Reaching underserved client populations

Also inside:
- Counselor participation in DSM field trials
- Elementary school named after counselor
- Information on ACA, Division, Region elections
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Cover Story

Under the radar
By Lynne Shallcross
Numerous ACA members are actively reaching out to client populations that are hesitant to access counseling services or otherwise risk being overlooked.

Features

Reader Viewpoint
Counselors’ response to Mexican immigration
By Selma D. Yznaga and Manuel Zamarripa
Regardless of political perspective, counselors can demonstrate their commitment to human rights by practicing culturally responsive interventions.

Reader Viewpoint
Helping clients with limb loss
By Marvin Knittel
Counselors can play an important role in addressing the unique needs of amputees by helping them explore issues related to body image, self-concept and risk taking.

Reader Viewpoint
My beautiful mind
By Nzingha Dalila with Kaia Goodwin & Geoffrey Yager
A counselor’s personal experience with traumatic brain injury provides a new perspective on the Herculean effort it takes for certain clients to reclaim their life.

Special Series
Counselor involvement in DSM-5 field trials
By K. Dayle Jones
Field trials are the final opportunity to evaluate proposed new diagnostic criteria.

Opinion
Wouldn’t it be nice?
By Frank J. Lane
Rehabilitation counselors are sometimes left to question their general lack of recognition within the larger counseling profession.

Extras

New elementary school named for Pat Henderson
ACA, Division & Region election information
Voice Awards honor positive depictions of mental health issues
A new study released in October by the Cyberbullying Research Center found that one in 10 teens has received a threatening cell phone message from a romantic partner. The study, drawn from a random sample of 4,400 11- to 18-year-olds at a large school district in the southern part of the nation, also provided additional statistics that are cause for concern.

**Victims**
- 10 percent reported that a romantic partner had prevented them from using a computer or cell phone.
- 6 percent said a romantic partner had posted something online to publicly make fun of, threaten or embarrass them.
- Slightly more than 5 percent of boys and 3 percent of girls said a romantic partner had uploaded or shared a humiliating or harassing picture of them online or through a cell phone.

**Offenders**
- 7 percent of those surveyed admitted sending a threatening cell phone message to their romantic partner or preventing their romantic partner from using a computer or cell phone.
- 6 percent of boys and 4 percent of girls reported posting something online to publicly make fun of, threaten or embarrass a romantic partner.
- 5 percent of boys and 3 percent of girls admitted uploading or sharing a humiliating or harassing picture of a romantic partner online or through a cell phone.
When I heard this month’s cover story would focus on the topic of underserved populations, I started pondering possible reasons that some populations remain underserved. Is it due to a lack of funding? Is it because they are not aware of the services available to them? Is it possible that we, as counselors, tend to overlook them for some reason and fail to focus attention on them as we should? I am not sure what the ultimate reason is for this predicament.

In deciding to become counselors, most of us understood that this profession centers around the concept of service. Our jobs are about enabling our students and our clients to develop good problem-solving skills and empowering them to solve their own problems. Basically, we work ourselves out of a job. So how could we be missing (or underserving) certain populations or groups?

Then a light went off in my head, and I thought about how I became a counselor in the first place. You see, I was supposed to be a “real” doctor. You know, the one with an M.D. instead of a Ph.D. I graduated from high school when I was 16 and was ready to enter college as a freshman majoring in biology and chemistry. The problem was I had not been advised to take the courses I needed to take in high school to be successful as a science major. My high school counselors thought that because I could “speak so well,” I needed to be in an honors program for humanities, not a science-based program. Well, fast forward and, needless to say, organic chemistry was my personal undoing in college.

I was not used to failing. I was the smart one, the cute one and, yes, I could usually talk my way out of any problem or issue. This was not the case with my organic chemistry instructor, however, especially since I could not understand half of what he was saying because of his international accent. By the time I started to grasp some of his words, it was too late. When the quarter was over, I received the dreaded D! How would I explain this to my family, who took up a community collection so I could go off to school in the first place?

I marched over to speak with the academic adviser to see what help I might receive to get out of my predicament — and walked away even more confused. The word on the street was that if you wanted to graduate on time, you needed to stay away from the counselor’s (academic adviser’s) office. They would mess you up. But how could that be? Wasn’t it their job to provide you with the best service? Were they unhappy in their jobs? Was the university not paying enough to get the most qualified people to perform the job? Again, more questions with unsatisfactory answers.

I came to a crossroads. Should I continue to struggle in my chemistry classes or graduate on time with a degree in psychology and history? I just happened to have enough courses to pursue that route, and I could still make my family proud that I had a degree! Then, as they say, the rest is history. I took the so-called “easy” road (due to a lot of reasons that I can share with you later, if interested), but it led me to where I am
March 25, 2011

7:30 am – 8:30 am • Program ID #110
The Creative Arts in Counseling
Samuel Gladding
This session will focus on how the creative arts (music, literature, drawing/painting, dance/movement, and humor) can be used effectively in a variety of settings to help clients gain insight into problems and negotiate solutions to situations they bring to counseling.

11:00 am – 12:00 pm • Program ID #151
Counseling Children: A Core Issues Approach
Richard Halstead, Dale-Elizabeth Pehrsson, and Jodi Mullen
This session will teach you about the nature of client core issues, how to conduct a core issues assessment, and how to implement counseling interventions that help children address the core problem and establish lasting change.

2:00 pm – 3:30 pm • Program ID #213
The Essentials of Tough Kids, Cool Counseling: Evidence-Based Principles and Innovative Techniques
John Sommers-Flanagan and Rita Sommers-Flanagan
Four culturally diverse cases will be reviewed and analyzed to illustrate effective counseling practice; collaborative disclosure, goal-setting, and agenda making; rolling with developmental autonomy; and playful therapeutic activities.

3:45 pm – 4:45 pm • Program ID #276
Clinical Supervision in the Helping Professions
Patrice Moulton and Gerald Corey
The presenters will discuss roles and responsibilities of supervisors, the importance of the supervisory relationship, multicultural competence in supervision, ethical issues in supervision, legal and risk management issues, evaluation in supervision, and becoming an effective supervisor.

5:00 pm – 6:00 pm • Program ID #318
A Job Search Manual for Counselors and Counselor Educators: How to Navigate and Promote Your Counseling Career
J. Shannon Hodges and Amy Reece Connelly
The authors of this new book will present helpful information job seekers in the counseling profession should know before they commence their search. Topics to be discussed will include writing effective résumés, CVs, and cover letters, as well as employment trends, interviewing tips, and managing disappointment.

March 26, 2011

7:30 am – 8:30 am • Program ID #340
Cyberbullying: What Counselors Need to Know
Sheri Bauman
This session will provide current information about cyberbullying and cyberaggression and will offer prevention and intervention strategies for technology users across the life span.

10:30 am – 12:00 pm • Program ID #381
Creating Your Professional Path: Lessons From My Journey
Gerald Corey
Dr. Corey will discuss turning points in his personal and professional journey, the counselor as person and professional, developing a personal perspective on counseling theory and group work, becoming an ethical counselor, being mentored and mentoring others, creating a career in counseling, becoming a writer, and self-care.

2:00 pm – 3:30 pm • Program ID #442
Experiential Activities for Teaching Multicultural Competence in Counseling
Mark Pope, Joseph Pangelinan, and Angela Coker
This interactive session will highlight creative, thought-provoking, and challenging multicultural activities designed to increase students’ awareness, knowledge, and skills regarding human diversity.

3:45 pm – 4:45 pm • Program ID #503
Terrorism, Trauma, and Tragedies: A Counselor’s Guide to Preparing and Responding
Jane Webber and J. Barry Mascari
The two coeditors of Terrorism, Trauma, and Tragedies share inspiring stories and photos that illustrate meaning-making; healing; and posttraumatic growth from Haiti, New Orleans, Virginia Tech, September 11, and the earthquake in China.

5:00 pm – 6:00 pm • Program ID #524
Integrating Spirituality and Religion Into Counseling: A Guide to Competent Practice
Craig Cashwell and J. Scott Young
The presenters will discuss the recently revised spirituality competencies, the history of the competencies, how the new competencies were developed, and clinical applications of each competency. In addition, new chapters from their book, including chapters on mindfulness, 12-step spirituality, feminine spirituality, prayer, and ritual will be highlighted.
Executive Director’s Message

Is the pipeline too full?

A few years ago, we might have received a few calls at ACA headquarters each month from members who were having a tough time finding a job. Since that time, the frequency (and desperation) of these calls has increased significantly. For many, the tough economy has resulted in fewer new jobs. Related to this is the fact that counselor education programs continue to graduate caring, compassionate and dedicated individuals who, after a number of years and thousands of dollars in student loans, simply can’t find gainful employment in the counseling field.

The ACA staff and I hear from counselors (new as well as midcareer professionals) willing to relocate and take lower pay just to find positions in which they can impact people’s lives. Unfortunately, although some positions are out there and occupational outlook data suggest counseling is a growing profession with career possibilities, not enough openings currently exist for those who are so eminently qualified.

Is there something we can do about this unfortunate situation? Do we need to ask counselor education programs if it is viable, long term, to continue recruiting and graduating more counselors? Or can we impact public policy at local, state and federal levels in ways that would create more jobs for professional counselors?

I want to hear from you on this matter. It is critical that we look at this problem and come up with solutions to help our very deserving colleagues of yours. If it was within your power, what would you have government, graduate schools, community agencies and school systems do to address this problem?

Let’s begin a national (or even international) discussion about how to create, find and fund more jobs for professional counselors. I am well aware that the old “magic wand” doesn’t work quite as well as it used to, but perhaps if we generate enough discussion, we can begin to network, exchange ideas and create advocacy plans that will open a dialogue with and engage the interest and support of public policymakers, businesspeople and community leaders. It couldn’t hurt to try. We already know the result if we stand back and do nothing.

Perhaps it is time that we all do what we can to create just one more job for counseling professionals. Think about it. If our 27,000 professional members were successful at doing this for the 17,000 student members in our database, we would still have another 10,000 jobs for other counselors looking to move into new positions. And if those 10,000 moved into new positions, that would create vacancies in the jobs they left.

I know this all seems like a pipe dream, but we need to start somewhere, so why not think big? Let’s move this discussion out into the blogosphere, onto e-mail lists and into the general communities in which we live. So much need exists out there, and the counseling profession has so many who wish to work with individuals in need.

Don’t we owe it to those entering the profession and to those midcareer professionals looking to make an even greater impact with clients and students? I think we do, and I sincerely hope to hear from you on this matter.

As the calendar year closes out, let me thank all of you who are ACA members. The staff and I wish you a productive, peaceful and fulfilling New Year as we look ahead to 2011. And if you were an ACA member as of Nov. 1, 2010, remember to go online to vote for officers and board members! This year, we hope to significantly increase voter participation because moving the process online makes it easier to vote. To learn pertinent information about the candidates, go to the ACA website at counseling.org or turn to our election section in Counseling Today beginning on page 64.

Please contact me with any comments, questions or suggestions that you might have via e-mail at rye@ counseling.org or by phone at 800.347.6647 ext. 231.

Thanks and be well.
Don’t be so quick to dismiss the medical field

I saw Mr. [James] Hansen’s article (“Extending the humanistic vision”) in the October 2010 Counseling Today and started reading it with trepidation. Having been introduced to his opinion from his article in the Summer 2007 issue of the Journal of Counseling & Development in a recent class, I knew that his opinions and my own are vastly different.

I recognize that Mr. Hansen is taking an extreme stance in an effort to create controversy and thus promote conversation. However, he needs to take into account that he may be alienating those he is trying to reach. Both the medical and counseling fields recognize the increasing “medicalization” of everyday experiences. Both fields are also aware of the “quick-fix” mentality that exists in a majority of Americans.

Nevertheless, dismissing the medical field so broadly is not helping either side. Only recently has the medical field begun to acknowledge that an authoritative voice is not the best approach. If you type “patient compliance” into the American Academy of Family Physicians website, you will get back more than 1,200 responses discussing how to improve this aspect of care. You will also see the term “medical home” used a lot. What does this mean? It means the medical profession is recognizing that it does not have all the answers and is trying in its own way to reach out. Also refer to ACA Code of Ethics Standard D.1.a. concerning being respectful of different approaches. This is another reason to keep the medical field “in the loop.”

I worked in primary care for four years and started numerous patients on medicines. But I also provided referrals to counselors more often than not and made sure to listen to what my patients had to tell me. I agree that not every medical provider may take the time to do this. But why not reach out to the medical profession, meet it halfway and create better dialogue and better care? Is not the goal of both groups to help the individual be the person they are supposed to be, not necessarily change who they are or medicate them into oblivion?

Deanna Bridge Najera, MPAS, PA-C, Physician Assistant and Graduate Student in Mental Health Counseling, Shippensburg University, Shippensburg, Pa.

The American Psychological Association published guidelines for nonpsychiatric mental health professionals recommending knowledge of the medical model of psychiatric disease and basic introduction to the medications available. This is in complete disagreement with what Mr. Hansen stated, but I think it brings up an important point. As the ACA Code of Ethics notes, you need to acknowledge different approaches. Also look at Standard D.1.c., Interdisciplinary Teamwork, where we are to focus on the best care for the client. I recognize that many times, the medical approach is not the best approach for a mental health complaint. However, not being aware as counselors of the medical model, medications and medical approach can actually be a detriment.

I am going to end with a confession. I am part of the medical field Mr. Hansen so vehemently opposes.

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Deanna Bridge Najera, MPAS, PA-C, Physician Assistant and Graduate Student in Mental Health Counseling, Shippensburg University, Shippensburg, Pa.

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Editorial policy

Counseling Today welcomes letters to the editor from ACA members; submissions from nonmembers will be published in rare circumstances. Only one letter per person per topic in each 365-day period will be printed. Letters will be published as space permits and are subject to editing for both length and clarity. Submissions can be sent via e-mail or regular mail and must include the individual’s full name, mailing address or e-mail address and telephone number.

ACA has the sole right to determine if a letter will be accepted for publication.

Counseling Today will not publish any letter that contains unprofessional, defamatory, incendiary, libelous or illegal statements or content deemed as intended to offend a person or group of people based on their race, gender, age, ethnicity, religion, sexual orientation, gender identity, disability, language, ability, ideology, social class, occupation, appearance, mental capacity or any other distinction that might be considered by some as a liability. ACA will not print letters that include advertising or represent a copy of a letter to a third party. The editor of Counseling Today will have responsibility for determining if any factors are present that warrant not publishing a letter.

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A t 8:42 p.m. on Sept. 22, a college freshman posted his goodbye message on Facebook: “Jumping off the gw bridge sorry.” Authorities believe Rutgers University student Tyler Clementi then jumped off the George Washington Bridge in New York City, committing suicide after his roommate secretly recorded him being intimate with another man and allegedly put the video online for others to watch. Recently in Minnesota, a 15-year-old youth hanged himself after repeated harassment regarding his perceived sexual orientation. These are just two tragic cases in a spate of recent high-profile suicides believed to stem from bullying and harassment, and policymakers are expanding efforts to combat the problem.

On Oct. 26, the U.S. Department of Education Office for Civil Rights (OCR) issued guidance on bullying to elementary and secondary schools, colleges and universities that receive federal funds. Many schools and school districts have anti-bullying and anti-harassment policies concerning religious or sexual-orientation discrimination. However, student misconduct under such policies may also trigger school responsibilities under federal antidiscrimination laws enforced by OCR. According to the guidance, a school must take immediate and appropriate action to investigate what occurred once a school knows, or reasonably should know, of possible student-on-student harassment. A school must also take prompt and effective steps to end harassment if it has occurred, eliminate any hostile environment and prevent recurrence.

These responsibilities exist regardless of whether the misconduct is covered by a local anti-bullying policy or whether a student files a complaint, requests the school to act or identifies the harassment as a type of discrimination. A copy of the guidance is posted on the Department of Education’s website at ed.gov/news/press-releases/guidance-targeting-harassment-outlines-local-and-federal-responsibility. For more information from OCR, call 800.421.3481.

The guidance is part of a broader focus on the issue, as highlighted by ACA Executive Director Richard Yep in his October Counseling Today column. The Department of Education has posted a database of effective anti-bullying programs and research at bullyinginfo.org. Related information, including messages from the It Gets Better Project, is online at findyouthinfo.gov. The White House will host a conference on bullying and harassment early next year, and the Department of Education will conduct workshops on the topic around the country. Bullying prevention is expected to be a hot topic during reauthorization of the federal Elementary and Secondary Education Act.

For more information, contact Dominic Holt with ACA at 800.347.6647 ext. 242 or dholt@counseling.org.

Lame-duck session of Congress holds potential

Three major issues the 111th Congress is considering during its lame-duck session after the Nov. 2 elections could affect the counseling profession. Medicare is on the agenda because physicians face a 23 percent reimbursement cut starting Dec. 1 and another 6.5 percent cut on Jan. 1. Congress has regularly postponed physician payment cuts in recent years and is expected to do so again. ACA and its coalition partners have been urging Congress to include Medicare reimbursement of counselors and marriage and family therapists in any such package. Although congressional staff members have expressed support for our provision, they remain concerned about its costs. Congress might choose not to include Medicare benefit improvements in physician payment rate legislation passed this year, but the 112th Congress convening in January will be taking up Medicare legislation again, providing us with another vehicle to which we can attach counselor coverage legislation.

A second item on the agenda is finalizing spending for Fiscal Year 2011, including on education programs of importance to school counselors. Election-year politics tied up the annual spending bills this year, and federal programs are operating at FY 2010 funding levels until Dec. 3. Congress could pass a short-term funding extension until next year, when the new Congress begins, or it could try to wrap up spending bills in one omnibus package. Of note, the Senate Appropriations Committee has approved a $2 million increase, to $57 million, for the Elementary and Secondary School Counseling Program. This would mark the program’s highest-ever level of funding.

A third “must-pass” item legislation to authorize defense spending for FY 2011, which affects the TRICARE program. ACA is pushing for language to allow counselors to practice independently within TRICARE. Only counselors are still required to operate under physician referral and supervision even though the program covers nonphysician mental health professionals. Language in the House defense authorization bill (H.R. 5136) charges the Department of Defense (DoD) with developing criteria to allow counselors to practice independently but lets DoD decide what those criteria should be. The Senate’s bill (S. 3454) includes detailed language specifying very narrow criteria counselors must meet to practice independently. ACA is working to generate support for compromising language to establish independent practice authority under TRICARE for all highly qualified licensed counselors.

For more information, contact Scott Barstow with ACA at 800.347.6647 ext. 234 or sbarstow@counseling.org.

Suicides shed light on bullying
Congress returned to Washington after the Nov. 2 elections for a lame-duck session to wrap up work on a few items still remaining on its agenda. Among those items is responding to two scheduled cuts in physician reimbursement rates under Medicare: a 23 percent cut starting Dec. 1 and a 6.5 percent cut starting Jan. 1. Physicians groups and consumer groups are clamoring for Congress to postpone the cuts and maintain reimbursement rates to keep more physicians participating in the Medicare program. Policymakers and advocates have wanted to develop an alternative Medicare reimbursement formula for some time, but so far an agreement — including on a means of paying the costs of any increase in payment rates — has proved elusive.

Medicare coverage of counselors can be part of this package if enough members of Congress want it included! The Senate has passed counselor Medicare coverage legislation twice already, in 2003 and 2005, when the Senate was under Republican control. Likewise, the House of Representatives has twice passed counselor Medicare coverage legislation, in 2007 and 2009, when the chamber was under Democratic control. We simply need both the House and the Senate to agree to Medicare coverage language as part of the same bill to get it enacted into law.

Members of Congress in both the House and Senate should know the following:

- Establishing Medicare coverage of licensed professional counselors and marriage and family therapists would not change Medicare’s benefit package (for instance, it would not establish coverage of marriage counseling). Instead, it would simply expand the pool of providers available to provide currently covered services. Only medically necessary outpatient mental health treatment would be covered, pursuant to a diagnosis. Services provided by counselors would be covered under the same rules, requirements and reimbursement rates that apply to care provided by clinical social workers under current law.

- Medicare beneficiaries often lack adequate access to outpatient mental health care. Millions of Americans live in areas where there are shortages of mental health professionals, and LPCs are more likely to practice in rural areas than are clinical social workers. Even in urban areas, patient choice of provider is critically important to the success of mental health treatment.

- Covering counselors and marriage and family therapists is cost effective. The Congressional Budget Office estimates that this provision would cost $100 million over five years and $400 million over 10 years. In comparison, postponing the scheduled cuts in physician payment rates under Medicare costs in the neighborhood of $1 billion a month.

- The Affordable Care Act is expected to increase demand for services, including mental health services. Covering LPCs under Medicare would provide beneficiaries with access to more than 115,000 experienced, effective providers across the country.

The American Counseling Association encourages counselors to contact their representatives and senators to ask them to include Medicare coverage of LPCs as part of broader Medicare legislation this year.

In order to be effective, constituent contacts should be personalized. This means that calls and letters should be in your own words and describe your own thoughts and experiences as a constituent of your legislator. If you have been forced to turn away Medicare beneficiaries, write about that. If you had to stop seeing clients after they became enrolled in Medicare, write about that. If you know you want to be able to work with Medicare beneficiaries when you become an LPC, write about that. If you have a friend or family member who is a Medicare beneficiary and who needs outpatient mental health care but can’t find a provider, write about that.

Regardless of whether you send an e-mail, write a letter or make a phone call, include your name and mailing address so that the legislator’s office can get back to you. Also keep a copy of your contact so you can follow up with the office later if necessary. All members of Congress can be reached by phone through the U.S. Capitol Switchboard at 202.224.3121 and through ACA’s Internet action center at capwiz.com/counseling.

We also invite you to share your concerns or questions regarding the legislation with ACA Director of Public Policy and Legislation Scott Barstow at 800.347.6647 ext. 234 or sbarstow@counseling.org.

Whom to contact
Your Senators and Representatives

How to contact them
U.S. Capitol Switchboard 202.224.3121
senate.gov
house.gov
capwiz.com/counseling

Suggested message
“I am calling to ask that any Medicare legislation passed by Congress in the lame-duck session include a provision establishing coverage of medically necessary mental health services covered by licensed professional counselors. This is a bipartisan proposal to expand access to care to more than 100,000 providers, and it has passed both the House and the Senate twice already.

“Medicare beneficiaries need better access to outpatient mental health services, especially in rural areas, and professional counselors are as well trained — if not better trained — as some currently covered providers. Thank you for your consideration.”

ACA resource
Scott Barstow
800.347.6647 ext. 234
sbarstow@counseling.org

THE TWO-MINUTE ADVOCATE - By Scott Barstow and Dominic Holt

December 2010 | Counseling Today | 11
Rachel Collins wrote me seeking information about blogging for the American Counseling Association. I asked her to send me a résumé and followed that up with a phone call. During the course of our conversation, I realized she was doing meaningful, important work with children, not only at the agency where she works but in her community. Couple that with her active involvement in counseling organizations and you have a future leader. Here is her story.

Rebecca Daniel-Burke: What is your current counseling position?
Rachel Collins: I am employed as a clinical therapist at the Cornell Scott Hill Health Center Child and Family Guidance Clinic. I have provided individual, group and family therapy as well as case management services to children and their families ages 3 to 18 since 2007.

RDB: What other interesting positions have you held?
RC: I have been a postgraduate associate at the Yale Child Study Center Positive Interventions for Families with HIV/AIDS program providing individual, group and family therapy as well as case management services to children and their families ages 3 to 18 from 2007 to 2009. I currently serve as the trauma-focused cognitive behavioral therapy (CBT) site coordinator with my current employer and have served as coordinator of Mental Health Awareness and National Eating Disorder Awareness weeks.

RDB: Please say a bit about your favorite counseling position.
RC: I believe I am currently in my favorite counseling position because I think that I work best within the profession when working in the therapeutic setting with children. In addition, being able to supplement my work with outside endeavors such as publications and presentations allows me to explore multiple aspects of the counseling profession.

RDB: What led to a profession in counseling?
RC: I took a psychology class in high school and continued to take such classes once I entered college. Due to some difficulties of my own, I sought out counseling at the university counseling center and was inspired by the work of the counselor who helped me. I decided to pursue a degree to be able to give back to others in a similar manner.

RDB: As you moved through school, was there one theoretical orientation that you gravitated toward more than others?
RC: I gravitate toward several theories such as CBT, person-centered and Gestalt. I can be somewhat reality-based, especially with children, where a matter-of-fact attitude often relates to them best.

RDB: Where does your predominant theoretical orientation come into your work?
RC: I use many aspects of various theories in my work, such as the empty chair technique. This technique works well in helping children have practice conversations with their parents. My gravitation toward the person-centered theory is shown through unconditional acceptance of the client, meeting the client where the client is and working on goals from there. CBT is a popular approach with children because it is important to help children realize that thoughts and actions are connected.

