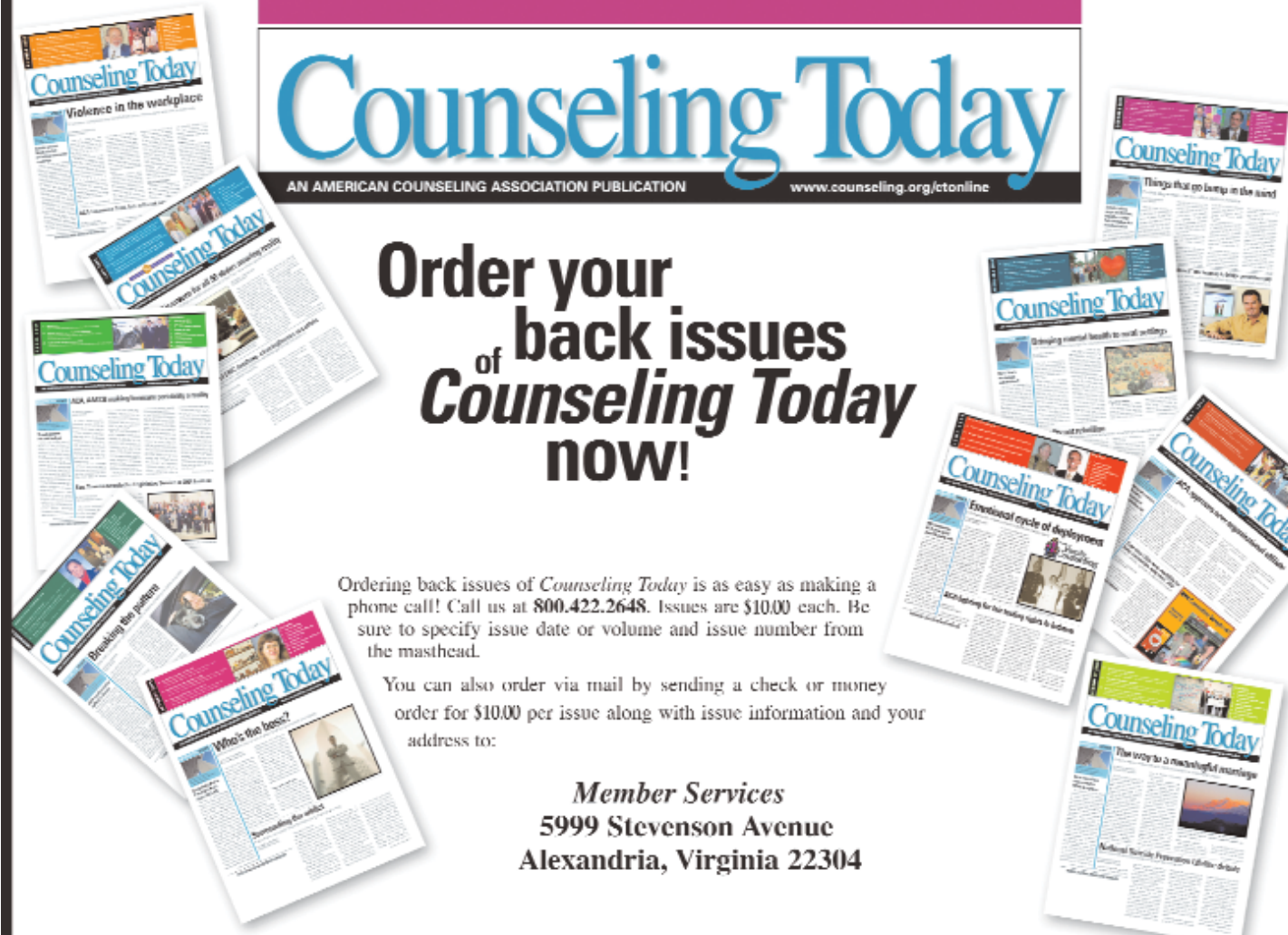
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