RDB: You have worked with children quite a bit. How is that different from working with adults?
RC: I believe that with children, I am finding more creative avenues to help them reach their treatment goals. Taking books and games and making a therapeutic component out of them offers children a chance to engage in everyday activities while learning to control such things as anger. For example, with the game Trouble, each time a child pops a six, they have to tell about a time they got into trouble and what they could do differently if the situation arose again. When working with adults, I found the resistance greater and harder to break through.

RDB: Have you been trained in play therapy? Do you use this modality in your work with children?
RC: I have not yet been trained in play therapy. I have done extensive reading on the subject and do incorporate various techniques, as outlined in the reading, into my practice. I hope to gain certification in play therapy in the near future.

Making connections with young lives
RDB: What do you think about our profession today? What about the political side of counseling? Agencies, contracts, business strategies … Does all of this have a place in counseling?

RC: Being part of an agency, one is aware there is a productivity standard. It appears necessary to have these standards to make sure the agency is bringing in enough revenue to keep the agency running to help the clientele. It has its place in counseling, but it can also affect the quality of care if one is not cognizant of the needs of the client and more concerned with keeping a job by meeting a productivity standard.

RDB: Is there still a place for caring, compassion and advocacy in counseling?

RC: Yes, without it I believe it is difficult to see the perspective of a client. With compassion comes the desire to help others. It is important to advocate for the client who cannot advocate for himself.

Out of this philosophy of caring and compassion came my Girl's Group. I saw a need for a group to address issues affecting adolescent girls in the community in which I work. I believe this could be a national program. This group gives girls a forum to speak on issues in a caring and compassionate environment without judgment.

RDB: Tell me more about the group.

RC: It is a 12-week group. We discuss body image, self-esteem, relationships and social networking. It is one hour a week. We get referrals from other agencies, and I have self-referrals from my caseload. Medicaid will pay our agency for these groups. Eventually, I want to make the curriculum I have created available to others.

RDB: That is wonderful. You are hitting on all of the top adolescent girl issues.

RC: Thank you. It is really a fulfilling experience to do that group.

RDB: How did you determine what area of counseling you were passionate about?

RC: After working with children in others areas, including as a figure skating coach and a preschool assistant teacher, I discovered that my best-served purpose was to work with children. I focus on areas such as eating disorders and self-injury based on my own past experiences.
I was also fueled by the feedback I got from adolescent girls. My clients would often state that I was easy to talk with.

RDB: Have you learned anything about self-injury and possible treatment strategies that you would like to share?

RC: It is very common with the adolescents I see. It appears to be a coping mechanism for some. They will say, “I have done this. I feel better. Now I can move on.”

One of the things I do is help them create a coping skills box. We might put in a stress ball, a Slinky, a stuffed animal, temporary tattoos, a journal, an art pad and any other thing they like to do. They open the box, pick something out and have something to do when they want to cut themselves.

RDB: Brilliant, inexpensive and easy to do. Now, back to you. Did someone in your life see something special in you early on? Who valued you as a unique individual? Who are your heroes?

RC: My mother always allowed me to be who I was. If I was happy becoming a counselor, then she was happy for me and supported me in doing that. My mentor in my master’s program had a great impact. It is largely due to her that I am able to do what I currently do in the counseling profession. She guided me to explore all avenues of the profession. She introduced me to many people and gave me the opportunity to be involved in many aspects of the classes she taught. She got me involved in national organizations by helping me gain the opportunity to serve as the ASERVIC (Association for Spiritual, Ethical and Religious Values in Counseling) graduate student representative at the 2006 ACA National Convention. She possesses a wealth of knowledge, and I continue to turn to her as I move forward in the counseling profession.

RDB: Has studying counseling and becoming a professional counselor been transformational for you?

RC: I believe it has made me a better listener outside of my job. It has made me more aware of my surroundings. It has made me pay attention to small things as well as big events that can change a person’s life.

RDB: What mistakes have you made along the way as you became the counselor you are today? And what lessons have you learned from those mistakes?

RC: In an effort to help as many children and their families as possible, at times I can take on too many clients. That is a mistake.

I have learned that sometimes as I pursue other interests, such as presentations and publications, I must stay true to myself and not let the opinions of others impact my individual perspective.

RDB: Is there a saying, a book or a quote that you think about when you need to be inspired in your work?

RC: I have several sayings in my office that I remind the children about when they need inspiration, including “What would you attempt if you knew you could not fail?”; “Be the change you wish to see in the world”; “Never, never, never give up”; and “Dare to be remarkable!”

RDB: What is next for you in your career?

RC: I would like to work on publishing the group curriculum I developed for adolescent girls. I would like to gain more prominence as a state, regional and national speaker and author on subjects related to children and adolescence as well as eating disorders and self-injury. I hope to eventually have my own private practice.

I also hope to get a doctorate in the area of counselor education so I can take my teaching experience and use it to train future counselors. I am currently looking to gain certification in sports counseling and play therapy to broaden my counseling repertoire.

RDB: I can see that your work is intense at times. What ways do you find to take care of yourself and fill yourself back up?

RC: I try not to take home paperwork from the office. I try to have a clear separation between the time I spend with the children I work with and the time I spend with my family. I like working out. I especially like taking walks to clear my head and refocus my energy.

Rebecca Daniel-Burke is director of the ACA Career Center. Contact her at RDanielBurke@counseling.org if you have questions, feedback or suggestions for future columns.

Letters to the editor: ct@counseling.org

MENTAL HEALTH CAREER OPPORTUNITIES

The Department of Veterans Affairs (VA) is one of the largest, most technologically advanced health care systems in the United States. We have opportunities for Counselors, Psychiatrists, Psychologists, Social Workers, and Psychiatric Nurses nationwide. Visit us at www.VAcareers.va.gov to learn more or to apply.

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EOE/AA, M/D/F/V

December 2010 | 14 | Counseling Today |
FROM ASPIRATION TO REALITY

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M any complexities are involved in finding your counseling style. One major challenge during this process is balancing who you are with who you are becoming as a counselor. In this month’s column, a counseling student and a new professional ask for guidance as they face this issue. Addressing their concerns:

- Thomas R. Scofield, associate professor and coordinator of the Community Counseling Program in the Department of Professional Counseling at the University of Wisconsin Oshkosh. He is also a past president of the Association for Counselor Education and Supervision.

- Lisa Jackson-Cherry, professor and chair in the Department of Counseling at Marymount University, where she is director of the community and pastoral counseling programs. She is also a past president of the Association for Spiritual, Ethical and Religious Values in Counseling and current chair of the Maryland State Board of Professional Counselors and Therapists.

- Darlene Daneker, associate professor in the Counseling Department at Marshall University. She has been an active member of ASERVIC and the American Counseling Association since 1997 and has served on numerous committees, including the ACA Ethics Committee.

**Dear New Perspectives:**

Which comes first, the Christian who is a counselor or the counselor who is a Christian? I do not think I could counsel if I could not do it with the Holy Trinity as the cornerstone of my counseling model. For those who cannot “live their faith” where they work, how do they survive? I always keep two things in mind: 1) You might be the only Bible that anyone reads, and 2) always be a witness to the Lord, and when you have to, use words. — New Professional, North Carolina

**Lisa Jackson-Cherry:** You ask, “Which comes first?” My answer is simply: The client ultimately comes first! How you are able to integrate your faith for the benefit of the client will be your journey and a question for continued personal and professional reflection.

I encourage you to evaluate the beliefs that influence your role as a practicing Christian and the beliefs that influence what we know to be important for the client/counselor relationship. I hope you will consider the following questions for reflection in your journey: “How can aspects of my personal faith be potentially harmful or beneficial in the counseling setting?” and “What is my role as a practicing professional counselor in comparison with my role as a practicing Christian?” Both answers should lead to the counselor being client-focused.

There are many faith-based settings in which same-faith counselors work with clients. Integrating same-faith practices in these settings is appropriate and potentially beneficial for clients. Regardless, you should continually reflect on the questions above because you never know who may walk into your office holding beliefs different from those you hold. At a minimum, the professional counselor must be able to “be” with the client in his or her grief or struggle.

You may have answered another part of your question when referencing “those who cannot ‘live their faith’ where they work.” Your question implies a personal connection to one’s own faith. Remember, your personal religious practices within your faith are your core values and your beliefs and may not be what is beneficial to the client.

However, I also would ask you to explore what aspects of your faith may be beneficial to the client/counselor relationship. One aspect to consider is the difference between your Christian “beliefs” and the “theological virtues” that are the cornerstone of many religious thinkers, writers, leaders, saints and scientists of various faiths. As one example, I would hope that all counselors are able to provide a counseling environment based in the theological virtues evident in most religions and cultures: faith, hope and love. These can be applied to the counseling profession and in our professional relationships with clients. Faith in the counseling process and that you can be a part of the client’s healing journey and change. Hope in the client’s personal journey and healing process. Unconditional regard or love for who your client is as an individual.

**Darlene Daneker:** This is a good question and one that many new professionals and students struggle with. You do not want to compromise your beliefs and live a life that is incongruent to this essential part of yourself. Your client feels the same way. The ACA Code of Ethics states, “Counselors are aware of their own values, attitudes, beliefs and behaviors and avoid imposing values that are inconsistent with counseling goals” (Standard A.4.b.).

Many times, our clients have different beliefs than we have, and we seek to understand, empathize and work within the client’s frame of reference. When you are not working, you are free to follow and act on your beliefs as you choose, but once you step into the counseling relationship with someone, you are a counselor first.

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**Dear New Perspectives:**

I recently reflected on how I have become very comfortable with case management after about 12 years in the social work field. I’m afraid this has impacted my ability to do effective counseling. It is taking a lot of work to...
transition from being a case manager to being a counselor and is not as easy as I had hoped. How can I overcome this issue? — Master's Counseling Student, Florida

Thomas R. Scofield: A wise mentor once told me, when asked for advice, listen to the explicit message and the implied needs underlying the request. Developing confidence and competence over a 12-year period with any structure and its accompanying procedural dynamics creates a comfortable foundation from which to succeed in any occupation. In short, how one performs the functions within his or her professional role becomes second nature, a bit more pragmatic and parsimonious over time. A foundational shift in occupation or philosophy, however, leaves much to be desired regarding comfort and ease of transition from one established structure to another. The term afraid many times connotes fear, regret and concern for the unknown.

The training and service provisions of both the social work and counseling professions carry transferable skills that are applicable in multiple contexts. Here is a simplified example.

The individualized service plan in social work becomes the counseling treatment plan. Nothing really changes regarding the ongoing assessment and evaluation of efficacy regarding the treatment plan in relation to the client's attainment of goals, emotional stability and well-being over the duration of service or the consideration of sociological or ecological factors promoting and maintaining the client's difficulties. These elements of advocacy and quality service provision carry no exclusive stamp of professional competency.

The concluding question, “How can I overcome this issue?” draws greater consideration because it unites discomfort, fear, impact, transition and hope as the binding elements of the “issue.” It is directly tied to a companion question: What does it mean to effectively “do” counseling? The answer might be as varied and diverse as asking, “How would you define counseling?”

To overcome something implies on some level that it must be vanquished. In this case, I sense the process requires some measure of deconstruction of knowledge that may interfere with transferable skills and the modification of existing conceptual, procedural and relational skills that are more applicable to the new role. In my humble opinion, effective counseling is not so much about doing something to and for someone. Rather, it is the being and becoming with someone that constitutes the greater agency of change. That is not to suggest that it does not come without structure and procedure. But these are not the necessary considerations for the development of nonhierarchical, mutual and reciprocal relationships that sustain and comfort the change happening within it.

As a reflective practitioner, I have come to appreciate that when undertaking anything new, I will struggle with the insecurity and inadequacy of not having a “known” structure upon which to draw or rest. In all honesty, I have come to expect it — dare I say, rely on it — to inform my efforts as a professional practitioner and lifelong learner. ♦

Donjanea L. Fletcher is a student affairs counselor at the University of West Georgia. If you are a student or new counseling professional and would like to submit a question or an article for this column, e-mail dfletche@westga.edu.

Letters to the editor: ct@counseling.org

Greatest lessons learned

Coming soon, New Perspectives will dedicate a column to Sam Gladding’s and Lynn Linde’s “greatest lessons learned.” Submit your questions about their development as professional counselors, and these two past presidents of the American Counseling Association will answer several of the best queries. To be considered for inclusion in this special column, e-mail dfletche@westga.edu by Jan. 10.
Going beyond the counselor’s comfort zone

Q: I am looking at starting a private practice and want to develop a marketing plan. What are all the considerations?
A: That’s a pretty global question but one that we are asked frequently. We can’t do the question justice in a single Private Practice in Counseling column, so we plan to answer it over the next couple of columns.

Marketing and advertising may take you out of your comfort zone as a professional counselor. However, if you don’t commit to taking steps to market and advertise, another professional counselor will! If you want your practice to become a rewarding experience, you will need to acquire a certain level of confidence in selling yourself. You might be the world’s best at what you do, but if potential clients don’t know about you, your talents will go untapped.

Professional counselors provide a unique and valuable service that enriches people’s lives and promotes growth and development while also being cost effective. In addition, that service has tremendous value in the marketplace.

Print material
As one of the first steps in your marketing plan, you will need to develop professional print material. The three most critical pieces are letterhead, business cards and a brochure.

These materials should look clean and sharp. Remember, less is more! Most marketing consultants will tell you that “white space” (blank space) is a good thing. Resist the temptation to include too much information on these materials, thus confusing the client or referral source. Also, be cautious not to overpower your print materials with too much color or with images that could cause confusion.

For the business card and letterhead, include your name, degree, title, license, office address, phone and fax numbers, e-mail and website. Also list a service or two, such as “Marriage and Family Counseling” or “Counseling and Mediation.” Remember, keep it simple.

A bifold or trifold brochure is a cost-effective way of providing more information to potential clients and referral sources. As with business cards and letterhead, however, less is more. Effective use of white space will help draw the eye to key pieces of information. Include the same information as is printed on your business cards and letterhead, but also consider including your photo (a head shot), a short statement about your approach to treatment, whether you accept insurance, your specialties (don’t list too many) and other services that you offer, such as workshops, consulting, custody evaluations, forensics and so on.

Although this may sound painfully obvious, we have seen some really bad marketing material! If you have ample computer savvy, you may be able to create the materials yourself. Otherwise, consider hiring a marketing consultant to do it for you.

If you have already produced print material, we encourage you to review it. Does it communicate the desired message about you and your practice? Does it promote you first and your practice second? Clients and referral sources generally seek out individual professional counselors about whom they have heard good things, not group practices. So make sure your name is emphasized in your marketing material.

Important reminder
Don’t forget. January is “Insurance Deductible Month,” and almost all of our clients’ new deductibles will kick in Jan. 1. With the new insurance laws, we are not sure how this will play out when a client’s contract recycles, but expect big changes. To protect your clients and yourself, use the sample notice below and avoid the collection headaches we encountered this past year when all insurance deductibles increased.

Happy New Year!
We wish all our clients a Happy and Healthy New Year!

Our accounting department has asked us to remind you that the “Insurance New Year” has begun, and the issue of your deductible and number of sessions allowed should be considered. Accounting has asked that we receive the full amount your insurance pays until the deductible for this new year has been met. If you can bring information that you have no deductible, we will ask only for your copay.

In addition, please don’t be surprised. Counselors are now under the new mental health parity law. In 2011, some insurance and managed care companies will require more utilization review, require preauthorizations and limit the number of sessions per each authorization. This is to bring counselors under existing medical insurance rules. To be safe, check with your provider-relations representatives at the companies you are billing. You also might ask your clients to check their insurance to find out about any changes.

Come join us March 23-27 at the American Counseling Association’s Annual Conference & Exposition in New Orleans. We will be presenting the preconference Learning Institute “Starting, Maintaining and Expanding a Successful Practice: Surviving or
Thriving?” on Wednesday, March 23, as well as the Education Session “To Private Practice or Not to Private Practice? That Is the Question” on Friday, March 25.

ACA will be sponsoring free private practice consultations during the conference. Look for more information in the coming months about scheduling your appointment. Stop by our booth in the exhibit center, tell us your private practice stories and check out our book, The Complete Guide to Private Practice.

ACA members can e-mail their questions to Robert J. Walsh and Norman C. Dasenbrook at walshgasp@aol.com and access a series of “Private Practice Pointers” on the ACA website at counseling.org. A podcast on starting a private practice is also available to ACA members for free on the website.

Letters to the editor: ct@counseling.org

Play Therapy: Basics and Beyond, Second Edition
Terry Kottman

“This volume will be of great value to professionals entering the field, as well as to experienced play therapists expanding their scope of practice, teaching graduate classes, or looking for a good solid reference.”

—Risë VanFleet, PhD, RPT-S
President, Family Enhancement & Family Play Therapy Center

Written for use in play therapy and child counseling courses, this extraordinarily practical text provides a detailed examination of basic and advanced play therapy concepts and skills and guidance on when and how to use them. Kottman’s multitheoretical approach and wealth of explicit techniques are also helpful for clinicians who want to gain greater insight into children’s minds and enhance therapeutic communication through the power of play.

After a discussion of the basic concepts and logistical aspects of play therapy, Kottman illustrates commonly used play therapy skills and more advanced skills. Introduced in this edition is a new chapter on working with parents and teachers to increase the effectiveness of play therapy. Practice exercises and “Questions to Ponder” throughout the text facilitate the skill-building and self-examination process.

2011 375 pgs

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Please include $8.75 for shipping of the first book and $1.00 for each additional book.

American Counseling Association
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**On Being a Therapist, Fourth Edition**  

Some of the hardest and most valuable aspects of becoming a professional counselor cannot be learned in a classroom. Rather they are taught through life’s hard lessons. Jeffrey Kottler’s *On Being a Therapist* intimately explores not only the glory, splendor and highs of being a counselor but also the heartbreak, frustrations and daily trials counselors must face.

Kottler is a prolific author who has written numerous highly regarded books on a variety of subjects, one of which was made into a feature film. *On Being a Therapist* doesn’t disappoint and further supports his reputation as a writer. The book is well organized, coherent and deeply personal. Kottler provides numerous anecdotes from his extensive personal experience as well as stories from various professionals whom he has interviewed. The vignettes appropriately complement and support the topic being discussed, while also serving to captivate the reader. All the while, he intricately weaves in a wide range of literature to support his assertions.

This is a book that holds professional counselors and other helping professionals accountable for what goes on behind closed doors. It serves as a catalyst for professionals to begin discussing topics and issues that are the equivalent of the “pink elephant in the room” — things that are known to exist but are rarely acknowledged or talked about. Kottler fearlessly brings these topics front and center, discussing them openly and honestly without all the “smoke and mirrors.” He comforts readers by telling them they are not alone in their experiences and goes on to provide insights, techniques and coping mechanisms for dealing with and transcending many of the unfortunate realities of being a counselor.

Kottler begins his dialogue with “The Therapist’s Journey.” In this chapter, he emphasizes that although a counselor’s journey may be challenging and fraught with peril, it is also a rewarding one that can be immensely satisfying and fulfilling. It is a journey filled with numerous opportunities for professional growth and deeper personal understanding.

The bulk of the book is separated into chapters that discuss some of the more challenging topics for counselors: “Struggles for Power and Influence”; “Hardships of Therapeutic Practice”; “Being Imperfect, Living With Failure”; “Patients Who Test Our Patience”; “Boredom and Burnout”; “That Which Is Not Said”; and “Lies We Tell Ourselves — and Others.” Each chapter begins with a detailed description of a particular problem, challenging readers to reflect on their own practice and experience to identify possible problem areas. Kottler then offers techniques and solutions that can be implemented to resolve these issues. He emphasizes two primary points throughout these chapters. First, the need to take care of ourselves before we can hope to effectively care for our clients. Second, growth is a never-ending process. Although we may effectively manage a particular situation, such as dealing with feelings of failure, Kottler admits that he often must learn the same lessons over and over again.

At times, *On Being a Therapist* can be provocative, outrageous or even downright unbelievable. One such example is the psychiatrist who reserved a wing of a motel for his clients so they could continue their treatment while he was on vacation. The book’s overall tone, though, is one of hope and humor. Through his writing, Kottler creates an atmosphere of support and collegiality. Although readers may at times find their revelations disconcerting, they will likely look up and realize they are laughing.

What I enjoyed most about this book was the author’s candor. In encouraging professional counselors to “become more open, vulnerable and honest about your own unresolved issues,” Kottler boldly and courageously leads by example. Throughout the book, he discloses his own uncertainties, insecurities and imperfections and, even as he persuades his readers to do the same, continually challenges his own agenda and motivations. Above all, Kottler reminds us that we are all human — that despite our greatest attempts and perfect intentions, we are fallible and destined to be imperfect, yet we will always strive for continued learning and growth.

Novice and seasoned counselors alike will benefit from this book. In a profession in which we often work individually with little support, this book validates our experiences, provides a platform for discussion and encourages ongoing self-reflection and growth. Not only will counselors personally benefit from reading this book, but clients will benefit from our increased awareness, attending and professional development.

Reviewed by Misty Becker, doctoral student, University of South Dakota.

**Clinical Supervision in the Helping Professions: A Practical Guide, Second Edition**  
By Gerald Corey, Robert Haynes, Patrice Moulton & Michelle Muratori, 2010, American Counseling Association, 304 pages, $43.95 (ACA members); $62.95 (nonmembers), Order #72898, ISBN: 978-1-55620-303-9

Supervision is a key component of counselor development. Individuals who are interested in reviewing their current supervision style and skills or those interested in becoming a clinical supervisor for the first time should read the second edition of *Clinical Supervision in the*
Helping Professions: A Practical Guide.
The book flows smoothly from the basic beginning concepts of supervision to the more complex ideas behind its practice. The authors address several key components of supervision, including concepts, models, ethical and legal issues, contracts, evaluations and much more. The chapters should prove engaging for the reader with any level of supervision training. The information is explained in an understandable manner, and case studies throughout each chapter periodically reinforce the content being discussed.

Although the authors spend a portion of each chapter outlining the key concepts of supervision, the most beneficial piece is the involvement of the reader. In addition to sharing their experience and expertise of supervision, the authors include focus questions and suggested activities to encourage active learning for the development of the supervisor. Each chapter poses questions for the reader to consider regarding the supervision concept being discussed. Questions range from the relatively simple and straightforward (“What is the primary role of the supervisor?”) to those that help readers reflect on their own supervision experience (“What have you learned about supervision methods from being a participant in supervision?”). The suggested activities at the end of the chapters could be completed individually or in small groups and are helpful in conceptualizing the information.

In addition, the authors have done an excellent job of bringing in perspectives of supervision from the field. Twenty-six individuals from the counseling profession share their views on supervision. The growth and development that occurs at all levels of training is made evident by the realistic responses, stories and difficulties shared by both the authors and individuals in the field.

This book would be an excellent resource for students in master’s- or doctoral-level programs as well as counselors in the field either looking to become supervisors or wishing to refresh their knowledge of supervision.

Reviewed by Janelle L. Stahl Ladbury, doctoral student, North Dakota State University, and school counselor, Fargo Public Schools.

Cyberbullying: What Counselors Need to Know
By Sheri Bauman, 2010, American Counseling Association, 215 pages, $24.95 (ACA members); $29.95 (nonmembers), Order #72900, ISBN: 978-1-55620-294-0

In our fast-moving technological society, staying up to date with advancements is difficult, even for the most tech-savvy individuals. For counselors, we are charged with the tasks of not only understanding and using technology in our personal and professional lives, but also in assisting our clients as they navigate through the e-jungle. In response to this, Sheri Bauman has provided counselors with an amazing resource, Cyberbullying: What Counselors Need to Know.

What stood out most for me in reading this book was its great utility for practitioners. Not only does Bauman clearly define types of cyberbullying and

Continued on page 23
A small sampling of other recent titles that counselors might find informative or interesting. The descriptions are provided by the books’ publishers.

**Ethics Desk Reference for Counselors**  
By Jeffrey E. Barnett and W. Brad Johnson, 2010, American Counseling Association, 224 pages, $32.95 (ACA members); $44.95 (nonmembers), Order #72893, ISBN: 978-1-55620-298-8

This essential pocket guide is designed to help counselors interpret and apply the ACA Code of Ethics to prevent and resolve ethical dilemmas. In Part I, Jeffrey Barnett and W. Brad Johnson provide an easily understood translation of each standard of the code, followed by a discussion of common challenges associated with the standard and a list of recommendations for maintaining ethical, preventive practice in the topical area. Part II contains an ethical decision-making model and specific, practical strategies for responding to frequently faced concerns surrounding culture and diversity, confidentiality, suicidal clients, boundary issues and multiple relationships, competence, supervision, managed care, termination and responses to subpoenas. A list of recommended resources is included both to assist counselors in preventing ethical conflicts and in responding to these conflicts effectively if they do arise. Clear and concise, this desk reference is an indispensable tool that counselors and students will refer to time and time again to ensure ethical practice and offer best practice services to their clients.

**Developing Clinical Skills in Substance Abuse Counseling**  
By Daniel Yalisove, 2010, American Counseling Association, 232 pages, $29.95 (ACA members); $44.95 (nonmembers), Order #72895, ISBN: 978-1-55620-307-7

This skill-building primer provides a framework for understanding substance abuse and teaches the basic concepts and skills necessary for effective counseling of clients with substance use disorders. In Part I, Daniel Yalisove discusses counselor roles and the fundamental principles of substance abuse counseling. He then provides a synopsis of several key substance abuse theories as well as his own building session goals and strategies method and the eight-stage process of counseling approach, all of which are practical, compatible means for learning and mastering clinical counseling skills. Part II illustrates applications of the tenets of these approaches in clinical situations — from beginning counseling sessions through termination — using experiential exercises, role-plays and clinical scenario examples. Chapters follow on group work, counseling clients with dual disorders, family counseling and working with diverse client populations. A helpful chapter on creating client treatment plans and writing clinical reports rounds out the book. Yalisove’s clear and concise writing style and his practical approach to developing critical thinking and counseling skills makes this an ideal supplemental text for addictions courses.

**Developing Multicultural Counseling Competence: A Systems Approach**  

This text is an innovative, evidence-based approach to facilitating students’ journey to becoming multicultural competent counselors. Comprehensive, thoughtful, and in-depth, Developing Multicultural Counseling Competence goes beyond general discussions of race and ethnicity to include discourse on a broader, more complex view of multiculturalism in clients’ and trainees’ lives. Both scholarly and highly interactive, this text strives to present trainees with empirically based information about multicultural counseling and social advocacy paired with engaging self-reflective activities, discussion questions, case inserts and study aids, creating opportunities for experiential learning related to cultural diversity considerations and social advocacy issues within clients’ social systems. The resource addresses CACREP Standards related to the social and cultural diversity core area.
different cyberenvironments for the reader, but she also provides a great deal of user-friendly and extremely valuable resources. Screen shots of common websites allow the reader to quickly gain a sense of the sites without having to spend hours on the Internet.

Personally, I found “Responding to Cyberbullying” (Chapter 8) to be the most helpful chapter in the book. In this chapter, the author gives the reader step-by-step instructions on how to check a browser history and how to report a problem on a social networking site. Additionally, the chapter contains information about important court decisions and includes a summary of existing cyberbullying legislation by state.

The final 50 pages or so of the book are composed almost entirely of resources and research designed for practitioners. This section includes a variety of online resources and media and spotlights both fiction and nonfiction books that may be useful to counselors. A plethora of research is highlighted as well, with studies broken down into single-paragraph summaries that provide readers with a good overview.

Bauman has pulled together a wealth of information that is easily accessible, well organized and comprehensive, thus fashioning a book designed so that busy practitioners can quickly assist clients in need. Not only does she provide practitioners with needed information on cyberbullying theories and research, but she has also delivered a resource that can be pulled off the shelf and shared with clients to assist them in their struggles. It is the best of both worlds.

Reviewed by Holly J. Nikels, associate professor, Department of Counselor Education, Western Illinois University.

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Demonstrating the principles of research

Although I usually discuss several journal articles in each column, this time I want to focus on one article that I believe exemplifies many important principles of research in our field. Although the article merits attention on the basis of its topical relevance, it also illustrates fundamental principles of counseling research. I hope this close scrutiny of one article is instructive and useful for readers.

In the Fall 2010 issue of the *Journal of Counseling & Development*, Lynn D. Miller, Christina Short, E. Jane Garland and Sandra Clark’s article “The ABCs of CBT (Cognitive Behavior Therapy): Evidence-Based Approaches to Child Anxiety in Public School Settings” describes an empirical study of a program to reduce anxiety in elementary-school children. First, the authors note that the basic approach (CBT for children with anxiety) has been evaluated for efficacy. In their study, the authors undertake to evaluate effectiveness. This is an important step that is sometimes overlooked, perhaps because of the challenges inherent in conducting research in “real-life” circumstances.

Efficacy studies are done under highly controlled conditions. Participants are carefully selected so they have the disorder of interest without having comorbid disorders, participants are randomly assigned to treatment or control groups, and treatment is manualized and closely monitored to ensure fidelity to the model. Effectiveness studies, on the other hand, test an approach under typical conditions in the field. Participants might meet certain criteria, but those criteria are likely to be less stringent. For example, participants might have a certain diagnosis but might not be excluded for comorbid conditions. Random assignment of subjects to condition is neither feasible nor practical. The many extraneous influences (for example, scheduling conflicts that change the frequency of treatment) and challenges (strict monitoring of treatment fidelity is unlikely), while making it more difficult to find significant results, also make the delivery more similar to conditions under which the treatment is likely to be administered in the field. This means practitioners can judge whether an approach whose efficacy has been demonstrated in previous research is likely to be effective if they implement the program or treatment in their own settings (in this case, schools). There is a current insistence on evidence-based practice, but the type of evidence required is rarely specific. I believe effectiveness research should be the standard.

The researchers in this study modified a treatment program for anxiety in children that was originally designed for use in a clinical setting so that it could be provided in a school setting. Their belief was that schools offer many advantages for treatment of anxiety, given the many opportunities for reinforcement and practice of skills learned and the amount of time children spend in the school environment. They also decided advantages existed to having classroom teachers, rather than school counselors, provide the program. Teachers see children more frequently, have fewer children under their purview and can link the program to other lessons and provide additional practice when needed. The delivery of the program via classroom lessons also helps children obtain and provide peer support and normalize their anxious feelings. Miller and her team found support for having teachers deliver CBT programs in the results of a study in Australia.

Although the researchers did not randomly assign individual students to treatment or control groups, which is often impossible in real-world research, they did randomly assign participating schools to condition. All children in the schools received the program, but only the data from those with written parental consent were used in the analysis (another challenge in research in the natural setting). We must wonder how the findings might have differed if all the data could have been used. We do not know how the children who did not have parental permission differed from those who did have permission; the authors do not provide comparative data. In addition, the researchers used well-established measures of anxiety, which were not anonymous. The researchers were thus able to inform (by telephone and letter) parents of children whose scores were in the clinically significant range of the elevations in anxiety and to give parents both information about anxiety and contact information if they were interested in obtaining services in the community. This is a prudent and ethical approach when looking at a serious disorder. The absence of anonymity, however, could cause some parents to withhold consent for their child’s participation.

The authors found no significant differences between treatment and control groups on post-program anxiety levels. For both groups and on both measures, anxiety was lower at post-test than at pre-test. They also compared pre- and post-test scores for those participants who had elevated scores on pre-tests. Again, no statistically significant differences by condition were detected. One final analysis found a significant reduction in levels of anxiety on one measure but not the other for the group with elevated scores.

This leads me to note another valuable feature of this article. I think it is crucial that nonsignificant findings be reported in the scholarly literature. Often, researchers are disappointed when “significance” is not detected, believing that their work will not be publishable and/or that they have not “found” anything important. However, the absence of significance is still an important finding and one that needs to be disseminated. It could be that other researchers (or even the same researchers) will repeat the study after making adjustments on the basis of the limitations and recommendations provided in the article. It also could be that the program as described — having teachers deliver what was designed to be a clinical intervention as classroom lessons to all students — might not have the effectiveness that was hoped for. If that finding is not publicized, it is possible that others will attempt the same
plan without knowing a previous effort failed to produce the anticipated reductions in anxiety.

A final element of this article was of interest to me. Although I acknowledge the validity of the many advantages the authors noted in having teachers (whom they trained in a six-hour session) deliver the program, I wonder if the results would have been different if school counselors had been the providers. School counselors are trained in providing classroom lessons, while also possessing an understanding of mental health issues. The background that school counselors possess would be difficult to impart in a single training. It could be that school counselors’ skills and training would have yielded more positive results. School counselors also could follow up with those students whose scores indicated they might benefit from additional services, allowing the counselors to offer not only a universal intervention but also a targeted intervention for those needing more support. As a counselor educator who trains school counselors, I think it is often the case that these counselors’ unique skills go underappreciated.

I chose to focus on this article both because of its important goal of testing the effectiveness of a program in schools and because it illustrates how difficult it is to conduct this kind of study in the school setting. Most important, although the outcomes were not statistically significant, readers benefit from knowing that, and the authors took steps to disseminate their results. To me, publishing only “significant” outcomes leaves the profession without a large body of empirical evidence — evidence that something did not have the expected effect. Isn’t that what scientific research is about? 🌟

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

Letters to the editor: ct@counseling.org
Secure and orderly digital lives

The way counselors and academics have managed their computer-generated information has changed during the past 40 years. As an undergraduate research assistant in 1977, my introduction to computers involved sorting through hundreds of computer punch cards in long boxes. A doctoral student ran the cards through a card reader to generate a long printout of data. He would later have to calculate most of the final statistics by hand.

The papers I wrote in my master’s program were done on an early personal computer and stored on cassette tape. Later, when I entered my doctoral program, I convinced my wife that I needed a PC to complete my degree. Since that time, I have stored information on five-and-a-quarter-inch floppy disks, then three-and-a-half-inch disks, zip drives, CD-ROMs, DVDs, flash drives and external hard drives. I have boxes of old data storage media in my basement in formats that do not fit my current computer configuration. The trend toward using cloud storage has trumped all of this physical media.

It is not just the change in storage itself that has occurred with computing but also how we manage and organize information we find along the Digital Psyway. Through the years, the information available on the Internet has grown exponentially, so today’s tools are as much about managing content as they are about creating content. How do we remember that website we will want to reference later, the document we want to read tomorrow or the password or login we only need occasionally? One of the pleasures of writing this column is that, as a technophile, I get to search the Internet and spend time trying out new technology and software — all in the name of “research” and staying current.

This month’s column will focus on information management: how we store it, how we back it up and how we retrieve it.

Cloud storage
Cloud storage is the outsourcing of data storage to an external source. Unlike older methods that used a physical medium (floppy disks, jump drives, hard drives) that the user was responsible for maintaining, cloud storage saves data through an Internet connection to a service that manages the material on its storage device. Cloud providers keep the information protected through encryption (only you have access) and redundancy (if one of their media drives breaks, other copies can regenerate your data). One advantage of cloud storage is that your information can be accessed at any computer with an Internet connection. The cloud storage device appears as an icon, folder or drive that you access from your desktop or from portable devices such as smartphones and iPads. You can still copy and carry data on portable media from one site to another, but in many cases, the need for carrying a keychain full of flash drives is eliminated because you can access your cloud via the web.

When considering cloud storage services, you need to assess the sensitivity and security of the data with which you are working. Cloud storage has helped me organize my documents. I create folders in my cloud for the courses I teach, the presentations I give and the projects I am working on. I work directly with the documents in the cloud, so if I go from my home to my office, I know that the latest version of the document is stored in the cloud. Numerous services are available for consumers. Many of these services have free options for limited storage and paid options for greater amounts of storage. Among the common cloud storage services are Dropbox, Box.net, Skydrive, Uploadgingit, iDisk and LiveMesh.

- What cloud storage is: tinyurl.com/2dg7rk4
- How cloud storage works: tinyurl.com/28uygo7
- Review of common cloud storage: tinyurl.com/2fj9bcr
- Choosing a cloud storage service: tinyurl.com/53z6u7

Backup services
Cloud computing allows you to effectively increase your file storage by providing you with additional storage offsite. It is also advisable to look at a backup service for your complete computer drive and operating system. Approximately 42 percent of data loss is due to mechanical error, while 34 percent is because of human error. You can use external hard drives, DVDs and other traditional media for backup, or you can use a portion of your drive to create a mirrored image, but if you keep these resources at the same location as your computer, the data will still be at risk if there is a fire or other damage. Additionally, some people use rollback services such as Time Machine that capture changed files and allow users to go back to earlier versions of the data.

Growing in popularity are cloud backup services in which a mirror image of your drive is saved offsite and simultaneously updated as you change, add or delete files on your desktop drive. The backup runs as a background service. It can take a few weeks to a month for the initial backup to capture the entire drive. From that point on, however, the backup runs simultaneously.
Ways to start your backup plan:
- tinyurl.com/38dlb9o
- Carbonite: carbonite.com
- Crashplan: b2.crashplan.com
- Mozy: mozy.com
- Time Machine: tinyurl.com/kc4bz

**Data organizing tools**

Using data organizing tools has created a dramatic change in my workflow as a professional. For *The Digital Psyway* columns, I scan the Internet for particular topics, and when I run across a pertinent article or website, I need an organizing system to save these elements for later use. One of the best data organizing tools I have found for the Mac is Yojimbo, which allows me to grab the website URL, the PDF document, a software license number or the graphic and drop it into the program, where I can then tag it and organize it into subfolders. Yojimbo recently released an iPad app to sync with the desktop and support a mobile environment. On the PC side (and also usable with Macs), Evernote is an excellent free web-based service that provides a similar organizing tool. Other information tools include Google Notebook, DEVONthink, Zoho Notebook, Voodoo Pad, Together and Notebook.

**Data backup strategy**

Experts will tell you that the best data strategy involves multiple levels. You should back up your computing system and, in the optimal scenario, save the backups offsite. This would mean using a cloud service and, for essential data, also saving it on physical media at another location. For workflow convenience and redundancy, you might want to consider a cloud storage system for your currently active files. To organize and save your websites, documents, passwords and other content, consider one of the free or low-cost data organizing tools.

My transition from saving everything on my main computer drive and on floppy disks to offsite services has helped me organize my digital work life while feeling secure that the content I produce will be available for me in an increasingly mobile environment.

Did we miss something? Submit your suggestions to mjencius@kent.edu. You can find these and other links on *The Digital Psyway* companion site at digitalpsyway.net.

**Marty Jencius** is an associate professor of counseling and human development services at Kent State University.

**Letters to the editor:**

ct@counseling.org

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“**It’s like playing Russian roulette with your life. You have no idea what you’re getting yourself into.**”

What could someone who survived drugs tell kids?

Young people are exposed to a lot of drugs out there. Your best weapon is drug education that reaches youth with the facts as told by former users who themselves survived the nightmare of addiction. And that is a message that will empower them to resist peer pressure—the major reason kids turn to drugs in the first place.

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**To find out more, order the FREE Truth About Drugs Information Kit TODAY.**

The Truth About Drugs is a program of the Foundation for a Drug-Free World, a nonprofit public benefit corporation. The Foundation’s purpose is to empower youth and adults with the facts they need to make informed decisions about drugs.
I have one client who reminds his friends he can’t do anything with them on our appointment days because he’s going to the “crazy doctor.” Another woman I see cheerfully asks her husband if he can run by the pharmacy for her because she’s almost out of her “happy pills.” Other clients have come into my office for the first time and “complained” that I didn’t have a fainting couch. Though these words might seem a little flippant to some, I disagree. I think it’s a good thing to have a sense of humor in the counseling office.

This position is historically well-supported. Just search the words humor and counseling in a quality research database, and you will return a decent number of hits. For me, it just comes naturally. I come from a joking and sarcastic family, so for me, it would be strange not to incorporate some of that attitude into my personal counseling style.

Humor can immediately create rapport and humanize us as counselors. It says that we are on the same level as our clients are, and we understand where they’re coming from. In this way, it can reduce the embarrassment of coming in to “get help.” I believe that is why my client in the first example tells his friends that he’s going to the “crazy doctor.” Some clients may use humor as self-defense and, for them, you would have to call them on it rather than participate in it. But with this particular client, I happen to know he takes therapy seriously. For him, it’s just a way to balance the darkness he wades through in session with a little light. And don’t we all need that sometimes?

Here, I must insert all the necessary caveats in regard to humor in counseling: Be careful not to make fun of a person’s race or religion, and it’s probably a good idea to be very, very cautious about jokes on any disorder they might have. But, these exceptions aside, I think it can be very heartening for the client to remember that they are entering into an exploration of their problems in order to heal from them and have a better life. There is fun out there for them.

The use of humor lets our clients know that this experience of therapy may not be as horrible as they thought it would be. It can remind us that healing is not just the absence of problems but the development through those problems into a fuller, better life. I think counselors and their clients need that from time to time.

You hear that therapy is a depressing job. I don’t think so. I think it’s one of the most positive jobs out there. Yes, you deal with a lot of pain and, sometimes, you suffer along with your client. But you get to be there to help them through it. My favorite kind of stories (fiction or nonfiction) are the ones in which the protagonist excels through trial and, by means of personal strength, is able to overcome. At my work, I get to not only watch people live out these stories, but participate in helping them get there.

Who wouldn’t have fun with a job like that?

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No ethical counselor enters the profession and anticipates skipping over or ignoring a group in need of help. But in reality, some client populations aren’t easily reached or don’t readily avail themselves of counseling services. And others are simply overlooked, for one reason or another.

To shed light on a few of these underserved groups, Counseling Today asked five American Counseling Association members to share their experiences of actively reaching out to, connecting with and advocating for client populations that too often fly under the radar.

Multiracial clients

At times, Derrick Paladino still gets choked up talking about the prayer he would say nightly while in elementary school. It was a prayer offered by a little boy who desperately wanted to fit in. “I wish I woke up White,” he would pray before going to sleep.

At that point, Paladino, whose mother was born in Puerto Rico and whose father was second-generation Italian American, was the only non-White student at his school in a small Connecticut town. Now an assistant professor and chair of the Department of Graduate Studies in Counseling at Rollins College, Paladino says he felt his “differentness” every day at school. The discriminatory remarks he heard from other kids didn’t help.

Paladino’s mother, who was religious, would remind him to say his prayers at night. After shutting his eyes and wishing to look a little more like his father and everyone else at school, Paladino would wake up each morning and walk to an oval mirror in the hallway. “I would look, and I wouldn’t be White, and I would feel the disappointment,” says Paladino, co-author with Richard Henriksen Jr. of Counseling Multiple Heritage Individuals, Couples and Families, which is published by ACA.

Even when he entered college at the University of Florida, Paladino didn’t feel like he fit in anywhere. He received invitations to join Latino student groups but felt like a fraud because he didn’t speak Spanish fluently. “I wasn’t whole of anything,” he says.

But a few years later, sitting in a multicultural counseling class in his master’s program at Florida, he read about a biracial identity model developed by Carlos Poston. It became Paladino’s “aha” moment. “It was me on paper,” says Paladino, who also runs a private practice in Winter Park, Fla. “It was making sense of how I pushed away from my mom, because being brown
was bad where I lived, and how I figured out how to navigate through life and my environments. It was a moment of change when I figured out, ‘I need to focus on who I am and how this identity affects me, and I need to do more with it.’ I could then also celebrate my multiracial identity and see the strengths that come with it.”

Looking back, Paladino says he didn’t understand what he was going through until stumbling across the topic in his master’s program. “We’re invisible,” says Paladino, who gets a wide variety of responses when he asks students in some of his classes to write down what they think his race/ethnicity is. “We sort of fade into an invisible population. I don’t think it’s intentional that we’ve been underserved, I think it’s just how it’s been. It only becomes intentional when the population is recognized and nothing is done, which can occur with those who have a bias against interracial relationships, transracial adoption and multiracial individuals.”

People identify themselves differently, says Paladino, who explains that while he might identify as biracial, others might identify as multiple heritage. The concept goes beyond race to include culture and religion as well, he says. The 2000 Census was the first to allow respondents to check off more than one race, and Paladino says the response was significant — more than 6.8 million people identified as multiracial.

As part of his dissertation in 2004, Paladino conducted a national study on alienation, cultural congruity and
self-concept of multiple-heritage college students. It was one of the first studies conducted on the topic of multiple-heritage experiences. “We found all these biracial and multiracial support groups around the nation,” he says. “But what we found was, even in the support groups, the multiracial students were still doing worse. It showed this population was still struggling.”

As he was growing up, Paladino remembers lacking someone to confide in when he was feeling like an outsider. “I didn’t know where to go. I couldn’t talk to my parents because they were of one race, so they couldn’t share my experience with me. For a lot of these individuals, it can be a very solitary life. Unless people reach out and say, ‘I can understand what you’re going through. Let me offer a place where you can let that out,’ they may be holding onto it. We need to stand up as mental health professionals and do some social justice and advocacy work for these individuals.”

In 2009, Paladino created a student group to actively address these needs on the Rollins campus. Named the Multietnic Student Society by the students, the group provides a space for its roughly 15 members to have conversations and share details about their cultures. The group has also sponsored campus panels on the topics of interfaith and interracial couples. Paladino hopes the group’s work at the college will reach those who need support.

Paladino’s focus is on reaching out to multiracial students on campus and raising awareness of the needs of multiracial individuals among future counselors. He says private practitioners would do well to add the identity topic to their websites, visit community groups such as Swirl (swirlinc.org), which has mixed-race community chapters, and reach out to this population through social media, such as the Facebook pages maintained by multicultural groups. Counselor educators should be deliberate about addressing this population when teaching multicultural classes and consider bringing in guest speakers, he adds.

It’s a good idea for counselors to allow clients to “check all that apply” for race/ethnicity questions on the intake form, Paladino says. “This allows individuals to
empathize with the struggle.” But never assume that a client who is multiracial is coming in to address identity issues, he cautions. “Focus on their presenting problem first and just be with them. From there you will find out if identity is something that is connected to their issue.”

With clients who do come to counseling to work on identity issues, Paladino uses bibliotherapy, steers them toward websites that help them see they’re not alone and encourages them to explore all sides of their racial and cultural heritage, which might mean engaging in discussions with family members, immersing themselves in each heritage or joining cultural groups. In addition, he says, “I like to let them have a place to vent and feel like there is nothing wrong with them. Just empathize with the struggle.”

ACA offers a free Multiracial/ Multiethnic Counseling Concerns Interest Network for interested members. The facilitator is Kelley Kenney (kelleykenney@comcast.net). To join the interest network, e-mail Holly Clubb at ACA at hclubb@counseling.org.

Appalachian culture

Plain and simple, too few mental health counselors are available in Appalachian communities, says Kathryn Russ, assistant professor and regional academic director in the School of Professional Counseling at Lindsey Wilson College (LWC). But Russ and LWC are aiming to change that — one well-educated counselor at a time.

While earning her doctorate at the University of Cincinnati, Russ completed an internship at a community clinic in Appalachia, a cultural region that runs along the central and southern portions of the Appalachian Mountains, stretching from southern New York to northern Alabama, Mississippi and Georgia. She developed a passion for the culture and became intrigued by what worked — and what didn’t — when it came to delivering counseling services in Appalachian communities. About four years ago, she was drawn to LWC mainly because of its strong Appalachian student culture and its initiative to partner with local community colleges to offer a two-year master’s program in mental health counseling.

“People of Appalachian culture prefer to attend classes near home, and by training local people, we provide trained professionals for these underserved areas,” says Russ, who teaches at a handful of LWC’s extended campuses and serves as clinical supervisor for the Maysville, Ky., site. “Our graduates tend to stay in the ‘home’ territory and work in local schools, public and private mental health agencies, women’s shelters and drug rehab organizations.”

People rooted in Appalachian culture tend to score higher in levels of depression and somatization in comparison with average Americans, Russ says. “For practical purposes, this indicates that people of Appalachian culture need mental health assistance. People who are depressed tend to not form optimal parenting bonds, which means intergenerational problems. They also tend to self-medicate with alcohol and drugs. The heightened somatization scores often mean that people go to their medical doctor for relief of symptomatology and are prescribed medications, [which] too often become addictive.”

Counselors stand the best chance of making a difference in these tight-knit communities by simply placing themselves there, getting involved in the life of the community and actively reaching out, Russ says. “Word of mouth is very important. If the client knows of the counselor, has family that knows the therapist, or if they hear about the counselor through their church community, for example, the client is much more likely to seek professional help if the need arises. This means that counselors cannot just sit in their office waiting for people to come in.” To begin establishing bonds with the people of Appalachia, Russ recommends that
counselors volunteer in the community, give talks at community gatherings or attend social gatherings at local churches. Another key to helping, Russ says, is to train local people to become counselors because they’re already part of the community’s kinship circle.

“Career counseling is another great way to approach people because it is socially acceptable and there is no stigma involved,” Russ says. Another means of access is collaborating with drug rehab centers and shelters. “The client has usually formed a relationship with the referring agency,” Russ says, “and their stamp of approval makes the client feel safer in coming to you for therapy.”

A few years ago, Russ decided to investigate the most effective ways for students and counselors to work within the Appalachian culture. Many of her findings emerged from observations made at a community counseling clinic in Ashland, Ky., but Russ also worked with other LWC faculty members and spoke with former clients who had chosen not to return to LWC clinics as well as those who decided to continue therapy. From that research, she developed a bullet list of advice. Among her tips for counselors: Active listening is very important; try to see the client’s perspective; include family, community and church in interventions whenever possible.

Russ offers a wealth of other information to counselors who encounter clients with roots in Appalachia. At the top of the list? Not being overly task oriented, she says. “It is necessary to always chat first, then go on with therapy. This is how you show respect for them as people.”

Russ also recommends some level of self-disclosure. “I don’t mean telling everything about yourself. Just let people know that you are a spouse or a parent, that you like to garden or you love lemon meringue pie. People of Appalachian culture need and want this type of background information. It lets them know you are somebody like them, and that makes them feel safer, that you can relate to them.”

Counselors should be wary of coming across as an expert or “know-it-all” to these clients, Russ cautions. “Nondirective works much better.

Otherwise, they may feel you have gotten ‘above your raising,’ which is a big no-no in this culture. They frequently don’t like being asked direct questions. For example, rather than saying, ‘What did you do this past weekend?’ you might say, ‘We had some great weather this last weekend. Hope you enjoyed it.’ The person being addressed then has a choice of saying yes or no and sharing what they did — but they don’t have to if they don’t want to. Silence, which can be very hard, is a good method to use. You sometimes have to wait a long time for a response, but it is worth waiting for.

Russ, who uses people-oriented, cognitive behavioral, narrative and reality therapies with clients of Appalachian culture, says confidentiality is of the utmost importance in building and maintaining the counselor/client relationship with this population. “If they trust you with a family secret, to them, that’s like being given the family jewel. They don’t share family secrets, so if they do with a therapist, the client needs to be absolutely certain that it’s not going to go any further.”

Native Americans

Every year for the past four years, David Hof, an associate professor in the Counseling and School Psychology Department at the University of Nebraska at Kearney, has taken a group of students to the Pine Ridge Reservation in the southwest corner of South Dakota. Hof and his students don’t go with the intent of scheduling one-hour sessions or diagnosing tribe members with mental disorders. They go with the goal of developing relationships with the people on the reservation, normalizing the concept of counseling and teaching the graduate students about Native American culture. The hope is that the experience will help the counselors-in-training to develop into culturally aware and culturally effective care providers.

The eighth-largest reservation in the nation, Pine Ridge, which is home to the Oglala Lakota tribe, is also the poorest. Hof calls the reservation’s inhabitants “one of the most underserved, oppressed populations in the U.S.” To back that up, he points to a 2006 article that produced startling statistics: Teenage suicide rates on the reservation are 150 percent higher than the national average, infant mortality is 300 percent higher than the national average, the school dropout rate exceeds 70 percent, and more than half of the reservation’s adults battle addiction and disease.

Hof, who also works in private practice and is a past chair of ACA’s Midwest Region, had what he calls a mainly Caucasian Midwest upbringing. But he developed a friendship with a fellow master’s student from Pine Ridge and
then went on to complete an internship at a reservation in Minnesota while earning his doctorate from the University of South Dakota. When he arrived at the University of Nebraska at Kearney 12 years ago, Hof quickly realized exposing counseling students to Native American culture would be beneficial.

Advocacy equates to service in the counseling profession, says Hof, who adds that he’s inspired to help not only because of the reservation’s close proximity to the university and desperate need for mental health services but because it’s part of the counseling profession’s mission. “It’s not a choice,” he says. “It is ethically our responsibility to advocate for underserved populations.”

So each August, Hof’s student group heads to Pine Ridge for a little less than a week. They stay on the reservation with Dallas Chief Eagle, a storyteller, touring artist and director of the Hoop Dance Academy. What’s most important, Dallas Chief Eagle tells Hof, is that the students come, listen, learn about the culture and then share that increased understanding with others. On the most recent visit, Hof and the students participated in a three-and-a-half-hour sweat lodge ceremony. The reservation’s leaders don’t want the students to come as tourists, Hof says, but rather to participate in the rituals so they gain a deeper understanding of the community’s culture.

Hof’s hope is that some of the counseling students who take part in the trips will develop a passion for the culture and one day choose to provide services on the reservation as a career. But even for those who go on to work elsewhere, the trips provide a greater understanding of the culture and should partially equip them to more effectively treat Native American clients in various settings, Hof says.

While on the reservation, Hof and his students try to demystify the concept of counseling and refine it so that it will be more culturally acceptable to the people of Pine Ridge. One of the most frequent complaints his groups hear is that the mental health field is driven by diagnosis, Hof says. If a client explains that he’s hearing his ancestors talk to him, a counselor unfamiliar with Native American culture might think the client is delusional, on drugs or making up stories. Counselors must allow space for Native American clients to share their feelings and experiences without feeling judged, Hof emphasizes.

People on the reservation are more likely to go to a family member or a medicine man rather than go outside the culture or reservation for help, Hof says. That means counselors working with Native American clients might want to consider collaborating with service providers on the reservation or close by. “To work with a medicine man or to include dialogue and work around the seven sacred rites” — seven sacred ceremonies that include the sweat lodge and vision quest — “can be critical to change,” he says. The job of the counselor advocate, Hof continues, might involve connecting the client with appropriate services. “If my client has been trained in the Lakota way, it may be necessary for them to participate in a sweat lodge or a sun dance to achieve wellness. To be able to suspend judgment and understand behavior in the context of culture seems critical.”

Counselors might assume that a client-centered approach based on the relationship would work best with Native Americans, but Hof says a more direct approach that still retains an emphasis on the relationship seems to be most effective. “For mental health issues, an individual might meet with their medicine man for help,” Hof explains. “It would not be out of the ordinary for the medicine man to prescribe participation in a sweat lodge or other traditional healing methods. In much the same way, when an individual comes to counseling, they may be looking for more direct feedback on what they are to do for change to happen.”

Dallas Chief Eagle has emphasized the importance of counselors simply listening. “Please, please, please, just be willing to hear their stories,” the leader has told Hof. Dallas Chief Eagle’s advice is to refrain from diving straight into treatment planning with Native Americans and instead to get to know who these people are and to form a relationship with them. “That’s not dissimilar to what counselors do anyway,” Hof says, “but to have that context in mind is significant.”

From his years of experience visiting the reservation, Hof has learned that the most effective counselor works as part of the system instead of operating outside of it. “It is our belief that by understanding a person’s culture and having a willingness to work in the context of their culture, there is a better chance of having a meaningful interaction,” he says. “That’s really nothing new — just good multicultural counseling skills.”

Dual minorities

Dustin Shepler reflects on a 16-year-old male client’s struggle with being a dual minority. “He felt that while his sexual minority and his biracial identities were both acceptable to him, others discounted the sincerity of his identification with his gay identity because of his age, and others minimized his biracial heritage because of his light skin tone,” says Shepler, a doctoral student in counseling psychology and guidance services at Ball State University.

“The key to working with this teen was validating both identities and giving him time to talk about the parts of his heritage that others had ignored, but at the same time, not minimizing his other concerns about sexual behavior and academic problems or reducing him to two labels.”

Thanks to his own identity development process and a strong interest in multicultural issues, Shepler developed a passion for learning more about counseling dual-minority clients — those who claim both racial/ethnic and sexual minority membership status.

“My experience working with clients had made it apparent that people do not only see themselves as one demographic label but instead switch seamlessly between different facets of their identities throughout counseling sessions,” says Shepler, who counsels clients at three locations and teaches an undergraduate sexuality course at Ball State.

Advocating for groups that are sometimes overlooked, such as dual-minority clients, is essential, Shepler says. “Advocacy and serving those who are often pushed to the fringe of society provides ways to increase cultural understanding, serves as a basis for developing more competent practice guidelines by including members of communities for which treatments are designed and improves the mental health...
of different communities, which is good for all in our society. With advocacy, everybody wins.”

To reach out to this group, Shepler started a safe place for gay/lesbian/bisexual/transgender/queer (GLBTQ) students at Earlham University, where he is completing an external practicum. He contacted the leaders of a GLBTQ campus organization to find out what counseling services might be of use, and they allowed Shepler access to their electronic mailing list. The eventual result was the formation of a GLBTQ discussion and support group.

In addition, Shepler is investigating the possibility of developing an online community to better reach international students at Earlham. “Many international students struggle about being openly out about their sexual orientation on college campuses because they fear other students from their home country will find out and ‘report’ the information to others in their country of origin,” he says. “This makes it especially difficult for this specific type of dual-minority student to interact within the GLBTQ community and receive affirmation as a sexual or gender minority.”

Although it’s important for counselors to build relationships with members of minority communities, Shepler says few counselor education programs teach counselors-in-training how to accomplish that. “Learning how to build community ties and improve outreach effectiveness based on research should better be incorporated into counseling preparation programs,” he says. “Supervisors also have a unique opportunity to improve supervisee competency by engaging in and modeling how to discuss race, sexuality and gender.” In his own role as a supervisor, Shepler has noticed that master’s students are often uncomfortable at the start of these discussions but grateful for the training by the end. “Working with students to actually learn the skills that are mentioned in various courses is a great way to prepare them to become involved in outreach and decrease fear surrounding issues that have historically been politically charged.”

When beginning work with any client, Shepler recommends having an open discussion about the client’s expectations as well as your expectations as the counselor. “I also assess clients’ racial and sexual identity development statuses in order to tailor treatment and approach topics in a manner consistent with how clients see the world from their own developmental perspectives. Usually this involves listening for race-based and sexuality-based comments. Most recently, one of my clients discussed how LGBT allies ‘were trying to claim a status’ [for] which they couldn’t appreciate the complexity or experience of being — i.e., LGBT. This is an indication that she is still in a state of emersion/immersion or, to use [Vivienne] Cass’ term, pride.”

Further into counseling, recognizing and exploring experiences of oppression is an excellent way to understand how a client perceives his or her life experiences, Shepler says. “Dual-minority clients are often left wondering if it was their race/ethnicity or their sexual orientation that caused someone else to react in a discriminatory way, and exploring this in counseling can be an invaluable experience. While White GLB people or racial minorities are left to wonder about discrimination, the added layer of a dual-minority identity is something that is sometimes difficult for GLB people of color to discuss with White GLB community members, just as it is difficult for many White GLB people to discuss instances of perceived discrimination with heterosexual friends. The added layer of ambiguity coupled with feelings of discomfort and possible fear of disclosing a sexual minority identity within a racial/ethnic community leaves individuals with few resources from which they can gain support.”

Shepler discloses his own identity as a gay man when working with sexual minority clients and emphasizes that, although he is White, he is open to race-based discussions. “I believe it is the counselor’s responsibility to be willing to introduce sensitive topics. Opening the door to difficult discussions early on is key in helping clients establish a strong working relationship and, I believe, is essential in preventing early termination.”

Counselors need to realize that in many racial and ethnic minority cultures, sexuality and gender expression are viewed as inseparable, which affects the language the client uses, Shepler says. “When same-sex-attracted clients from racial minority groups reject a GLB label while still discussing same-sex attractions or sexual behaviors, counselors may erroneously assume that clients are in the early stages of developing a sexual minority identity and resort to typically ‘White’ ways of labeling sexual orientation, causing them to refer to clients as gay, lesbian or bisexual, even when the client rejects such labels.”

Using language consistent with how the client sees himself — for example “down low” or even straight — is important, Shepler says. Overlap in sexual orientation and gender identity might cause some clients to maintain a straight identity even alongside same-sex attractions and relationships. “One way to address this issue,” he says, “is by asking clients about their sexual past, not just assuming that a label holds similar meaning for both White and racial minority clients.”

Regardless of his clients’ racial and sexual identity status, Shepler tends to blend systems theory, interpersonal theory and some feminist principles in his counseling. “When used together, it becomes possible to examine the multiple oppressions experienced by dual-minority clients on both the systematic or societal level, as well as the interactions between myself and the client, to make sure that the client’s needs are being met.”

To his fellow counselors, Shepler stresses the importance of reaching out. “When I begin working in any new setting, the first thing I do is consult with clinicians who have been there for some time and likely have some knowledge of the clientele, even if they do not have strong relationships with either racial or sexual minority communities.” The next step is reaching out to leaders in the community, he says. “Eliciting the approval of community leaders may be more important in some communities than others. Nonetheless, fostering such
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a relationship by listening to leaders and community members, as well as offering support and possibly services for communitywide programs, not just dual-minority community members, shows a real commitment to helping a community instead of just wanting to build a clientele or fill slots on an appointment calendar.”

**Underserved students**

Suzanne Mudge, associate professor in the Leadership and Counseling Department at Texas A&M University–San Antonio, doesn’t think college is necessarily the right choice for every individual. “But,” she says, “everyone should be able to choose whether they want to participate or not.”

Creating a college-going culture is one focus of a grant that AT&T awarded Mudge and her colleague Patricia Henderson to improve counseling services for underserved students. AT&T’s original idea behind the $500,000 grant was to provide other types of counselors to schools in addition to the already existing pool of school counselors. Mudge, who won the grant while working at Our Lady of the Lake University, had a different idea. Because school counselors are trained as professional counselors, the schools didn’t need to be fortified with other types of counselors “to do the counseling,” she told AT&T, but the existing school counselors would benefit from receiving additional support. AT&T agreed, and the mission evolved into designing four years of a comprehensive developmental guidance program aimed at underserved students. The curriculums would then be taught to school counselors over four consecutive summers. A fifth summer would equip counselors in the program to go out and train other counselors in their districts.

Three high schools in San Antonio — two in the Northside Independent School District and one in the San Antonio Independent School District — were selected to be part of the program. These schools include a high percentage of free- and reduced-lunch students, many of whom would be the first in their families to attend college. “We picked the neediest schools,” says Mudge, who spent 25 years as a teacher and school counselor.

School counselors from the three high schools aren’t the only ones receiving training. Part of the grant provides scholarships for graduate students who want to train to become school counselors, and priority is given to teachers within these participating schools, says Mudge, who explains that two years of teaching are required to become a school counselor in Texas.

The objective of the grant and summer training, Mudge says, is four-pronged: improving services to students, increasing resources for school counselors, assisting with the development of the professional school counselor identity and assisting with program implementation. In addition to summer training sessions, meetings are held during the year to discuss progress, needs and concerns. Mudge and Henderson also visit the schools throughout the year.

The first summer session kicked off in 2009 with about 20 counselors and counselors-in-training, and the focus was on creating a guidance curriculum for freshman students. “Counselors are taught how to align the guidance lessons with guidance content, academic standards and college and career readiness standards, while focusing on equity and access issues surrounding postsecondary opportunities for underserved/underrepresented students,” Mudge says.

This past summer’s session added a focus on responsive services and emphasized small-group counseling and remediation of developmental skills that the students needed, Mudge says. Future summers will add developmentally appropriate sessions designed by participating counselors for high school juniors and seniors, while guidance lessons and individualized student planning will continue to emphasize college and career readiness and postsecondary planning, Mudge says.

The school counselors aren’t given exact, word-by-word curriculums to follow throughout the year. Instead, Mudge says, the program teaches the counselors how to develop the material on the basis of each school’s specific needs.

In more affluent school districts, students are more likely to receive counseling services privately when needed, Mudge says. But in lower-income areas such as the ones this grant is focusing on, school counselors might be the only available option for students. “So it’s important that school counselors provide the best services they can because they might be the only services that
students about college at school and teachers and school counselors encourage experienced the path to college. When limited education that haven't previously students come from families with from. In the San Antonio area, many environments their students are coming aim to understand and appreciate the counselors. She tells counselors to first major emphasis of her message to school experience is thinking about college, and easily.”

An important part of the high school experience is thinking about college, Mudge says, so preparing students to carefully consider that decision is a major emphasis of her message to school counselors. She tells counselors to first aim to understand and appreciate the environments their students are coming from. In the San Antonio area, many students come from families with limited education that haven’t previously experienced the path to college. When teachers and school counselors encourage students about college at school and those students then go home to families that view employment as the top priority, it can lead to very frustrated teenagers, Mudge says. “Every day, that kid comes from a home that has a different set of values and a different vision than the counselors experience. You need to dig deep [to] understand the context the student comes from so you can appropriately serve them.”

Part of serving these families means recognizing that upbringing and providing options, says Mudge, who is in the process of planning college and career information sessions for students’ families at the three high schools. “The choice comes through education,” she says. “The family can be educated along with the students.” That might mean showing comparative salaries for high school-educated versus college-educated graduates and explaining scholarship and financial aid options, she says.

It’s also vitally important to have an open-door policy, Mudge says. “The best way is to know the community in which you live and to have opportunities for families to come on your [high-school] campus to talk about what their concerns are and then address those concerns.” For example, if a student’s parents say they can’t afford to send their child to college, talk about financial options. If they’re worried their child won’t be safe, Mudge might recommend that the family visit the college campus and look at police reports. Whatever the situation, school counselors should discuss the vision parents have for their child and the best avenue to follow to turn that vision into reality, Mudge says.

Throughout the process, school counselors must be careful not to give the impression that they are trying to strip parents of their power, Mudge says. “You don’t tell them, ‘This is what you need to do for your child to be successful.’ Tell them, ‘Your child is interested in this. This is what we have been talking about,’ and then ask [the parents] what they think.”

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Letters to the editor: ct@counseling.org
In April, Arizona Gov. Jan Brewer signed state Senate Bill 1070, allowing law enforcement officers to question the citizenship status of any individual suspected of being in the country illegally. The law created a dichotomous reaction among states and individuals and temporarily hurled the debate onto the front pages of newspapers, magazines and websites. In writing this article, we want to offer some contextual information, raise awareness concerning Mexican immigration and provide counselors with culturally competent treatment options and advocacy strategies on behalf of this population.

The immigration debate is complex and beyond the scope of this publication. The thoughts that follow are informed by a human rights and social justice framework, not a politically partisan perspective. Thus, we believe this article is relevant for all counselors.

Why do they come?

Historically, Mexico has been an economically unstable country, but it has never been as destitute as it is now, due in large part to the consequences of the North American Free Trade Agreement (NAFTA) implemented in 1994. For the United States, the benefit of NAFTA was to increase the flow of goods across the border. For Mexico, it meant that the grains that had previously sustained the Mexican agricultural trade could now be imported from the United States at much cheaper prices, causing Mexican farmers to abandon their land in search of work. They came north to the border, where jobs were promised in the maquiladoras, or U.S. manufacturing plants. So many farmers fled to the border, however, that even the massive maquiladora system could not absorb them. Those lucky enough to find work at the border are often exploited by low pay and deplorable working conditions. According to a report by Bill Bigelow in 2006, although NAFTA benefits U.S. and Canadian corporations, it is an economic disaster for poor Mexicans and has contributed greatly to the immigration tidal wave.

The same demand for cheap labor is evident on the U.S. side of the border as well. U.S. corporations save millions by paying only the minimum wage. Although it is true that government sanctions exist against corporations that hire illegal immigrants, these sanctions are rarely imposed. In fact, a recent Texas Monthly article quipped that when immigrants arrive at the border, they find two signs. One says “Keep Out,” and the other says “Help Wanted.”

Because these laborers are human, they get sick and need health care. They have families who need basic provisions such as food and shelter. They must comply with American compulsory education, so we must educate their children. In short, they have the same basic needs that we have as American citizens. Unfortunately, their employers don’t cover these “extras.” U.S. taxpayers do. In the process, Mexican immigrants, rather than the corporations, have become scapegoats for a nation that is frustrated and resentful of hosting this growing labor force.

One frequently asked question is why Mexicans do not immigrate legally. U.S. immigration quotas are not commensurate with our demand for labor. The process for legal immigration to this country is economically and temporally prohibitive for the majority of Mexican immigrants, whose very survival depends on it. Legalization would also place the burden of “extras,” such as health care, on the corporations, thus increasing their production costs and reducing profits.

Immigrants pay regular income taxes to a system that will never repay them. With counterfeit Social Security and tax identification numbers, their taxes go into the Social Security system’s “earnings suspense file.” Federal and state governments benefit greatly from this model. Immigrants pay income taxes, service taxes, sales taxes, gasoline taxes...
and real estate taxes. Alan Greenspan called illegal immigration a “net positive” when asked to identify strategies to keep the Social Security system solvent.

Undocumented immigrants are relegated to using “mandated services” such as emergency health care and the public safety system. Federal cutbacks have placed the growing burden for these services on local governments, further fostering resentment and pushing states and local communities to take matters into their own hands, such as with Arizona's SB 1070 (requiring law enforcement officers to determine citizen status) and Nebraska's Immigration Law 2010 (making it illegal for landlords to rent to undocumented persons). Although these laws might represent responses to a lack of federal intervention, it is undocumented workers — in most cases, Mexican immigrants — who become targets of discrimination and hate for their mere presence, their use of basic human services and their willingness to work under harsh conditions for little remuneration.

**Effects of discrimination**

The Arizona law reflects a growing trend of ambivalence not only toward Mexicans who are in this country without authorization, but also toward U.S. citizens of Mexican origin. According to a 2010 Pew Hispanic Center report and the FBI, this trend has been documented by the rise in hate crimes and an increased perception of discrimination by Mexican Americans. In Elena Flores et al's 2008 study, “Perceived Discrimination, Perceived Stress, and Mental and Physical Health Among Mexican-Origin Adults,” the authors found that discrimination is a source of stress that goes beyond general stress. In addition, the combination of both perceived discrimination and general stress negatively affects mental and physical health among individuals of Mexican origin. Latina/o youth in particular report that discrimination is pervasive and that it is associated with depressive symptoms and low self-esteem.

In addition to the effects of perceived discrimination, Immigration and Customs Enforcement (ICE) practices can significantly affect the mental health of children of immigrants who are in the country without proper documentation. Worksite raids performed by ICE often result in unauthorized workers being transported to different states for holding before deportation. This separation of children from parents can be a traumatizing event. The event can signify not only the loss of a caregiver, but often the loss of a familiar home as well.

In 2010, Jill McLeigh reported that one in five children with recently arrested parents had clinically significant internalizing problems, such as depression and anxiety; one in three had clinically significant externalizing problems, such as aggression and disruptive behavior. In addition, a Pew Hispanic Center survey in 2007 showed that the majority of Latina/os who live in the United States fear that either they or someone they know will be deported. This climate of living in constant fear can be detrimental to the mental health and self-concept of these children — immigrant or not.

**Interventions**

In working with Latina/o immigrants, emphasizing an approach that pays attention to stories and storytelling can be especially validating and empowering.
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- In these tough economic times, recent graduates are having greater difficulty than usual finding their first counseling position. What can and should ACA do to assist new professionals with employment issues?
- Recent court cases have focused on whether practicum students can refer a client because of value conflicts. What is your view on whether counselors may refer a client to another counselor because of strongly held beliefs and values by the counselor?
- Through the initiative 20/20: A Vision for the Future of Counseling, delegates from 31 organizations within the profession of counseling have promulgated a consensus definition of counseling that can be used with the public and legislators: Counseling is a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals. Should all counselors, regardless of specialty, use this definition? Why or why not?
- Career development and career counseling seems to be receiving less and less attention in many graduate counseling programs. Is this a good thing or not? Why?
- What is the role of the school counselor in college and career readiness?
It is important for counselors to be aware and respectful of the cultural values of personalismo (a preference for a more personal, although not necessarily informal, communication style) and familiarismo (an emphasis on the centrality of family in individual lives), which are relevant for many Latina/o individuals and families.

The notions of cuentos (storytelling) and platica (small talk) may also be culturally responsive methods for this population. When immigrant families can communicate via stories of their own experiences, their comfort level may be facilitated. Joseph Cervantes and Lisa Sweatt suggested that in this process, the counselor needs to recognize not only stories of loss and hardship but also stories of resilience, strength and coping.

My (Selma Yznaga’s) use of genograms with Mexican immigrants offers one example of a direct counseling intervention that addresses the importance of the immigration experience while utilizing family strengths to functionally cope with the psychological toll this process can have on immigrants. Using the genogram in this way helps in identifying past patterns in family functioning. In addition, it aids in locating exceptions, externalizing the problem and creating a focus on how to incorporate these lessons for current and future functioning.

The explicit use of stories and storytelling that seems to complement the preferred way of communicating important aspects of life for many Latina/o immigrants is found in the narrative therapy framework. Externalizing the problem can bring a normalizing aspect to the difficulties immigrant clients are facing. This mode of discussion also serves to help curb the negative attitude many Latina/os have toward counseling. Externalizing removes this “issue” from within the client and to an external metaphor that can decrease the stigma often associated with seeking mental health services.

Finally, groups in a school context can directly address issues of acculturation and ethnic identity. Immigrant adolescents are still experiencing the process of identity formation. However, when this process is layered with coming to a new country, then ethnic identity is important to address specifically. According to Lisa Edwards and Andrea Romero, for many of these adolescents, a strengthening of ethnic identity can serve as a protective factor against the negative effects of discrimination, particularly peer discrimination. So including and promoting ethnic identity in counseling and groups is crucial for this population.

It is also important to note that when working with clients who are feeling the effects of marginalization, we cannot simply help them “adjust” to an unjust situation. We need to help them find ways to cope with discrimination, tap into sources of strength within their families and uncover stronger self-concepts. However, the cultural aspects within each of these areas should be emphasized.

In addition, the social justice counseling model transcends the professional counseling relationship to include advocacy for marginalized individuals, including those who are not necessarily clients, in the community. Advocacy can take the form of participating in rallies, protests and awareness campaigns that seek to change the status quo, improve the daily living conditions and ensure basic human rights for the immigrant population.

Counselors must be careful to avoid taking on a “missionary” posture that might disempower recent immigrants by suggesting that they need to be cared for by a U.S. citizen. One way of respectfully assisting is by building relationships with organizations in the community that have an established interest in this population. Aligning ourselves with trusted “cultural informants” is another. Find someone who is already trusted within the immigrant community and ask this person to introduce you to community members. Counselors should be mindful that the immigrant population might be skeptical of any agency or organization trying to penetrate their community. Their experience of being unauthorized often leads to a healthy paranoia when it comes to determining whom to trust. Expect to frequent the community for some time before trust is earned.

Within our discipline of counseling, Counselors for Social Justice, the Association for Multicultural Counseling and Development and the Latino Interest Network (within AMCD) are active in challenging systemic oppression and raising awareness of human rights injustices, including those involving immigrants. Beyond the professional counseling relationship and community advocacy, counselors can take part in global change by joining national and international organizations that have a significant presence and voice in immigration concerns. Among these organizations are the Southern Poverty Law Center, Amnesty International, Mexican American Legal Defense Fund, League of United Latin American Citizens and the Pew Hispanic Center.

It is critical that mental health professionals seek accurate information regarding the immigration debate rather than establishing values and perceptions on the basis of what they see or hear in the popular media. The burgeoning Hispanic population is no longer contained in border states, and it is possible that each of us will have contact with Mexican immigrants. Our response to laws such as Arizona’s SB 1070 gives counselors an opportunity to demonstrate our commitment to human rights, not in an abstract, theoretical way, but in our daily practices via micro-, meso- and macro-system interventions.

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Letters to the editor: ct@counseling.org
The Great Depression was nearly over and the nation was only two years from being plunged into World War II. I was almost 6 years old and vaguely aware of the financial and emotional strain of the Depression, the impending war and the horrific dust storms that swept across the High Plains threatening to bury our farm.

On Oct. 3, 1939, I fell from my horse and in a surreal, detached way saw the exposed bone of my left wrist sink deep into the barnyard dirt. An eidetic image of that trauma has remained undisturbed in my memory for 70 years. I still see the bone and the family doctor treating the wound before the age of penicillin. Three days later, my parents were rushing me to the city, where an orthopedic surgeon was waiting to amputate my left arm inches below the shoulder. The relentless invasion of the gas gangrene bacteria gave the surgeon little choice but to tell my parents that I might not live through the surgery.

In spite of advances in medicine, figures from the Amputee Coalition of America and research from Johns Hopkins University show there are 1.7 million people in the United States with limb loss. Research from the Amputee Coalition of America also shows that, on average, 507 people in the United States lose a limb every day, and that figure is expected to double by 2050. Of the 185,000 amputations each year, 80,000 are the result of diabetes. Trauma-related accidents account for most of the other amputations.

The St. Petersburg Times of Florida published an article earlier this year with the headline “Amputations become the defining injury of the earthquake in Haiti.” Joaz Nancie, who survived the disaster but lost her leg, was quoted as saying, “There is no place in Haiti for people like me. Without my leg, I am a freak. Cripples are rejected here.” Haiti needs education, and amputees need counseling. Even in the United States, veterans with limb loss return to a society that generally does not grasp the challenges amputees face. The counseling profession must step up to the challenge of helping these individuals.

My 30 years as a professor of counselor education, 30 years in a limited private practice and 70 years of living with limb loss gives me a unique perspective on the needs of amputees and what counselors can do. I suspect some counselors will promptly think, “I don’t encounter people with missing limbs.” Perhaps that is true for some, and I know that many amputees avoid seeking professional help. The direction taken by an amputee ultimately is his or her decision. Nevertheless, counselors are in a position to provide opportunities for group interaction, individual counseling or networks to meet the needs of amputees.

Following are some of the concerns that matter to people with limb loss.

**Body image**

An amputee quickly becomes aware that other people notice the limb loss. Preteens are aware that they look different but are not inclined to dwell on it because peer approval is not yet critical. Teenagers, on the other hand, have discovered the opposite sex and frequently believe the absence of a limb makes them less attractive. This physical fixation may continue into young adulthood.

In spite of recent research that shows social reaction to be more accepting than in the past, amputees fear rejection and consequently might avoid close relationships. I was fortunate during my teen years to excel in athletics and became a “jock.” That label opened doors to me that otherwise might have remained closed. Nevertheless, my personal unspoken label was, “I have one arm.” For example, even as a preteen, I was reluctant to go swimming because I didn’t
want people to see my bare stump. I cannot even venture to guess the number of times children said to their parents, “Look, there’s a guy with one arm.” The parent invariably shushed the child.

I took swimming for credit when I was a freshman in college. The instructor looked at me, told me to go to the shallow end of the pool and said he would get to me later. When the semester ended, he still had not gotten to me, in spite of my frequent requests. I think he just didn’t know what do with me. The same was true when it came to golf. All of the coaches gave up because they didn’t know what to tell me.

So what can you do as a counselor? The first thing, of course, is to apply what you know from Counseling 101 — accept unconditionally. As I hinted earlier, an amputee does not immediately incorporate and accept the part-whole image, so it is important as a counselor that you do. It takes time to accept this modified body image.

A counselor can also help the amputee link with support groups. Within the supportive atmosphere of a support group, fears and frustrations are more easily expressed. Acquaint the amputee with organizations such as the Amputee Coalition of America. There are also publications and opportunities to interact with others in cyberspace, for example, at activeliving.com or by e-mailing limbcenter@maryfreebed.com. Samples of other organizations online are Amputee Empowerment Partners, the Challenged Athletes Foundation, the Eastern Amputee Golf Association, I-Can (Child Amputee Network) and Reach-Association for Children With Upper Limb Deficiency.

Counselors can also help amputees accept that being different need not make a difference in the way they view their life. When an amputee can honestly challenge his or her inaccurate assumptions about limb loss, it is only a short step to embracing a new image. This does not happen overnight, however.

Self-concept

An affirmative definition of self positively correlates with our ability to maintain an optimistic frame of mind. (For more on this, see “Counseling optimists and pessimists,” an article I wrote for the October 2009 issue of Counseling Today). Help your clients inventory their positive and negative perceptions of self and create specific strategies for change. Defining oneself as adequate is critical.

Consider this carefully. When I finally accepted myself as “a person with one arm” instead of a “one-armed person,” I stopped pretending in my mind that I still had two arms. This happened at about the same time that I saw myself with one arm instead of two arms in my dreams.

Explore this with your clients who have a missing limb. In other words, help them accept the fact of having a missing limb and then examine the emotional baggage they have been pulling around. Their definition of self might be contaminated by their emotional convictions.

Risk

I don’t believe the most important four-letter word is either love or hate. I believe it is risk. Many amputees immediately deal with issues surrounding relationships, success and failure, and short- and long-range security. There are also the emotional issues of loss that include grieving, shame, guilt, loneliness, anger, sadness, self-pity, hopelessness, helplessness, despair, depression and other feelings of being overwhelmed. But confronting these and many other concerns requires a willingness to risk sharing them with someone.

The critical question I have had to ask myself through my years as an amputee is, “What is the worst that can happen?” Often, my answer is, “Probably nothing.” I find that if I validate myself, other people comfortably validate me. Most of us say, “I want my life to be worth something,” so it is important to help your client find the door to self-worth.

I have long been intrigued by the impact the surgeon’s few well-placed words had on my parents after my arm was amputated when I was 6. He said, “Treat him like he has two arms. Let him risk failure. Don’t let him use the disability as an excuse not to try.”

My parents followed his advice religiously, and his advice is applicable to any amputee at any age. Encourage clients to define themselves as people, not as amputees. Encourage them to risk failure. Anyone who succeeds knows there is risk involved and understands that identifying a task as difficult is never an excuse to neglect trying.

Going deeper

In spite of the increased attention being paid to treating trauma victims, I find few references in published literature to the specific psychological needs of those with limb loss. However, comprehensive coverage of limb loss is available through publications of the Amputee Coalition of America. More good information can be found in Rehabilitation Psychology, Psychological Aspects of Disability and inMotion (a publication of the coalition). In addition, Ellen Winchell’s 1995 book Coping With Limb Loss takes an extensive look at the medical and psychological aspects of limb loss.

Not surprisingly, people who lose a limb go through a period of adjustment. Outwardly, a host of challenges are imposed by an environment generally designed for those with four limbs. Then there is the private effort to perceive oneself as part-whole. This psychological struggle may also result in a variety of adjustments.

When the brain records the traumatic event resulting in the loss of a limb, it simultaneously records the emotional reaction. If the emotional reaction inhibits satisfying adjustments, counseling can help disengage the distorted emotional memory from the event. The amputee must become free to view himself or herself without the filter of the disability. In time, the client may come to understand the idea expressed by Eleanor Roosevelt: “No one can make you feel inferior without your consent.”

Marvin Knittel is professor emeritus of counseling and school psychology at the University of Nebraska-Kearney and a life member of the American Counseling Association living in Tucson, Ariz. His most recent book is Counseling and Drama: Psychodrama a Deux (counselinganddrama.com). Contact him at mkknittel@gmail.com.

Letters to the editor: ct@counseling.org
I have come to realize that trauma to the brain can create a myriad of physical, cognitive and emotional impairments that may dramatically transform a person’s life. By sharing a glimpse of my own odyssey, I hope that I might encourage my fellow counselors to increase their awareness of clients and families who have endured a near-death experience and to better understand how neurological impairments can become an ongoing process of redefining and reclaiming a quality life.

Nzingha’s story

After I had undergone several hours of neurological tests because of unbearable headaches and vomiting, a doctor told me I had blood clots in my brain and took me to intensive care. Some days passed by after that. I vaguely recall family members, nurses and doctors coming in, and I remember crying about my head hurting. Then, one morning, I woke up and couldn’t feel my left hand when I tried to rub sleep out of my eye. That’s when I was told I had suffered a venous sinus thrombosis: a stroke in the veins of my brain. Following several weeks in the neurological ICU, I was moved to a rehabilitation center.

In ICU, I remember feeling very upbeat. While the rehabilitation admission nurse was attaching electrodes to my body to monitor my vital symptoms, I happily asked if the rehabilitation facility was equipped with a treadmill so I could get back to jogging. I realize now, however, that I was in denial about the severity of my illness and the impact it would have on my life. In rehabilitation, I resented having clinicians half my age point out to me the letters I missed on a word search, teach me once again how to tie my shoes and become impatient with me when I didn’t want to wait for the staff to move me to a bedside commode.

Getting well was not a magical journey of discovering the intricate functioning of my brain. I felt imprisoned and betrayed, both by my body and by the medical staff. Even my family was seemingly conspiring against me to make me believe I was psychotic or moronic. After I came very close to trying to knock a nurse’s aide unconscious with my bedside commode, I started wondering whether everyone might be right.

After almost two decades of providing empathy, advocacy, encouragement and care, I, the accomplished clinical therapist, was identified as “difficult” in my patient chart.

One day, I realized I felt powerless and hopeless about my life and future. I looked at my mother, who had so patiently watched over me every day, and said, “Mom, I’m disabled, and I don’t want to accept it.” She looked away from her soap opera and calmly replied, “You’ve been stubborn all of your life.” I had to smile because she was right. My stubbornness was a part of my strength. But it had become a part of me that I also needed to understand and overcome so I could get better.
I began to take a closer look at my situation. I was still grateful to wake up alive every morning. I was starting to marvel at how my brain was healing because I was learning to improve my spatial perception and motor coordination. I was learning how to read all the way across a page without forgetting that I'd already completed the same chapter in a book four times.

In addition to being stubborn, I have always possessed a curious mind and was fascinated by the journey my brain and I were on. It occurred to me that this part of my journey might include learning acceptance. For the first time in my life, I had to accept that I couldn’t achieve things by sheer will. I changed my attitude, became a cooperative patient and got busy working at rehab with as much passion and gusto for my life as ever before.

**Kaia’s story**

Initially, my brain couldn’t comprehend that my mother was in a life-threatening state. I waited on the cusp between anger and tears, wondering if my mother would still be my mother. When I first saw her, she squinted at me as though trying to see where she had seen me before. Then, all at once, she began murmuring “Hello” over and over. I could tell she was excited to see me. It seemed as though she had more she wanted to say, but after each “Hello,” any succeeding thoughts were lost to a continued amnesia. After a few minutes, she was able to recall my name. We had a short conversation, but the talking made her head hurt even more.

The first week was the worst. Every day brought with it the same painful déjà vu. Sometimes she would cry, but once the hemorrhaging stopped and the morphine drip finally made her more comfortable, her old wisecracking personality returned. Realizing that the worst was over, we all found some strange sense of acceptance regarding my mother’s condition.

Despite what my mother remembers, the truth is she was frightened, particularly after realizing she would be unable to use her left side, at least for a few days. When the doctors explained the situation, she seemed more assured, but every few hours, a lapse would overtake her. She would forget conversations and repeat phrases or thoughts multiple times.

Throughout the course of her illness, she maintained her strong spirit and fierce joy. Each morning she awoke, she was grateful for another day of life. Although she had rough moments of denial and paranoia, there was never a time in the hospital when she thought she would not be well again. The next day she awoke was the next chance for her to inch closer toward wellness. Seven weeks went by between my mother’s stroke and her remarkable recovery. Although the incident was indeed horrible, I will always remember her staunch tenacity and admire the strength and optimism she showed in the face of adversity.

I believe that compassion and understanding are critical when dealing with illnesses and/or trauma. We need to truly listen to the person going through the event, always respect what the person has to say and honor the person’s courage in opening up to us at all. These individuals need support and friendship, not someone who makes them doubt their capabilities. And always try to laugh. Laughter is one of the best medicines around. If you can smile in the face of adversity, you can do anything.

**Nzingha back at home**

I now feel I am living a very complicated life that is difficult for others to fully understand. Both of my brothers died because of blood clots and my mother, who died before I finished this article, was diagnosed with blood clots shortly before her death. People who survive one stroke have a higher risk of suffering another stroke. So I am quite conscious that each day might be my last — or, if I survive another stroke, I could become severely and permanently impaired.

Medically, a traumatic brain injury denotes significant physical injury to the brain. This injury disrupts and distorts cognitive and emotional functioning for some time, even after the physical impairments have disappeared. What’s more is that living with an ongoing, life-threatening disorder is a traumatic experience that continues to affect and change my life profoundly. The experience could take years to recover from.
As a counselor, I was amazed that my recovery was measured only in terms of my physical condition. I appreciated the one support group meeting I attended while in rehab. It gave me a brief opportunity to sit among others like myself and talk about the shock of facing death and waking up to find your body and your future radically changed in what felt like the blink of an eye. When I was discharged, I left with a list of medications, referrals for an at-home nurse and physical and occupational therapists, and an appointment with a neurologist. But no one talked to me about what it felt like to be afraid that my brain might explode at any second. No one discussed with me that the worst thing about your brain gradually healing is that you can't be sure you can ever really trust yourself again or that despite all you are going through, you must find a way back to a full life. In short, no one ever referred me to a counselor.

I wish I would have been referred to a counselor who understood the complexities of someone recovering from a trauma. I wish someone had counseled me about the challenges of piecing back together my emotional, cognitive and physical abilities. That might be hard to find though. I have been in the mental health field for almost 20 years, and I had never encountered this kind of counseling experience before. If I had not experienced this illness, I doubt I could have imagined the complexity of a case like mine. I didn't even realize I needed counseling until months after my physical recovery. And honestly, I was so scared and ashamed of the complex thoughts and feelings I was having that I could not bring myself to seek help.

So this article is a plea to the counseling community to seriously consider the therapeutic needs of others like me. As a therapist who treats co-occurring disorders, I know how difficult it is to process multiple issues simultaneously with a client. To provide counseling for a co-occurring diagnosis of mental illness and addiction, I must possess a thorough grasp of psychiatric disorders as well as the complex mood and thought disorders of the addicted brain. So trust me, both as a patient and as a clinician, when I say that counseling a survivor of traumatic brain injury and truly understanding the recovering life of a beautiful mind requires a grasp of “neurological counseling.”

Geoffrey’s (the academic adviser’s) story

From the time Nzingha began taking graduate courses in the Counseling Program at the University of Cincinnati, she demonstrated a remarkable interest in the human brain. As a counselor educator for more than 30 years, I can readily state that such an interest is very atypical of counseling students. Initially, the brain was a potential area for Nzingha’s dissertation research.

Given this ongoing interest, it is truly ironic that Nzingha suffered a stroke and experienced the variety of difficulties related to recovering from that stroke. As I wrestled to make sense of the fact that a stroke might even be life-threatening to Nzingha, I had to remind myself repeatedly that this wasn’t just a bad dream.

Then, I believe only three days after the incident, I was sitting in my office and received a telephone call. It was from Nzingha! She had phoned to let me know that she was in the hospital and wasn’t sure when she’d be back on campus to resume her studies. My suspicion is that she has no present recollection of this call, but I still feel honored that she thought to update me, her academic adviser, on her progress, even in the earliest stages of recovery.

Visiting Nzingha in rehabilitation was totally reassuring. She looked great. She was moving around slowly but effectively. Her left side wasn’t quite “cooperative,” but she was successfully negotiating to accomplish whatever she needed. Nzingha related a number of funny stories related to her stay in both the hospital and the rehab center. It was completely clear that she was well on her way to recovery. In fact, it was only a week or so later that she was released from the hospital to continue recovery at home.

Now I need to address what I did not initially recognize as Nzingha began to recover each aspect of her life. I didn’t yet understand the courage she was demonstrating to engage her life in the face of the unavoidable worries she has described in this article. She faces fears tied to family history, the unpredictable nature of stroke and a sense of life’s complexity that the rest of us don’t experience. As a friend who also happens to be her academic adviser and a professional counselor, I am in awe of the healing powers of excellent medical treatment, strong family support, solid faith and personal effort. Nzingha is behavioral proof of such healing. Today, Nzingha is attacking the completion of her doctoral course work and generating what looks to be an exciting piece of dissertation research.

The most important lesson from Nzingha’s story for counselors and counselor educators is that we really need to be available to provide support for those who have experienced a stroke. We (and our clients) must be able to deal with the unexpected. A positive, hopeful perspective on whatever unpredicted events may occur to our clients and ourselves will serve us well in the work we do.

Can we convince a client that a crisis situation is “going to be fine”? No, we don’t know that it will be, and it’s never our job to convince a client of anything. But what we can do is listen carefully to clients and make our best efforts to understand and to communicate our understanding back to clients. Through such a connection, clients will no longer feel as alone in their personal struggles, even if their situations have not yet changed.

Nzingha Dalila is a doctoral candidate at the University of Cincinnati, a licensed professional counselor supervisor and a licensed chemical dependency counselor-III. Contact her at dalilan@ucmail.uc.edu.

Letters to the editor:

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For the past three years, with funding from the Ford Foundation, Excelsior’s Master of Arts in Liberal Studies program has been creating courses and a Web site to prepare teachers to better meet the needs of their immigrant students.

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Should counselors be involved in the DSM-5 field trials?

Considering that licensed professional counselors regularly utilize the Diagnostic and Statistical Manual of Mental Disorders (DSM), the logical answer is “yes.”

More than a decade after the American Psychiatric Association (APA) began developing the fifth edition of the DSM, the field trial stage has begun. Field trials will help evaluate the practical use of the proposed DSM-5 diagnostic criteria in real-world clinical settings. Specifically, the field trials will evaluate the clinical utility and feasibility of draft diagnostic criteria as well as the reliability of the new dimensional and cross-cutting assessments.

APA is conducting two versions of field trials. The first version is taking place in academic and large clinical settings, including such well-known institutions as Stanford University, Columbia University/New York State Psychiatric Institute and the Mayo Clinic. The second version will focus on clinicians from solo practices and smaller routine clinical practice settings who volunteer to participate in the field trial. APA plans to randomly select a total of 2,500 clinicians from the volunteer sample.

Although the field trials mainly involve psychiatrists, other mental health professionals will also be included. APA chose to include clinicians from related mental health professions so the field trials would reflect the heterogeneity of professionals who use the DSM.

The DSM-5 field trials are the final opportunity to evaluate proposed new diagnostic criteria that have a great potential to change clinical practice. Among the new criteria:

- Introducing new eating disorder categories, including binge eating as separate from bulimia
- Collapsing substance dependence and substance disorders into substance use disorder
- Adding the new “temper dysregulation disorder with dysphoria,” which is expected to dramatically reduce the number of children diagnosed with bipolar disorder
- Introducing new scales for assessing suicide risk in adults and adolescents

Also to be tested are the so-called dimensional assessments, which may be the most drastic proposed change in the DSM-5. Dimensional assessments are five-point rating scales designed to help clinicians evaluate the severity of a client’s symptoms. APA is proposing two types of dimensional assessments. One is a set of cross-cutting items that would be used with almost any client, regardless of the specific disorder. The second type includes specific severity measures that would be used with specific disorders. Both types would be used initially to establish a baseline and later to monitor client progress in treatment.

As professional counselors, what is our role and responsibility in the DSM-5 field trials? With more than 115,000 licensed professional counselors and more than 53,000 licensed marriage and family therapists in the United States, we represent a large contingent vested in the DSM-5 development process. Counselors work in a variety of settings such as behavioral health care centers, substance abuse treatment agencies, psychiatric hospitals, private practices and schools, and are trained to assess, diagnose and provide treatment for diverse clinical populations. As such, counselors can provide important feedback to APA about the clinical utility and feasibility of the proposed DSM-5 modifications. As part of the field trials for solo practitioners and routine clinical practices, counselors can help answer the following questions:

- Are the proposed diagnostic criteria and dimensional assessments easy for clinicians to understand and use?
- Do clinicians find that the proposed diagnostic criteria accurately reflect or capture their clients’ symptom presentations?
- Are the proposed diagnostic criteria and dimensional assessments useful/helpful to clinicians’ treatment planning?

For more information about volunteering to participate in the DSM-5 field trials, visit psych.org/dsm5-rcp-fieldtrials. APA will randomly select 2,500 volunteer clinicians who, in order to participate in the study, will be required to complete a DSM-5 web-based training seminar, complete evaluation questionnaires and follow defined procedures for assessing and diagnosing clients. Counselor participation is vital so our voices can be heard in the DSM-5 development process.

K. Dayle Jones is a licensed mental health counselor and associate professor and coordinator of the Mental Health Counseling Program at the University of Central Florida. She served as a member of the American Counseling Association’s DSM Task Force that provided feedback to the American Psychiatric Association on proposed revisions to the DSM-5. Contact her at kjones@mail.ucf.edu.

Letters to the editor: ct@counseling.org
Ethics Desk Reference for Counselors
Jeffrey E. Barnett and W. Brad Johnson

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Shannon Hodges and Amy Reece Connolly

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edited by Manivong J. Ratts, Rebecca L. Toporek, and Judith A. Lewis

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Wouldn’t it be nice?

Despite its title, this article isn’t about the Beach Boys song. It’s about a statement Carrie Wilde made to me at the American Counseling Association Institute for Leadership Training in Washington, D.C., in July. Carrie, president-elect of the American Rehabilitation Counseling Association and ARCA’s delegate to the 20/20: A Vision for the Future of Counseling initiative, was relating her experience and observations of the 20/20 process to me, including outcomes to date and possible future directions. Her comments got me thinking about the relationship between general counseling and rehabilitation counseling and what needs to occur for the counseling profession to move forward—and rehabilitation counseling along with it.

The purpose of this article is to share some of my discussion with Carrie and speak to rehabilitation counselors while also educating other counselors who are less familiar with the specialization. I conclude with a call for action that I believe will facilitate the full inclusion of rehabilitation counseling and other disciplines into discussions that affect the counseling profession.

Rehabilitation counseling can be tricky to explain to someone who isn’t familiar with the breadth of the discipline. Although ARCA is a medium-size division of ACA, with roughly 700 members, the specialization of rehabilitation counseling is considerably larger. The Commission on Rehabilitation Counselor Certification (CRCC) currently certifies roughly 16,500 rehabilitation counselors. In addition, other professional associations besides ARCA, including the International Association of Rehabilitation Professionals (IARP) and the National Rehabilitation Counseling Association (NRCA), represent the professional interests of rehabilitation counselors. Although the number of professional associations representing the interests of rehabilitation counselors might seem curious to some, this reflects the diversity of the specialization, much the same way that ACA’s 19 divisions reflect the diversity within the larger counseling profession.

Our diversity can be challenging because each professional organization represents rehabilitation counselors who practice in different settings. These settings often have slight variations in their philosophies of rehabilitation, which can affect their belief in the importance of counseling as a primary professional identity.

These differences in philosophy and professional identity have, at times, been slightly exaggerated by some rehabilitation counselors and used to challenge the belief that counseling is the foundation of the specialization. They ask the question, are we counselors who specialize in working with people with disabilities, or are we rehabilitation professionals who practice counseling as part of a larger skill set? This larger skill set that some of my colleagues speak of is our training in medical aspects of disability, employment of people with disabilities and work assessment of people with disabilities, to name a few. ARCA strongly believes that although the formal training of rehabilitation counselors includes course work in areas unique to the discipline, it does not change the fact that we are fundamentally counselors.

A former mentor of mine at the University of Florida, Horace Sawyer, once said that rehabilitation counselors are trained primarily as professional counselors but also as technicians in the other areas of training. His comment seems appropriate to this discussion because, although there is always an exception, the majority of rehabilitation counselors are not trained as nurses, human resource professionals, business people or psychologists. Rehabilitation counselors draw on knowledge from these professions to assist individuals with disabilities in accomplishing their life goals. But utilizing the knowledge of other professions doesn’t make us anything more (or less) than professional counselors. Rehabilitation counselors might work as administrators, case managers, work evaluators or therapists in private practice, but so do counselors from other specializations. Fundamentally, we are all still counselors!

Some may view the differences in philosophy within rehabilitation counseling as a weakness. On the contrary, it is a major source of our strength. Rehabilitation counselors have a rich history of working collaboratively “across the aisle,” regardless of differences in opinion, to accomplish the goals necessary to advance our counseling specialization. For example, NRCA and ARCA worked collaboratively to establish CRCC in 1974 to begin certifying rehabilitation counselors. Considering the differences in philosophy between the two organizations, I am humbled by the accomplishments of the leaders at that time. Historically, it is not the differences in opinion that make us strong. Rather, it is our belief in inclusion and respect for others’ opinions that is the foundation of our strength.

Although rehabilitation counseling has a rich history of collaborating successfully within the specialization, our success in gaining recognition within the larger counseling profession has waxed and waned over the years. When rehabilitation counselors read articles (CACREP Perspective, May 2010) in Counseling Today claiming there is but one accrediting body, the Council for Accreditation of Counseling and Related Educational Programs, and one certification body, the National Board for Certified Counselors, they often react by stating, “We were here first!” Rehabilitation counselors correctly point to passage of the Soldier’s Rehabilitation Act in 1918 as the “official” beginning of rehabilitation counseling. The Council on Rehabilitation Education (CORE) began accrediting rehabilitation counselor education programs in 1974, the same year that CRCC began issuing the Certified Rehabilitation Counselor (CRC) credential. Although these facts provide an objective starting point to claim, “We’ve been around longer,” rehabilitation counselors cannot allow these statements to become counterproductive. The
moment we begin making statements about “us” versus “them,” we lose our strength as collaborators and create an in-group versus out-group dichotomy that naturally exaggerates the differences between rehabilitation counseling and general counseling. Of all the counseling specializations, we should be keenly aware of the potential for forming negative attitudes and stereotypes in such an environment.

In 1998, the ACA Governing Council passed a “parity resolution” stating that CORE and CACREP accreditation standards are equivalent for the purposes of licensure. This recognition within ACA was important so that leadership within CRCC, CORE and ARCA could advocate for graduates from CORE-accredited programs and the certification exam for rehabilitation counselors to be included in state licensing laws for professional and mental health counselors. After many years of success, many rehabilitation counselors now enjoy the ability to practice as Licensed Professional Counselors (LPCs) in their respective states. An unofficial report by CRCC suggests that approximately 23 percent of CRCs are licensed to practice counseling within their respective states.

As the president of ARCA, I made a commitment to collaborate this year with all rehabilitation professional organizations, no matter their philosophy. The leadership of the National Rehabilitation Association, a historically conservative group, reported to me in May that they are receiving clear direction from their constituency by way of their regional boards that counselor licensure is becoming increasingly more important to their practice and must be addressed by the association. As a result, ARCA is working collaboratively with the National Rehabilitation Association and NRCA to develop a white paper on counselor licensure. The belief, therefore, that rehabilitation counselors do not become licensed and practice independently is a position that is waning.

The recent decision by the Department of Veterans Affairs (VA) to recognize and include LPCs in the list of recognized behavioral mental health practitioners was a victory for the counseling profession. But the decision to require counselors to be graduates of CACREP-accredited programs excludes licensed counselors who are graduates of CORE-accredited programs. Considering the proportion of CRCs who are licensed to practice counseling, I believe this decision and others like it represent a growing crisis for rehabilitation counselors.

ACA’s public policy office informed me that a group of professional counsellors appointed by the VA’s office of human resources recommended the qualifications for the positions. It appears we need to target our educational efforts on practicing counselors so that everyone is aware of the counseling specializations recognized in professional counselor licensure laws.

Before the decision by the VA, the Institute of Medicine (IOM) made a recommendation to allow veterans to self-refer to LPCs and get reimbursed by TRICARE, provided the counselor graduated from a mental health counseling program accredited by CACREP. Although this seems like another victory for the counseling profession, we must be careful not to allow an elite tier of licensed counseling professionals to develop, lest we fracture the profession in other ways. The exclusion of rehabilitation counseling by
the VA and IOM limits American veterans’ access to care, which is ironic considering that the historical roots of rehabilitation counseling began with veterans almost 100 years ago.

CORE and CACREP accreditation standards are regarded as equivalent when it comes to licensure, so it was no surprise that the two accrediting bodies entered into a discussion about the possibility of merging approximately five years ago. At that time, the leadership of both organizations believed that the two accrediting bodies were similar enough in philosophy and practice to allow them to work with (and learn from) each other to build a stronger, singular accreditation body for the counseling profession. A task force composed of five representatives from each organization was formed, and they spent two years working on the feasibility of the two groups merging. In the end, the two organizations didn’t merge, but they remained open to continuing the discussion in the future.

When articles appear in *Counseling Today* stating there is one accreditation body, it gives the impression to some that the two organizations have stopped collaborating. CORE and CACREP probably just went back to conducting business as they did before the merger discussion. Perhaps we shouldn’t expect these organizations to step outside their daily business activities and establish larger goals for the counseling profession. It is, however, time for professional counselors to work collaboratively and consider what’s in the best interest of the profession. In my opinion, the counseling profession greatly benefits from the two accrediting bodies working collaboratively, whether merged or not.

Returning to my discussion with Carrie Wilde, it became clear during our talk that the next step for professional counselors is to continue building on the work that went into the 20/20 discussion and further unify the profession. The thought behind this article began with a singular suggestion by Carrie: Wouldn’t it be nice if CACREP and CORE worked together and wrote a regular column in *Counseling Today* about accreditation? Instead of individuals writing about the organization they represent, what if representatives from CACREP and CORE worked together to write about what’s in the best interest of accrediting graduate programs in counseling? Imagine the outcome if the combined strength of both organizations was spent discussing how to ensure and improve the quality of counseling programs in the United States. What if they addressed the concerns and future of peer review? What if they focused on the transfer of knowledge to other countries that want to develop accreditation standards and counseling programs?

CACREP had the foresight to begin an international registry of programs. CORE has more recently become involved, along with ARCA and other organizations, in the development of standards for rehabilitation programs in other countries. As the two organizations move forward and consult with other countries about how to develop standards for accreditation and certification, let’s not forget the importance of working collaboratively to develop requirements for counselor licensure within the United States that recognize all accrediting and certification bodies.

Extending this discussion to certification, wouldn’t it be nice if NBCC and CRCC worked together to address matters related to professional credentialing? Where is the research that reports the predictive validity of the certification exams? What is the future of certification, and what should the relationship be between certification and licensure? Where is the outcome data that substantiate the need for these exams? As consumers of these exams, educators have a responsibility — to their students and to the profession — to ensure that the predictive validity of these exams is sufficient and directly related to their practice before advocating for their inclusion in counselor licensure laws.

There is nothing to be gained by exaggerating the differences between the profession of counseling and any counseling specialization, except to shred the very strength of what we are and fragment the profession. As CACREP’s Carol Bobby stated in the article “Making definitive progress” in the June 2010 issue of *Counseling Today*, “If we are seen as a fractionalized group of professionals that compete against each other, we will be treated as such.” If those of us who believe the purpose behind the 20/20 process of speaking with a unified voice is important for the counseling profession to move forward, we must focus on our collective strengths and do what we do best — collaborate.

For that reason, I ask you to join me in a call for action. When you come to the ACA Conference in March:

- Ask CACREP and CORE leadership to write jointly in *Counseling Today* about accreditation matters that affect the counseling profession.
- Ask NBCC and CRCC leaders to write jointly in *Counseling Today* about certification matters that affect the counseling profession.
- Ask the representatives involved in the 20/20 process to move beyond the unified definition of counseling and begin building on the similarities among the counseling specializations, particularly with regard to counselor licensure within the United States. We have more in common with our fellow counselors than we have differences, and the differences between counseling specialties are not as great as they seem or as great as the IOM or VA has portrayed them to be in recent decisions that affect access to counseling services by veterans.

I said the title of this article had nothing to do with the Beach Boys song, but while committing my thoughts to paper, I started wondering if perhaps it does. Considering the emphasis we place in the counseling profession on the importance of diversity and inclusion, “Wouldn’t it be nice to live together in the kind of world where we all worked together as if we belonged?”

Frank J. Lane is president of ARCA, head of rehabilitation counseling and assistant professor at the Illinois Institute of Technology, and a member of the CORE Board of Directors. Contact him at lane@iit.edu.

Letters to the editor: ct@counseling.org
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You are a member of the American Counseling Association, the largest and most respected professional counseling organization in the world. You’ve worked hard for your credentials and now ACA is pleased to offer these beautiful framed certificates for your office or home.

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- Classic and Varsity frames come with brass-plated fittings, which are both handsome and durable
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Source Code: CPFCT05
On Oct. 6, the Northside Independent School District (NISD) in San Antonio dedicated the Dr. Pat Henderson Elementary School, honoring a longtime American Counseling Association and American School Counselor Association member who is recognized as a trailblazer in the field of guidance and counseling. Henderson came to San Antonio from California in 1982 to take the reins as NISD’s director of guidance and served in that capacity for nearly 20 years, retiring in 2001. During that time, she helped the counseling department grow from approximately 60 counselors to more than 200 counselors and designed the Comprehensive Guidance Program model that was taught to all NISD school counselors. Under the model, counselors began actively reaching out to students rather than sitting back and waiting for students to come to the guidance office or waiting for the next crisis to occur. In 1987, the U.S. Department of Education recognized the NISD Guidance Department as one of the top 10 elementary guidance and counseling programs in the nation.

Henderson developed the Comprehensive Guidance Program in the mid-1970s with Norman Gysbers. The program consists of four main components: guidance, responsive services, individual planning and system support. The components are designed to deliver a full continuum of services to students, whether they need career advice or assistance managing a problem that is interfering with their performance at school. Because of its proven effectiveness within NISD, the Texas Education Agency ultimately adopted the Comprehensive Guidance Program, and the model now serves as the basis for national counseling guidelines.

“Pat Henderson is a visionary and an innovator,” says Gysbers, a past president of ACA and curators’ professor and interim chair of the Department of Educational, School and Counseling Psychology at the University of Missouri-Columbia. “Early on, she saw the importance of changing the established way of organizing and implementing guidance and counseling in the schools. She introduced the concept of a comprehensive program in the Northside Independent School District in the early 1980s. Working closely with administrators, faculty and parents, she successfully directed the full implementation of the program concept in all of the schools of the district to the direct benefit of all students and their parents. It is a privilege and an honor for me to work with Pat because, as a result, I continue to see firsthand her remarkable and substantial contributions to school guidance and counseling across the country.”

Henderson says she was “overwhelmed and humbled by receiving the highest honor that the school district bestows. I feel like I’m having my jersey retired.” Even so, Henderson doesn’t consider having a school named after her to be a strictly personal honor. “It also honors the work of professional school counselors and their supportive administrators,” she says.
At a ceremony dedicating the new elementary school, a video tribute to Henderson was shown. In the video, Henderson revealed that she first contemplated becoming a guidance counselor as a teenager, when her parents were divorcing and she didn’t feel as though she had anyone to talk to about what she was going through. She believed guidance counselors could and should be filling a more substantial role in the lives and futures of students.

Henderson has been a member of ACA and ASCA since 1966 and has also been active in the National Career Development Association and the Association for Counselor Education and Supervision. Henderson and Gysbers are currently working on a fifth edition of their popular book Developing & Managing Your School Guidance and Counseling Program, which is published by ACA. Henderson is also the author of The New Handbook of Administrative Supervision in Counseling, an ACES-sponsored book, as well as numerous other books and articles.

In addition to presenting workshops and seminars nationwide, Henderson continues to play a pivotal role in the school counseling field as a consultant to school districts across the United States. Henderson has been the recipient of numerous honors, including lifetime achievement awards from ASCA, ACES and the Texas Counseling Association.

“Patricia Henderson’s lifelong commitment to improving guidance and counseling services for children is astounding,” said ACA Treasurer Elias Zambrano, a longtime friend and colleague who succeeded Henderson as NISD’s director of guidance and counseling. “Through her tireless work, children in our local school district, in Texas and across the United States have felt the impact [of the guidance program model she developed] personally.” In addition to the Comprehensive Guidance Program model’s influence nationally, Zambrano noted that the model is now receiving global interest.

Henderson Elementary School, a bilingual school, serves approximately 550 students in grades pre-K through 5. It is one of 68 elementary schools in NISD, which is the fourth-largest school district in Texas, serving more than 94,000 students.
YOUR PROFESSIONAL DEVELOPMENT FOR 2011 STARTS HERE.

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Wednesday, March 23 – Thursday, March 24

Education Sessions
Friday, March 25 – Sunday, March 27

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Thursday, March 24 – Saturday, March 26

Register Now!

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Phone: 800-347-6647 X222
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1-Day Registration ($250)/2-Day Registration ($380)

Register by February 15, 2011. Receive your registration materials in advance!
12 REASONS WHY YOU SHOULD GET JAZZED AND REGISTER NOW

1) 500+ peer-reviewed Education Sessions: More than 140 Advanced level!
2) Peer-reviewed Pre-conference Learning Institutes: 29 Advanced level; 10 Introductory—only 45% accepted
3) CE Credit: Earn 20 at no additional fee (except $15 processing fee); earn up to 18 more with Pre-conference LIs!
4) Red Cross Disaster Mental Health Training: Earn 6.5 more CEs
5) Free private consultations on your career, Private Practice
6) Special events: Opening Night Celebration, International Forum, receptions
7) ACA Division and Branch events: Meals, socials, meetings, special programs
8) Poster Sessions: More than 100 displaying new research, important projects
9) Exposition: View the very latest technologies, books, information, services
10) ACA Bookstore: Meet the authors, discuss your book ideas, browse new titles
11) Special tours of New Orleans
12) First Timers Orientation and Mentoring Luncheon

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- International Student Panel
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Daytime sessions: 6 CE hours
Evening sessions: 3 CE hours

NOTE: A separate registration fee applies for Learning Institutes.

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For complete session descriptions and presenter information, visit counseling.org/Conference and click on Pre-conference Learning Institutes

**Wednesday, March 23, 2011**

**Advanced Level**

- The Many Facets of Grief
- What Doesn’t Kill You Makes You Stronger...or Does it? Tools for Fostering Real Resilience in Children, Adults and Ourselves
- Balancing Disaster Mental Health: Resilient Individuals, Resilient Communities, Resilient Counselors
- The Essence of Intimacy: Experiencing the Fundamentals of Sex Counseling Through Sexual Attitude Restructuring (SAR)
- Advanced Play Therapy: Improve Skills in Theme Analysis, Work With Parents, Aligning Philosophy and Advocating for Practice
- Starting, Maintaining and Expanding a Successful Private Practice: Surviving or Thriving?
- Domestic Violence in Military Families
- DSM-V: A Conduit for the Diagnostic Schema Across the Spectrum of Counseling Practices
- Disaster Mental Health Interventions for Children: Evidence-Based Practices To Promote Recovery and Resiliency
- Individual Psychology: Relevant Theoretical Principles and Advanced Techniques for Today’s Counselor
- Linking Play and Talk Therapy: Counseling Pre-Adolescents and Adolescents Through Expressive Arts in Activity Therapy
- Psychological First Aid: Responding to Terrorism, Trauma, and Tragedies
- Childhood Obesity: Counseling Interventions for Children and Families

**Introductory Level**

- Implementing Solution-Focused Brief Counseling With Youth
- Military Systems and Mental Health: Understanding the Culture, Understanding Dynamics
- The Next Ten Minutes: Seriously Playful Techniques for Bringing Mindfulness Into Your Counseling Practice
- After the Storm Is Over: Grief, Loss, and Substance Abuse Issues in Disaster Mental Health Work
- Social Media for the Professional Counselor
- Addressing Challenging Behaviors in Individuals With Autism Spectrum Disorders in Community and School Based Settings
Thursday, March 24, 2011

Advanced Level

- Play Therapy: A Universal Language for Understanding and Helping Traumatized Children From Diverse Cultures
- Using Theories and Creative Techniques in Group Counseling
- Post-disaster Mental Health: Primary/Mental Health Integration
- Therapeutic Interventions for Co-parenting Conflicts: Practical Strategies for Working With Shared Custody Families
- Infusing College and Career Readiness Counseling Into Counselor Education: Rethinking School Counselor Preparation
- How Many Hats Do You Wear? Counselors Working in Family Court as Custody Evaluators, Family Mediators, and Parent Coordinators
- Psychopharmacology for the Psychotherapist
- Counseling Challenging Teenagers
- Advanced Reality Therapy: Practical Skills for Dealing With Clients in Crisis, Feeling Separated or “Put Upon” by Society
- Emotional and Cognitive “Bridge-Building”: Creating Therapeutic Connections With Military Members and Veterans
- Evidence Based Methods for PTSD and Depression
- An Integrative-Constructivist Approach to Clinical Supervision
- Child-Centered Play Therapy and Disaster Mental Health: Providing Support to Young Children in Crisis
- Integrating Sandplay Into Counseling: Techniques for Therapeutic Disclosure, Trauma, and Healing
- DSM-IV-TR Diagnostic Training: Sharpening Your Skills as a Clinical Mental Health Counselor

Introductory Level

- Counseling Theory in Practice
- Combating Harmful Media Influences on Girls’ Mental Health: Counselor Advocacy, Prevention, and Treatment Approaches
- Advancing Your Suicide Prevention, Assessment, and Intervention Skills: Practical Information for Counselors
- Motivational Interviewing and Cognitive Behavioral Approaches to Alcohol and Other Drug Use in Adolescents

More than 100 exhibitors will showcase the latest products and services for counseling professionals

Hours:
Thursday, March 24
Exposition Grand Opening & Welcome Reception
4:30 pm – 7:00 pm

Friday, March 25
10:30 am – 6:00 pm

Saturday, March 26
10:00 am – 4:00 pm

And there’s much more happening in the Expo:

Food * Computer stations * Poster sessions * Private consultations on licensure, private practice, job searching * Graduate Student and New Professional Center
ALREADY REGISTERED FOR THE CONFERENCE?
Make your hotel reservations by February 28!

Reserve by February 28, 2011

IMPORTANT: All ACA Conference hotel reservations must be made using the ACA Housing Bureau. All of the ACA conference hotels are within walking distance of the Ernest N. Morial Convention Center or a short ride on the complimentary ACA shuttle bus. The deadline for receiving the discounted housing rate is February 28, 2011.

To make a reservation

Online: counseling.org/conference Click on Travel and Lodging
Mail to: ACA 2011 HOUSING BUREAU, 568 Atrium Dr., Vernon Hills, IL 60061-1731
Call: 800-974-9833 (domestic) or 847-996-5876 (international) Fax: 800-521-6017 (domestic) or 847-996-5401 (international)

ACA Headquarters Hotel
Hilton New Orleans
Two Poydras Street
Single/Double: $225.00/$245.00

Courtyard by Marriott New Orleans/Convention Center
300 Julia Street
Single & Double: $175.00
This hotel offers complimentary buffet breakfast and wireless high speed internet.
Located 3 blocks from Convention Center

Hampton Inn and Suites New Orleans/Convention Center Hotel
1201 Convention Center Boulevard
Single/Double: $159.00/$169.00
This hotel offers complimentary buffet breakfast and wireless high speed internet.
Located across the street from Convention Center

Hotel New Orleans Convention Center
881 Convention Center Boulevard
Single & Double: $168.00
Located across the street from Convention Center

Residence Inn by Marriott Downtown at the Convention Center
345 St. Joseph Street
Single & Double: $175.00
This hotel offers complimentary buffet breakfast and wireless high speed internet.
Located 5 blocks from Convention Center

SpringHill Suites by Marriott New Orleans/Convention Center
301 St. Joseph Street
Single & Double: $175.00
This hotel offers complimentary buffet breakfast and wireless high speed internet.
Located 4 blocks from Convention Center

Wyndham Riverfront New Orleans
701 Convention Center Boulevard
Single/Double: $178.00/$188.00
Located 3 blocks from Convention Center
NEW ORLEANS CITY TOUR
Thursday, March 24 • 2:00 pm – 5:00 pm
Saturday, March 26 • 1:30 pm – 4:30 pm
The guided tour includes Jackson Square on the edge of the French Quarter, Esplanade Avenue where you’ll see Creole mansions amongst 100-year-old oak trees. We then travel outside the city center to view and understand the areas that were devastated by Hurricane Katrina.
Price: $25.00 per person (includes transportation)

GARDEN DISTRICT GEMS
Thursday, March 24 • 2:00 pm – 5:00 pm
Friday, March 25 • 1:00 pm – 4:00 pm
Visit the “American” section of town that was built to rival the architectural splendor of the Creoles’ French Quarter. Enjoy a walk through New Orleans’ elegant Garden District, known for its marvelous examples of Greek Revival and Italianate architecture. Homes of former Kings and Queens of Mardi Gras
Price: $35.00 per person (Guided Garden District Walking Tour)

BEHIND THE SCENES OF MARDI GRAS
Friday, March 25 • 1:00 pm – 5:00 pm
Saturday, March 26 • 1:00 pm – 5:00 pm
Travel to Mardi Gras World to take a look at the behind-the-scenes magic of Mardi Gras, which will have just ended on March 9. Blaine Kern’s Mardi Gras World is New Orleans’ showcase of carnival, with thousands of sensational sculptured props and breath-taking giant figures on display year-round.
Price: $65.00 per person (includes private guided tour & deluxe transportation)

STEAMBOAT NATCHEZ DINNER CRUISE
Friday, March 25, 6-9:30 p.m. and Sunday, March 27, 6-9:30 p.m.
Enjoy a harbor cruise along the Mississippi River aboard the Steamboat Natchez while being entertained by a traditional New Orleans Dixieland band.
Price: $98 per person (includes full-course dinner, live entertainment and transportation)

BIG EASY VENTURE – FRENCH QUARTER & RIVERBOAT
Sunday, March 25, 10 a.m.-3 p.m.
Beginning at the St. Louis Cathedral, guests will learn the real history of the people and places that make up the mysterious French Quarter, settled in the early 1700s. Guests will then take a two-hour harbor cruise along the Mississippi River aboard the Steamboat Natchez while enjoying a traditional Creole lunch buffet.
Price: $88 per person (includes lunch and transportation)

NATIONAL WWII MUSEUM
Saturday, March 26 • 1:00 – 5:00 pm
Sunday, March 27 • 1:00 – 5:00 pm
Dr. Stephen Ambrose, University of New Orleans Boyd Professor of History, founded The National D-Day Museum Foundation in New Orleans in 1991. The Museum, which opened on June 6, 2000, is the only museum in the United States that addresses all of the amphibious invasions or “D-days” of World War II, paying tribute to the more than one million Americans who took part.
Price: $40.00 per person (self-guided tour includes admission, 45-minute presentation, and transportation)

To reserve your tour visit counseling.org/conference, click on Tours
Dear Colleagues:

As members of the American Counseling Association and its divisions, we select the leaders who guide our professional organizations. This is a critical time for the counseling profession. ACA, its divisions and regions need leaders who possess the skills, knowledge and dedication to guide our association in fulfilling its charge to represent counselors and the counseling profession. Your vote is critically important in selecting these leaders who collectively will establish the priorities and shape the policies that will move our profession forward both now and in the future.

I encourage you to maintain your membership and active participation. Please encourage your colleagues and students to do the same. Only through our collective efforts as professional counselors can we hope to positively shape the future of our association and the profession.

Please consider the following candidates who have volunteered their time and energy to run for office in service to the profession. I encourage you to support the candidates who best reflect your professional values and priorities. Your vote is important; please make it count!

Sincerely,

Marcheta P. Evans, Ph.D.,
LPC-S, NCC, DCC
President
American Counseling Association

**Online voting**

The American Counseling Association has moved its elections online! There are several reasons for this enhancement. Among them:

- Less environmental impact (going green)
- Cost effectiveness
- Convenience
- Anonymity guaranteed by a third-party vendor that is completely autonomous from ACA
- Superior reliability

The election will open Dec. 2 at 12 a.m. Eastern time. Only those members in good standing as of Nov. 1, 2010, will be eligible to vote.

You will receive a special e-mail from ACA Elections (acaelections@counseling.org) on the morning of Dec. 2 with the link to vote as well as your username and password. The password will be a special one-time election personal identification number (PIN).

**Voting instructions**

Log in to the new election system using the username and password that you receive in the e-mail. If you do not have an e-mail address on file with ACA, you will receive a postcard with the instructions.

Only the elections that you are eligible to vote in will appear. After you have marked your choices and submitted your ballot, you will receive an official e-receipt confirming that you have voted.

**Questions? Comments?**

If you have any questions or comments, please feel free to contact ACA Member Services at 800.347.6647 (Monday to Friday, 8 a.m. to 7 p.m. Eastern). Paper ballots may also be requested by calling Member Services.

Remember, the elections do not open until Dec. 2, so the link will not be available until that time. The link will close at midnight Eastern time on Jan. 31, 2011.

Your voice is an important and integral part of ACA, and every vote counts!
**Notes:** Other than for spelling, the information that follows has not been edited. It appears as submitted by the candidates.

**AMERICAN COUNSELING ASSOCIATION**

**President-Elect**

**Michael D’Andrea**

**Education**

Ed.D., George Peabody College at Vanderbilt University, Nashville, Tennessee
Graduated: May 1982

M.A., Fairfield University, Connecticut
Graduated: May 1975

**Current position**

Executive Director of the National Institute for Multicultural Competence

**Professional experience**

2009-present — Faculty member and distance learning instructor at Seton Hall University (New Jersey), University of Massachusetts, Boston, and St. Mary’s University (Texas)
1989-2009 — Professor in the Department of Counselor Education at the University of Hawaii at Manoa.
1982-1989 — Vanderbilt University, Department of Human Development and Human Resources, Nashville, Tennessee
1976-1977 — Director Ocean View Adolescence Group Home, Fort Bragg, California
1970-1973 — Respiratory Therapist/Emergency Medical Technician Park City Hospital, Bridgeport, Connecticut

**Association experience**

2009-2010 President of the Counselors for Social Justice (CSJ)
2007-2009 President of the Hawaii Counselors Association (HCA)
2006-2008 Western Regional Representative for the Hawaii Counselors Association
2009-2011 Coeditor for a special issue of the Journal of Humanistic Counseling, Education, and Development on Social Justice Counseling and Advocacy issues
2006-2008 Coeditor of a special issue of the Journal of Counseling and Development on Multiculturalism

**ACA/Division/Branch memberships**

ACES, ALGBITC, AMCD, C-AHEAD, ASGW, CSJ, Hawaii Counselors Association

**Awards and honors**

April 2007 - The Counseling Vision and Innovation Award presented by the Association for Counselor Education and Supervision (ACES).
August 2006 - The Presidential Award presented by the American Psychological Association to Michael D’Andrea and the National Institute for Multicultural Competence (NIMC) for the leadership and commitment to social justice and coalition building.
April 2004 - The National O’hana Award presented by the Counselors for Social Justice (CSJ).
March 2003 - Arthur A. Hitchcock Distinguished Professional Service Award presented by the American Counseling Association (ACA).
March 2000 - Outstanding Leadership Award presented by the International Association of Marriage and Family Counseling (IAMFC).
March 1996 - Association for Multicultural Counseling and Development (AMCD) Research Award.
April 1992 - Association for Multicultural Counseling and Development: Special President’s Citation for Research.

**Publications**

Over 200 publications including 6 books, 30+ book chapters, 60+ refereed journal articles and other scholarly publications primarily in ACA outlets.

**Presentations**

Over 250 professional presentations at state, regional, national and international counseling conferences and conventions.

**Community service**

2009-2010 National Coordinator of the Multicultural/Social Justice Leadership Development Academy and Giving Back to the Community Project held at the annual meeting of the American Counseling Association in Pittsburgh, PA.
2005-2009 National Coordinator of the Giving Back to the Community Projects held at the annual meetings of the American Counseling Association in Charlotte, NC (2009), Honolulu, HI (2008), Detroit, MI (2007), and Atlanta, GA (2005).
1997-2001 Coordinator of the Hawaii School Violence Prevention Project

**Qualifications and reasons for seeking office**

My qualifications to serve as ACA President have been nurtured in many ways. This includes the professional training I received in securing my master’s (Fairfield University; Connecticut) and doctoral (George Peabody College for Teachers at Vanderbilt University; Nashville, TN) degrees. Also, working in different work settings for 30+ years as a counselor educator, practitioner, advocate, and researcher, has greatly enhanced my understanding of the strengths, interests, and needs of professional counselors. After first joining ACA in 1980, I became a lifetime member of the Association in 1994. In my 30+ years as a member of ACA, I have served in many capacities to fulfill the mission of this association. This includes serving on several ACA Research Committees, being a cochair of the Public Policy Committee with the International Association of Marriage and Family Counseling (IAMFC), being a coeditor for a special issue of the Journal of Counseling and Development on multicultural issues (2007-2008), coeditor for a special issue of the Journal of Humanistic Counseling, Education and Development on social justice issues (2009-2011) and coordinating several “Giving Back to the Community...” projects.
Projects” at ACA annual conferences. I served as President at the ACA Branch level (Hawaii ACES President from 1990-1992; Hawaii Counselors Association President from 2007-2009), Regional Representative (Western Regional Representative 2006-2008), and as President of a national ACA association (CSJ President from 2009-2010). All of these opportunities have helped me learn about ACA’s organizational policies and procedures in ways that effectively prepared me to serve as President of our association. If elected to this position, I would work particularly hard to support the interests of students, increase the public’s awareness of ACA, and implement new initiatives aimed at strengthening ACA’s organizational infrastructure and increase a diverse membership base.

Candidate questions

As president of ACA, what would be your top priorities? Why would these be your priorities, and how would you implement them?

As ACA president, I would build on ACA’s strengths by establishing new initiatives to address three priorities. This includes working with others to:

A) Build a more expansive and diverse membership base in ACA.
B) Develop new organizational mechanisms that foster graduate students’ empowerment in ACA.
C) Institutionalize ongoing national and international initiatives to build greater unity with counselors in other nations and allied organizations in the United States.

Recognizing that our collective strength is grounded in a large and diverse membership base, I would establish a vibrant ACA Membership Campaign to increase ACA’s membership from 43,000 members to 60,000 members by the end of my presidential tenure.

Understanding that our graduate students represent the future of the profession, I would work to institutionalize a new student association in ACA that guarantees full voting rights on the Governing Council.

The future well-being of the counseling profession requires greater collaboration with counselors in other nations and allied professional groups in the United States. Thus, I would convene a series of in-person and electronic conferences as well as host a caucus meeting at the 2012 ACA Conference to develop and implement strategies to build unity with these persons and organizations.

The United States is becoming increasingly diverse, and counseling is becoming more global. It is critical to increase the diversity among counselors. How would you address this issue, and what steps would you take?

The following initiatives represent some of the specific ways that I would address the challenge of diversifying the counseling profession. First, I would work with other ACA leaders, members and students to develop a long-term “ACA Diversity Initiative” during my president-elect year and begin implementing this initiative during my presidential year.

Second, I would convene a series of meetings early in my presidential year with leaders in all ACA divisions to seek their support in making the diversification of their associations a major goal. During these meetings, I would work collaboratively with all ACA association leaders to develop a realistic and consensually agreeable strategic plan to address and measure the effectiveness of our collective efforts to diversify our associations.

Third, I would establish an international task force to develop and institutionalize a multiyear action plan to increase the cultural diversification of the counseling profession and ACA from a global perspective.

Fourth, I will outreach with national organizations whose mission is to advocate for the healthy development of persons in diverse groups who operate from multiple dimensions of identity. Having ACA build partnerships with such organizations would be a practical and cost-effective way to help to further diversify ACA.

As ACA president, how would you increase the visibility and public awareness of the counseling profession and ACA?

To increase the visibility and public awareness of the counseling profession and ACA, I would first convene a special task force that was responsible for developing a national project aimed at “Promoting Healthy Human Development and Wellness” in different locations across the country. This national project would involve working with other ACA associations to implement time-limited wellness interventions in schools, universities and communities. These service projects would increase public awareness of the counseling profession and ACA with minimal expense to ACA.
Second, I would work with other ACA members to develop an alternative “diagnostic” manual to the DSM. This alternative manual would include diagnostic procedures to assess individual, organizational and community health and wellness. It would also outline recommendations for increasing healthy human, organizational and community development through counseling, development and related health-based interventions.

Third, I would implement a major social justice advocacy project that addresses the epidemic of violence in our nation. This project would be designed to increase the public’s awareness of the ways that counselors are currently addressing this problem in communities across the country and seek support from citizens and organizations to help stop the violence in our nation.

Bradley T. Erford

**Education**
Ph.D. in counselor education (University of Virginia); M.A. (Bucknell University), B.S. (Grove City College)

**Certification and licensure**
NCC, LCPC, LPC, LSP, LP

**Current position**
Professor, Loyola University Maryland

**Professional experience**
Professor, School Counseling Program, Loyola University Maryland, Education Specialties Department (1993-present)

**ACA/Division/Branch memberships**
Memberships in AACE, ACES (life), NARACES, SACES, ACA – Southern Region, Maryland ACD, Chi Sigma Iota (life).

**Awards and honors**
ACA Fellow; ACA Arthur Hitchcock Distinguished Professional Service Award; ACA Extended Research Award; ACA Research Award; ACA Professional Development Award; ACA Carl D. Perkins Government Relations Award; ACES Stripling Excellence in Standards Award.

**Publications**
16 counseling books (including Transforming the School Counseling Profession, Professional School Counseling Handbook, Assessment for Counselors, Group Work in the Schools, Research and Evaluation in Counseling), numerous refereed articles.

**Presentations**
More than 100 presentations in the past 10 years.

**Qualifications and reasons for seeking office**
I have been an ACA Governing Council Representative for the past five years. I have held office at every level of association experience, including national division (AACE President, AACE Treasurer); ACA region (Chair, ACA - Southern Region); state branch (Past President of Maryland ACD); and state branch division (Past President of MAME, MACES, and MAMHC). I have chaired numerous ACA committees and task forces, including the ACA Bylaws and Policies Committee, ACA Task Force on High Stakes Testing, ACA Interprofessional Committee, ACA Task Force on Test User Qualifications, and ACA’s Public Awareness and Support Committee. I also advised my university’s Chi Sigma Iota chapter for more than 10 years. As President of ACA I will work tirelessly to unify our professional identity, increase membership services, advocate for social justice, and strengthen the professional image, visibility, and employment of counselors. Currently, ACA is confronted with a number of significant challenges: organizational, financial, and legislative; but my experience as a grassroots member and in leadership at the national, regional and state levels has taught me that these challenges can be overcome through teamwork and collaborative leadership. Serving in these capacities has given me a firsthand look and intuitive feel for our students’ and professional members’ needs and aspirations at all levels. As President, I will draw upon these experiences and insights, and harness the passion and energy of our members and leaders. I will focus our association activities on the principled and strategic goals that will move the entire profession to a higher level of practice, advocacy and professionalism. I will work collaboratively with members, leaders, and staff to achieve our critically important mission to help others grow and develop. I have the vision, passion, skills, and knowledge to accomplish our professional and Association goals.

**Candidate questions**
As president of ACA, what would be your three top priorities? Why would these be your priorities, and how would you implement them?

Priority 1. Protect and Expand Practice Rights. I am no stranger to legislative battles against opponents who seek to restrict our rights to practice counseling and serve the public. ACA must fight hard at the federal and state levels to protect and guarantee all counselors’ rights to practice. We also need to introduce legislation that will expand employment opportunities for counselors, increase reimbursement/salaries and help us to better advocate for and serve our clients.

Priority 2. Outstanding Member Services. More low-cost CEUs (via Internet, conference and workshops), expand employment/career services, professional liability insurance, networking opportunities for students and professionals, mentoring and more.

Priority 3. Fiscal Responsibility Through Innovation. ACA can increase revenue through publications, continuing education, web expansions and conferences, while simultaneously using strategic, efficient and quality technological innovations to realize further cost savings. For example, expanding our web capabilities will allow members electronic access to journals and Counseling Today.

I am a member of ACA’s Strategic Plan Implementation Task Force, charged with constructing and implementing a strategic plan to guide ACA’s future course and resource allocation, and

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**Education**
Ph.D. in counselor education (University of Virginia); M.A. (Bucknell University), B.S. (Grove City College)

**Certification and licensure**
NCC, LCPC, LPC, LSP, LP

**Current position**
Professor, Loyola University Maryland

**Professional experience**
Professor, School Counseling Program, Loyola University Maryland, Education Specialties Department (1993-present)

**ACA/Division/Branch memberships**
Memberships in AACE, ACES (life), NARACES, SACES, ACA – Southern Region, Maryland ACD, Chi Sigma Iota (life).
understand how to make ACA even stronger.

The United States is becoming increasingly diverse, and counseling is becoming more global. It is critical to increase the diversity among counselors. How would you address this issue, and what steps would you take?

A rich diversity of thought and opinion strengthens our understanding of the human condition and yields insights into how we can best advocate for the diverse clientele we serve. The counseling profession is steeped in the traditions of developmental and intervention approaches, multicultural counseling, and advocacy counseling. Each of these traditions has enriched the training of counselors and ethical counseling practices. We are making progress in attracting more diverse counseling practitioners, but can do much more. As ACA President, I would:

1) Use the ACA website, Counseling Today and discussions at conferences as communication forums for strategies and innovations in recruitment of diverse prospective students.

2) Develop communication platforms and materials for dissemination to prospective diverse students to help them think critically about emerging social issues and how they can truly make a difference as a counselor.

3) Create and facilitate mentoring programs to keep diverse counseling students and faculty in the field.

4) Advocate for the recruitment of diverse faculty to serve as models of professional accomplishment in counseling and provide an academic environment that is both stimulating and inviting to students with diverse backgrounds.

5) Advocate for higher reimbursement/salaries for counselors.

The membership of ACA continues to increase. However, the greatest increase is among students, many of whom do not continue their membership once they graduate. How would you address the issue of retaining student members so they continue as professional members for the duration of their careers?

As a Governing Council representative, I helped secure free professional liability insurance for student members. Now that we have it, student numbers are increasing dramatically. It is up to us to make sure their counselor identity is solidified and valuable services available so they stay members once they become practitioners!

As students transition to become practitioners, they want time- and cost-effective professional development opportunities and employment/legislative advocacy. We need more practitioner-friendly presentations at conferences. I have also helped ACA create a flexible, menu-driven or tiered dues program that will allow new professional members to ease into the graduated dues payments while picking and choosing the services they want.

ACA needs to focus on what new members want: CEUs from conferences and workshops, employment opportunities, low-cost professional liability insurance, networking opportunities and mentoring. Members rightfully demand a return on their dues (investment). When they get it, members become committed to our professional mission.

Finally, we need to reach out to students and young professionals through technological innovations they are wired into, including blogs and social networks. In short, ACA needs to be the connection point for a new generation of counselors.

As ACA president, how would you increase the visibility and public awareness of the counseling profession and ACA?

Public awareness and professional identity are enhanced through greater visibility of the quality professional counseling services we provide to the public. I view public awareness as concentric circles proceeding outside from national to state to local issues — as politicians say, “All politics are local.” To be successful in advocating for our clients and on behalf of all citizens, professional counselors need to recognize that we all have to be involved at all levels simultaneously, using grassroots and strategic, targeted initiatives. A concerted effort on many levels will strengthen our professional identity far more effectively than focusing on any single level — but the effort must be expertly coordinated, and ACA is in the best position to do so.

As president, I would implement a concerted media campaign to accomplish this goal. ACA needs to develop a marketing campaign to increase name recognition and visibility. When state and national legislators hear “… Counseling Association,” they need to get the message that we all stand as one. ACA must reach out and partner with other helping organizations. Daily in schools and communities, throughout ordinary times and unfortunate tragedies, opportunities to communicate the important work of professional counselors are created.

Jeffrey Freiden

Education
Doctorate of Education - Counseling, The University of Memphis - 2005
Master of Science, Psychology, The University of Memphis - 1995 Bachelor of Arts, Psychology, The University of Memphis – 1992

Certification and licensure
Licensed Professional Counselor with Mental Health Service Provider designation.- Tennessee National Certified Counselor. School Counselor - Memphis City Schools National Certified School Counselor NBPTS - candidate Approved Provider by The Tennessee Sex Offender Treatment Board OSHA approved provider of Critical Incident Stress Management and Debriefing Red Cross First Responder

Current position
CEO & therapist - Counseling Resources of America - Mental Health Counseling for juveniles and adults. School Counselor - Cordova Middle School - Memphis City School District
Adjunct Professor, The University of Memphis, Memphis, Tennessee. Counseling Resources of America: Private practice counseling office providing group and individual counseling for juveniles and adults School Counselor - Cordova Middle School - Memphis City School District. Adjunct Professor, The University of Memphis

**Professional experience**
1991 to current - Private Family counseling practice: Provide group and individual counseling for juveniles and adults High School and Middle School Counselor - Memphis City Schools. 1996 to current Provider of Sex Offense counseling for persons adjudicated in Federal and State court and with clients currently incarcerated. 1997 Adjunct Professor - The University of Memphis. Owned nation wholesale jewelry company for 15 years before selling the company and returning to college at age 36 in 1990. June 1999 to Current Counseling Resources of America / Children's Counseling Resource Licensed Professional Counselor/MHSP in Private Practice July 1995 to June 1999 Southeast Community Mental Health Center - Mental Health Counselor - Liaison to psychiatric hospitals and county jail. September 2005 to Current The University of Memphis Adjunct Faculty Practicum and Internship Supervisor Crisis Intervention Strategies. August 1999 to Current Memphis City Schools Professional School Counselor - High School and Middle School

**Association experience**
Tennessee Counseling Association - President 2006 Southern Region - Treasurer/ Secretary 2006-2007 Southern Region - Chair - 2009-2010 Tennessee Association of Counselor Educators and Supervisors - President – Current

**ACA/Division/Branch memberships**
Association for Counselor Education and Supervision Southern Association for Counselor Education and Supervision American Mental Health Counselors Association American School Counselors Association National Education Association Tennessee Counseling Association ALGBTIC - Tennessee - Charter Member Tennessee School Counseling Association Tennessee Mental Health Counselor Association Tennessee Education Association

**Awards and honors**
Chi Sigma Iota Kappa Delta Pi Humanitarian Award - Tennessee Counselor of the Year - Tennessee

**Community service**
St. Jude Research Hospital American Red Cross National Alliance for the Mentally Ill Tennessee Alliance for the Mentally Ill National Conference of Christians and Jews Board member Anshi- Sephard synagogue Israel Bonds

**Qualifications and reasons for seeking office**
I am qualified to run for ACA president because I have demonstrated my ability to build membership and financial growth as president of Tennessee Counseling Association and as Chair of Southern Region. I have no financial interest in being elected. I have no book to publish. My university will not give me tenure (I am adjunct). My middle school will not give me a raise. My counseling office will not pay me a special stipend (I pay all of my own expenses to ACA, conferences, and association dues). Actually, being ACA president will cost me in missed time at work. My wife will allow me time away for ACA business as long as I do not miss our grandkids’ birthdays. I am running for ACA president because I care about ACA and professional counseling. I believe that a leader that has demonstrated fiscal and marketing experience is needed to guide ACA at this critical time. Personal agendas must be replaced with actions that protect and serve professional counselors. I have three goals as ACA president: 1) Strengthen Branches and Divisions; We will create a business marketing plan to bolster public perception of counselors and recruit members. ACA will assign mentors for membership recruitment and sponsorships. There is no problem that membership and money cannot solve. 2) Utilize Technology; Archiving conference sessions on the website, Twitter, Facebook, and assistance in developing websites and Listservs. 3) Unify the Profession; Legislators, school districts, and universities minimize professional counseling by cutting salaries and counselor positions. The real enemy of professional counseling is outside of our organization. ACA needs to be brought back to 20/20. We need to embrace our belief that we are richer for all of our differences. This is what makes us strong. ACA is a home for all counselors.

**Candidate questions**
As president of ACA, what would be your three top priorities? Why would these be your priorities, and how would you implement them?

QWERTY613@AOL.com, my personal e-mail. You will see it whenever you see my name. I serve the membership. There is a great value in ACA dues with a talented staff and multiple benefits. However, as a member, sometimes I have felt lost trying to find the right person to resolve a membership question. The buck stops here.

- Improve Technology: ACA has a great website. We could add Twitter to update last-minute conference changes or tweet about a pending vote in Washington. We could archive past conference programs. A smartphone application to access conference information and member benefits. Video-link sessions for members who are unable to attend conference. A webpage, outside of “Career Builder,” where counselors can research jobs, internships and counseling programs.

- Unity and Inclusion: The counseling profession is weakened by insurance companies and TRICARE that will not recognize LPCs, with legislation that cuts school counseling positions, the budgets of universities and counseling departments. Unfortunately, we also self-divide ourselves. We have excluded ASCA from committees, and the 56 branches are marginalized because they only have four votes on the governing board. I want to include all counselors and their unique contributions. United we stand, divided we fall.

The United States is becoming increasingly diverse, and counseling is becoming more global. It is critical to increase the diversity among counselors. How would you address this issue, and what steps would you take?

QWERTY613@AOL.com. The counselors I have met understand diversity. It is more important, as counselors, to model accepting behaviors because we are “role models” for our students and clients.
There is a difference between being accepting of people who are different and standing up to be counted, creating an inviting and inclusive environment. For example, I am a charter member of Tennessee ALGBTIC. Creating this Division says that we are more than accepting; we are welcoming. As past Chair and Board member of Southern Region, we continue to work with ACA leadership to include ASCA in the 20/20 discussion and work to revitalize the Georgia branch. ACA is a home for ALL counselors. United we stand, divided we fall.

A proven method to create an inclusive environment has been developed. How does Coke sell so many sodas (or pop)? They market their product globally and embrace all without regard to skin color, gender, politics, wealth, physical ability or age. Coke has “sold” itself to the world, and the world has embraced Coke. I will copy that philosophy as I did at the Branch and Regional levels and market ACA as a home for all counselors.

Build it and they will come.

The membership of ACA continues to increase. However, the greatest increase is among students, many of whom do not continue their membership once they graduate. How would you address the issue of retaining student members so they continue as professional members for the duration of their careers?

Qwerty613@aol.com. I became an ACA student member because my professors knew that professional membership made a strong counseling profession. The ACA membership charts suggest that this pattern continues. Our issue is really to understand why some members leave ACA after several years. As a business owner, I knew that customers left if they did not see value in my product. As a mental health counselor, school counselor and counselor educator, I know how ACA membership impacts my professional experience. What do I see in ACA that they do not?

When a new counselor chooses to join ACA, then they see a benefit. If they later quit ACA, then we must ask, “What are we doing, or not doing, that leaves that counselor wanting?” Even if we believe that we deliver excellent benefits, we only succeed if our customers know this, too.

As ACA president, to retain our new members, I will do the same as I did to grow my business: Ensure maximum customer benefits and make sure that counselors see and hear that message. I will develop the same sales campaign used in businesses to convey the ACA message. ACA is a home for all counselors.

As ACA president, how would you increase the visibility and public awareness of the counseling profession and ACA?

Qwerty613@aol.com. Marketing a business or marketing the counseling profession; both are sending messages to be heard and understood by customers. Pepsi does not sell flavored water. They sell “refreshment,” “youth” and “fun.” ACA does not just collect dues. ACA provides benefits that one counselor, alone, cannot achieve.

My plan is to market ACA, its Divisions and Branches to counselors and the public. ACA affiliation means a better counselor and a better outcome by affiliated counselors. Counselors will want to be ACA members, and the public will identify ACA-affiliated counselors as better counselors.

Under the ACA umbrella, I will work with all Divisions to create alliances with schools and universities to demonstrate how ACA counselors are better equipped to help students and schools. We will aggressively market ACA counselors as providing a higher quality of counseling, a better clinical understanding of client issues and as advocates of tolerance and social justice.

I will create alliances between ACA and state branches. Strong state counseling associations are the backbone of ACA and Divisions. ACA has the resources to help branches grow their membership. In turn, branches are fertile ground for ACA and national Divisions to promote their positions and recruit new members.

E. Christine Moll

Education
PhD, Counselor Education and Leadership MS Counselor Education BA Religious Studies and Education

Certification and licensure
Licensed Mental Health Counselor – NY NBCC

Current position
Chairperson & Counselor Educator: Department of Counseling & Human Services

Professional experience
Director of Counseling Services - Canisius College Catholic Charities of WNY: Counselor for Geriatric In-home Services Classroom Educator in Florida, New Jersey, and New York

Association experience

ACA/Division/Branch memberships
ACA AADA ACES CSJ ASCA ASERVIC

Awards and honors
Dean’s Distinguished Faculty Award for Teaching - Canisius College - School of Education Invited Induction into Alpha Sigma Nu – the Jesuit Honor Society Association for Adult Development and Aging: Presidential Mentoring Award, Leadership & Mentoring Award, and Award for Professional Service Canisius College I. Joan Lorch Award for Women’s Studies. (Recognition for significant contributions to promote women’s causes on the campus and beyond.)
Publications

Presentations

Community service
Annual Speaker: Youth Conference Buffalo NY Assistant to Older Adults with winter chores Volunteer in my place of worship.

Qualifications and reasons for seeking office
Let me preface my answers to the questions below with some additional information. All of my responses, are made with deep appreciation for ACA staff and leadership throughout our history, who worked tirelessly to address the needs of professional counselors in support of what we do day-to-day, and promoted the profession of counseling. My “goals” follow the tenets of ACA’s Mission, as the “next steps” in: “Professional development” In the tradition of excellent regional/national conferences promoting current trends in research, “best practices,” and future “best practices,” let us continue to develop: • Additional online self-paced courses • Online conferences via web resources (ex. “Eliminate” or “Avatar”) • Provide support materials (CDs, video clips, PowerPoint notes) to enhance ACA publications (texts, journals, etc). Let us convey that we realize the difficulty for individuals to maintain costs associated with conference attendance in one’s budget, and recognize that employers are limited in supporting professional development financially and providing extended time away from the office. “Advance the profession” Resting on our laurels is not an option. Professional identity/esteem remain enigmas. Visibility is everything. Collaboration within the entities of ACA, and building coalitions with our collegial associations to create change for those we serve, will advance the profession and our professional association. Let us explore ways to publicly promote who we are and what we do. WE ARE COUNSELORS! “Expand the promotion of human dignity and diversity” Standing on the shoulders of those who promoted “dignity and worth,” and development the multicultural competencies, today, we are “men and women for others” – in our offices/classrooms, and by the lives we live beyond our workplaces. I suggest, we are ALL called to be “Counselors for Social Justice” – advocating for our constituencies, our profession, for those underserved in our communities, and globally.

Candidate questions
As president of ACA, what would be your three top priorities? Why would these be your priorities, and how would you implement them?

My priorities stem from the mission of ACA in the 2005 Code of Ethics. In short, they are as follows:
- “Professional development”
  ACA’s journals, texts and Counseling Today provide invaluable information for those who choose to access the information. Question #3 inquires about student membership. The real question is: How can ACA be attractive to day-to-day practitioners/clinicians, in addition to counselors-in-training and their counselor educators?
- “Advance the profession”
  Our ACA staff are competent individuals who work daily to advance the profession, lobby for interests on Capitol Hill and promote all of us. Few, except the leaders in ACA, know of the day-to-day efforts of the ACA staff. Perhaps the assistance of a public relations firm to expertly put our “name” and “brand” out to the public could help. I expand on this thought in my answer to the fourth question.
- “Expand the promotion of human dignity and diversity”
  ACA took the lead among social service organizations in the promotion of “dignity,” “diversity” and “multicultural awareness.” Leaders emerged from the ranks of AMCD, AGLBIC and CSJ. We are “men and women for others.” The following question/answer delineates a plan to welcome culturally diverse individuals to our profession.

The United States is becoming increasingly diverse, and counseling is becoming more global. It is critical to increase the diversity among counselors. How would you address this issue, and what steps would you take?

For well over 20 years, ACA (and its various Divisions) has promoted global awareness, diversity and multicultural competence. A number of individuals who challenged us to “be aware” emerged as ACA leaders. We have achieved much,
but new challenges await our attention.

Anecdotal information suggests that we have first- and second-generation immigrants or refugees from around the world enrolled in counselor education programs throughout Florida, New York, Texas, Arizona, California, and in various cities across the country as emerging counseling professionals. These budding counseling professionals are potentially perfect mentors to the youth in urban and underserved communities.

Let us partner with AmeriCorps and other “service learning” entities to have our counselors-in-training work with, mentor, and inspire undergraduate students in psychology programs and urban youth. Let us invite counselor educators and practitioners in a region to join with our counseling candidates. In so doing, we not only “walk the talk” — but give a living example of the “definition of professional counseling,” while inviting a new, diverse generation of professionals to assume our roles. Secondary by-products of our efforts could be public awareness of our profession and an increase of pride in the profession, thus increasing practitioner membership!

The membership of ACA continues to increase. However, the greatest increase is among students, many of whom do not continue their membership once they graduate. How would you address the issue of retaining student members so they continue as professional members for the duration of their careers?

Do we not assume our physician and dentist to be a member of AMA or ADA, participating in ongoing professional development? I wonder if our clients and families of our schoolchildren expect the same of us?

In conversations about “membership,” I learned that people:

- In counseling offices “purchase” one membership, so as to share the journals and materials
- Appreciate that ACA exists, but many see no reason to belong
- Our challenge is to make “membership” a responsibility, not an option.
- In concert with current efforts of the ACA staff, let us create a marketing strategy that includes:
  - Preparing ACA leaders to be “camera ready.” That is, train leaders for TV interviews, to focus on the camera, cogently expressing concise responses with a professional counseling twist.
  - Public advertisements highlighting the work of members, and invite our colleagues to join in the good work.
  - Publicly coalescing with sister associations to provide our members with benefits not afforded to professional non-ACA-member counselors.

Let us creatively construct a professional culture in which membership in ACA is “professional disposition” and another way we ethically serve our clients, as our medical doctors serve us.

As ACA president, how would you increase the visibility and public awareness of the counseling profession and ACA?

Our ACA staff does an excellent job with resources that can be limited. I propose that we empower their efforts by hiring a public relations firm to “put us on the map” of similar organizations representing professionals who build “relationship(s) that empower diverse individuals, families and groups to accomplish mental health, wellness, education and career goals” (2010, ACA 20/20 Initiative’s Definition of Counseling).

Contracting the services of a public relations firm would increase the public awareness of the counseling profession and ACA and potentially increase ACA membership. In collaborating with ACA leadership and staff, a PR firm will develop a marketing strategy that would achieve (at the very least) the following objectives:

- Select a niche, a “brand” in which ACA can be known as a leader
- Concentrate our resources on our strengths, using the best medium to stimulate public awareness, and strengthen public perception about professional counselors
- Increase the strength of search engine visibility
- Create a slogan, i.e. a concise phrase that summarizes our core message into a few memorable words

We are (more than) ENOUGH. Let us trust that message and give that message to our students and our clients. Let the world know.

ASSOCIATION FOR ASSESSMENT IN COUNSELING AND EDUCATION

President-Elect

Amanda C. Healey

Professional background and experience

Assistant Professor of Counseling, Sam Houston State University, Conroe, TX. Education: PhD, Counselor Education (Old Dominion University); M.A., Counseling, MFT (East Tennessee State University); B.S., Biology and Psychology (East Tennessee State University). Certification and Licensure: Licensed Professional Counselor - TN, National Certified Counselor. Recent Professional Experience: Assistant Professor of Counseling at Sam Houston State (2010-Present) currently teaching group and practicum, SACES Newsletter co-editor (’08-Present), statistical consultant, paid reviewer Brooks/Cole. ACA Branch, Division and Affiliate Membership and Other Related Memberships: ACA, AACE, CSI, CSJ, ACES, ASGW, AMCD, SACES, AWP, NASAP Association Experience: ACE NewsNotes editor (’09-Present), CSJ Membership committee (’08-’10), ACA Publications committee (’09-Present), CSI awards co-chair, CORE and CES journal editorial board member. Awards and Honors: (selected) ACA Glen E. Hubele award (2009); CSJ ‘Ohana award (2010); ACES Outstanding Dissertation Award (2010); AMCD Daya & Mrs. Usha K. Sandhu Research Award (2009). Publications and Presentations: Seven refereed articles published or in press, primarily in top-tier counseling journals; one book contribution published; six non-refereed articles and publications; six manuscripts and one invited book chapter in review; over 30 professional presentations and workshops, primarily presented nationally and internationally. Community Service: PFLAG group facilitator and volunteer, Planned Parenthood volunteer counselor.
**Qualifications and reasons for seeking office**

I am excited to have this opportunity to earn your support as candidate for AACE president. Over the last few years, I have been honored to serve in leadership and service roles in several ACA divisions. In service to AACE, I have worked closely with two past-presidents and the membership to produce the AACE newsletter, NewsNotes. I have always perceived AACE to be a welcoming organization with a family-like way of relating to one another. As president, I hope to maintain this atmosphere. Since joining, I have presented at each conference and worked with the president-elect, Dr. Danica Hays, to organize the 2009 conference in Norfolk. I have served as the editorial assistant and now serve on the editorial board for our new journal Counseling Outcome Research and Evaluation. Through my involvement with AACE, I have learned what this organization values and how this division serves as a critical advocate for the continued growth of the counseling profession and for parity with other mental health professionals. As president, I will continue to support efforts to promote our profession through legislative initiatives, particularly in the areas of testing, assessment, and diagnosis. The future of this division relies on support for research within the counseling field (particularly outcome-based initiatives) and stronger collaborations with other divisions to create a platform for professional advocacy efforts. As an advocate for the profession, I will attend to possible revisions of the multicultural assessment standards. I will also reach out to the membership to identify needed additional services, provide an array of professional opportunities for counselors serving in a variety of roles (practitioner/educator/student), increase our membership, and create a place where everyone can feel the sense of family I have felt during my time with AACE. Thank you for your thoughtful consideration of my candidacy for president-elect.

**Carl J. Sheperis**

**Professional background and experience**

Certification and Licensure: Nationally Certified Counselor, Licensed Professional Counselor (MS), Approved Clinical Supervisor Recent Professional Experience: Director of Doctoral Programs, School of Counseling and Social Service, Walden University since 2009; Professor at Mississippi State University from 1999-2009; Managing partner in Behavioral Services LLC since 1999; Association Experience: Conference Co-Chair, Chair Public Policy and Legislation, Member-At-Large Publications, Test Review Editor, Ad hoc reviewer for Measurement and Evaluation, Recipient of Donald Hood Award, Member since 1996 ACA Branch, Division and Affiliate Membership, and Other Related Memberships: IAMFC, ACES, and C-AHEAD; Member Board of Directors for the Fair Access Coalition on Testing Awards and Honors: 2010 ACA Counselor Education Advocacy Award, Herbert Handley Research Award, Mississippi State University, 2007; Outstanding Pre-tenure Counselor Educator, SACES, 2005; Outstanding Researcher, Mississippi Counseling Association, 2003; Donald Hood Research Award, AACE, 1999 Publications and Presentations: I have published or have in press over 100 articles, book chapters, books, and test reviews. I have presented my work at the international, national, state, regional, and local levels. I attend and present annually at the National Assessment Conference.

**Andrew M. Burck**

**Professional background and experience**

Dr. Burck is an assistant professor at Marshall University. He obtained his Ph.D. in Counselor Education and Supervision from the University of Toledo, and his M.Ed. in Community Counseling from Kent State University.

Dr. Burck is a Licensed Professional Counselor in the State of Colorado and a Professional Counselor in the State of Ohio. Dr. Burck and his colleagues have published articles on assessing faking on the Substance Abuse Subtle Screening Inventory-3(SASSI-3), assessing the relationship between the Universal-
Diverse Orientation and the California Psychological Inventory, and assessing the relationship between reported criminal behavior and scores on the Correctional Scale on the SASSI-3. Dr. Burck recently presented at the annual Association for Assessment in Counseling and Education Conference in Memphis, Tennessee. He presented on assessment of deception and the MMPI-2 RF. Dr. Burck will also be presenting at this year’s SACES and ACA conferences. He is the faculty adviser for the Mu Upsilon chapter of Chi Sigma Iota, and is a site team member for the Council for Accreditation of Counseling and Related Education Programs. Dr. Burck has been a member of the Specialty Standard and Statements Committee and the Use of Assessment Committee for AACE.

**Qualifications and reasons for seeking office**

My interest in this position started because of my desire to help this division the best I can so that it can grow and to assist in helping others with importance of assessment in the counseling field. As a member of this division for some time, I have been able to interact and assist the division through committees such as the Specialty Standard and Statements Committee and the Use of Assessment Committee. I have also been involved by my actions at the conferences; however, the role of the treasurer will provide a greater role in this division. I will have other roles of responsibly in other divisions of the counseling field, for example as the chapter adviser for multiple universities and as a site team member for CACREP. However, of all the groups that I am involved with, this is the group that I very passionate about supporting the growth and the development of the division and as the treasurer I will have the opportunity to assist in the continual growth of the division.

**Stephanie A. Crockett**

**Professional background and experience**

I, Stephanie Crockett, am a Nationally Certified Counselor (NCC) and doctoral candidate in the counselor education program at Old Dominion University. My research interests include the use of assessment and diagnostic techniques in mental health and career counseling. I am coauthor of Mastering the National Counselor Examination and Counselor Preparation Comprehensive Examination, and was invited to coauthor an article examining the publishing trends in Counselor Education and Supervision. The article was published in the journal’s fall 2010 anniversary issue. In 2009, I received the ACCA Emerging Leader Award for my leadership in college counseling and I am currently working on a grant-funded project involving career assessment procedures for international students. I have presented at numerous state, regional, and national conferences on topics related to assessment and outcome research. I also serve as the CSI Omega Delta chapter President and on ACCA’s professional development committee.

**Qualifications and reasons for seeking office**

I am honored to be nominated to serve as treasurer for AACE. I have been actively involved in AACE for several years, presenting at the association’s national conferences, writing articles on research practices for the association’s newsletter, NewsNotes, and assisting president-elect, Dr. Danica Hays, with the 2009 AACE conference. I also codeveloped a test critique template that is used for test reviews in NewNotes and on the AACE website, and will be copresenting an AACE-sponsored session at the 2011 ACA Conference in New Orleans. I wholeheartedly support AACE’s mission to promote and advance the practice of assessment and diagnosis in the field of counseling. I look forward to the opportunity to further my service to AACE in a leadership position and believe I am prepared to serve. I currently oversee the CSI Omega Delta chapter budget as the organization’s president. I worked with the executive board to develop an annual budget and closely work with the chapter’s treasurer to ensure that the organization’s spending stays within budget. Also, as president, I actively seek out and identify external sources of funding for our chapter. As AACE treasurer, I will work closely with the president and executive council to maintain AACE’s financial record, as well as seek out additional sources of income for the association. I believe counselor competence in assessment and diagnosis is vital to the advancement of our profession. Accordingly, as a member of the executive council, I will also work to support AACE’s mission by identifying and advocating for initiatives that support excellence in assessment and diagnosis in the field of counseling.

**K. Dayle Jones**

**Professional background and experience**

I am associate professor and coordinator of the Mental Health Counseling program at the University of Central Florida. I’d like to discuss some of my professional background and experiences that has prepared me for the position of treasurer of AACE. As a counselor educator for the last 14 years, I’ve had the opportunity to provide service to the profession by serving as treasurer, secretary, and president of the Counseling Association for Humanistic Counseling, Education and Development (C-AHEAD). I gained considerable experience working as treasurer, and, with a Bachelor’s degree in finance, I feel well prepared to perform this very important position for AACE. I currently serve on the Journal of Counseling and Development and Counseling and Value editorial boards, and have previous board experience with the Journal for Specialists in Group Work and the Journal for Humanistic Counseling, Education and Development. I’m also a member of the ACA DSM-5 Task Force and am currently writing a series of articles about the DSM-5 for Counseling Today. I’ve published many nationally refereed journal articles as well as coauthored two textbooks: Assessment Procedures for Counselors and Helping Professionals (7th Ed.) and Introduction to the Profession of Counseling.

**Qualifications and reasons for seeking office**

I am honored to have been nominated as treasurer of AACE. As a counselor educator, my research interests include assessment and diagnosis; thus, I fully support the AACE mission of promoting and recognizing scholarship, professionalism, leadership, and excellence in the development and use of assessment and diagnostic techniques in mental health and career counseling.
of assessment and diagnostic techniques in counseling. I am seeking AACE office to play an active role in promoting the organization and maintaining its tradition of excellence. As a counselor educator, I’ve had the opportunity to teach both the assessment and diagnosis classes for the last 14 years. From this experience, I recognize the importance of promoting the professionalism of counseling through the appropriate use of assessment. I believe that effectiveness and accuracy in assessment are essential to effective counseling. Assessment is inextricably intertwined with the counseling process — counselors are always assessing throughout the course of intervention. As such, I believe that it is vital to promote professional development to enhance competence in assessment, evaluation, measurement, and research for counselors, counselor educators, and other professionals. Regarding my qualifications for the position of treasurer, my previous experience as treasurer of C-AHEAD, as well as my Bachelor's degree in finance, helps me feel well prepared and qualified to perform the duties of treasurer for AACE. Overall, I am committed to providing service and support that promotes the professionalization of assessment in counseling. If elected, my priority will be to promote AACE and facilitate its mission and purpose.

ASSOCIATION FOR ADULT DEVELOPMENT AND AGING

President-Elect

Radha Janis Horton-Parker

Professional background and experience


Qualifications and reasons for seeking office

I am honored to be nominated as AADA's President-Elect. While teaching over 40 Lifespan Development classes in my 24 years in counselor education, I have witnessed, via my students’ stories and experiences, the triumph of the human spirit over unbelievable adversity. Their strength, resiliency and extraordinary courage inspired me to write my lifespan development textbook and motivated me to seek the leadership of AADA. We live in an unprecedented epoch that will witness the “graying” of a large portion of our population. I believe that AADA has a special responsibility to address this major demographic shift through research, publishing, and training. Consequently, if elected, I will work to convey the timely message that we can add years to our life and to our years by cultivating the habits associated with optimal adult development. In keeping with our slogan, “Adulthood Matters,” I plan to create new opportunities for learning through workshops, contests, and networking.

In addition, I will strive to expand the association's membership by encouraging young adults and individuals of all ages, ethnicities, and orientations to join. I will ensure diversity by promoting awareness of how incredibly accepting, welcoming, and relevant AADA is. Having been inspired by my students, and by an extraordinary parent (my father, who was an exemplar to me), I hope to inspire others to appreciate the opportunities for growth and change that arise across the adult lifespan. As we enter this “new age of aging,” I will do my utmost to usher in a new paradigm, in which the wisdom of later adulthood, the generativity of middle adulthood and the vibrancy of early adulthood are equally esteemed.

I will do my best to make AADA the premier organization for living long and well — and for achieving adult human flourishing at its fullest.

Treasurer

Patricia Goodspeed-Grant

Professional background and experience

Qualifications and reasons for seeking office
When I joined the AADA family a couple of years ago, I was immediately recruited to run for treasurer. I eagerly accepted the responsibility, and I continue to be dedicated to the responsibilities of this office. I believe that responsible stewardship of the organization's resources will help AADA maximize what we already have, as well as enable us to pursue new ventures that will be of service to both our members and the populations we serve. I have learned a great deal from the staff at ACA headquarters, and learned that there is no question that I can ask they have not been extremely helpful with. I am an associate professor at the College at Brockport, State University of New York. I have held several leadership positions in regional counseling organizations, including Strategic Planning Chair at the state level, and secretary of the regional level of the New York Mental Health Counselors Association. My goals, if I were to continue as treasurer, are to continue to be transparent when making any financial decisions and to report the financial affairs of AADA in a timely way that is easily understood. I would continue to focus on providing details about financial trends that will enable the executive board to make decisions with the long-range view of AADA’s financial picture in mind.

Amy Zavadil
Professional background and experience
I have my M.A. in Counseling and Advanced Certificate in Counseling at Montclair State University. I am currently a student affairs professional at New York University. As the current president of the Chi Sigma Mu chapter of Chi Sigma Iota, I am in my third year as an officer with our Chapter. I also serve on the Community Engagement committee of Chi Sigma Iota, International. As a Graduate Assistant I was the Editorial Assistant for the Adultspan Journal, publication of AADA, and am currently the AADA Newsletter Editor. In addition to ACA and AADA, I am a member of NASPA and the Association for Student Conduct Administration.

Carolyn A. Greer
Professional background and experience

Member-at-Large, Branch Divisions

Goals Statement Serving on the AADA Board for several years and especially as AADA President, I gained valuable insight into the needs of the members of this division. As AADA Member at Large, Branch Divisions, my goals are to: • work closely with all of the AADA state branch divisions, • assist states to identify, develop and expand state branch divisions of AADA, • promote a reciprocal relationship with the branch divisions so that both AADA and the branch divisions can increase membership and involvement of our members, • build on the AADA mission to help counselors across the branch divisions to understand the needs across the lifespan that impact each developmental stage and their impact upon the next and future stages, • interact closely with branch divisions and encourage more counselors to become interested and educated about a growing aging population, and to learn how important counseling can be to increasing the happiness, well-being, and productivity of this group, and, • foster the efforts of both AADA and branch divisions to involve graduate students for strengthening the future of the organizations. With my experience, professional knowledge and numerous leadership roles, I believe I can serve AADA to accomplish these goals.

Wendy Killam
Professional background and experience
My name is Wendy Killam and I am an associate professor at Stephen F. Austin State University in Texas where I direct the clinical mental health counseling
program. I have a Ph.D. in Counselor Education and have taught on the college level. Additionally, I have experience working in various counseling settings. I hold a LPC license in Texas and a LCPC license in Kansas. I am also a CRC and NCC and have a supervisor endorsement on my LPC license. I have been involved with ACA and its divisions and branches serving in various leadership positions at the both the state and national level. I have served as secretary for TACES and KACES. I have also served as secretary. The most relevant to this position are that I have served as both president and treasurer for AADA. I am also on the editorial board for Adultspan and I am the strategic planning committee co-chair. By serving on the AADA board in the past I have a strong understanding of the organization’s current needs and issues facing the organization. My background with the organization has allowed me to understand the current membership situation and membership’s needs.

Qualifications and reasons for seeking office

My goals include helping refine and implement AADA’s strategic plan especially areas related to membership. Membership is the heart of AADA. I will work with the board to find ways to continue meeting the membership needs. Thus, using available technology, I would like to explore ways members could connect on a regular basis. Membership needs to continue to be provided with resources to remain effective and stay on the cutting edge. AADA has an excellent journal and newsletter that helps members stay abreast of current issues. As technology evolves, there are new ways the organization can reach out to membership and collaborate with state divisions. In using technology, AADA can continue to collaborate and link with state divisions and help state divisions link with each other. I would like to implement ways AADA can continue to link with state divisions on various collaborative projects and conferences. Additionally, there has been a strong focus on mentorship of graduate students. This focus on the professional development and opportunities for personal and professional growth for graduate students and members needs to continue. Another goal is to encourage mentorship and formalize the mentorship by providing additional opportunities. This would be an area in which collaboration with state divisions promote both individual growth of its members as well as the growth of state divisions. In addition to continuing the current delivery of services, linking AADS to state divisions and developing new ways to provide services, there is room for growth. In the past there have been recruitment efforts and these methods need to be evaluated to determine what has worked. New methods of recruitment will need to be considered. Thus, a comprehensive recruitment plan to attract new members to AADA and its state divisions would need to be systematically implemented.

ASSOCIATION FOR CREATIVITY IN COUNSELING

President-Elect

Stella Beatriz Kerl-McClain

Professional background and experience

I am currently an Associate Professor and codirector of the Community Counseling program at Lewis and Clark College in Portland, Oregon. I have been in Portland for six years; prior to that, I was a faculty member in the Community Counseling Program at Texas State University – San Marcos for 10 years. I am a founding board member of the Association for Creativity in Counseling and have continued to serve on the board since its inception. I chaired the (amazing and fun!) 2010 ACC Creativity in Counseling Conference in Portland in September, and have served on the editorial board for the Journal of Creativity in Mental Health since it was first published. I have written many articles for the Association for Play Therapy newsletter and have written for the ACC newsletter as well. I have several publications in a number of journals related to diversity, gate-keeping, and sexuality. In previous years, I have been a member of several ACA divisions (AMCD, ASERVIC, ALGBTIC); however, my primary focus in terms of service has been ACC.

Qualifications and reasons for seeking office

Quite simply, I love our division. I love the people, I love the journal, I love the opportunity to create an inclusive community where all kinds of creativity in our counseling profession can be celebrated, supported, and encouraged. Prior to the inception of ACC, I was part of a group of faculty at Texas State University that offered the Creativity in Counseling Conference. It was out of this annual conference and through the persistence and dedication of ACC’s founding president that ACC emerged. As a founding board member of ACC, I have been honored to have been part of the history of ACC and as a current board member, I am excited to be part of its current growth and development. In September of this year, I volunteered to serve as the chair of the newly re-established conference: this time, a national conference for ACC. The 2010 ACC Creativity in Counseling conference was extraordinary! It validated all the reasons that I remain so committed to this division: we are creating spaces and relationships in which all of this amazing work, where creativity, diversity, and relationship can be celebrated. My goal as president would be to continue to provide these spaces, through future conferences, through the journal and the newsletter, through our Day of Learning at the ACA conference, and mainly through relationships with each other. I hope to find ways to better allow us to communicate with each other so that we can build our community into a strong, nurturing place of belonging.

Trustee

Julie Strentzsch

Professional background and experience

Dr. Julie Strentzsch has been involved with the social services field for 19 years. She began her career at the ground level, working with at-risk youth. Her passion for working with these individuals inspired her to continue her education. Dr. Strentzsch received her Master’s in 2002 and her Ph.D. in Counselor Education in 2008. She currently has...
her license as a Professional Counselor and Supervisor. Recently she began teaching at St. Mary’s University, where she oversees the Neurofeedback program. In addition, she has a small private practice and adjuncts at the University of Texas at San Antonio. She has served in many leadership positions over the years and attained a number of awards. Dr. Strentzsch joined Chi Sigma Iota in 2002 and served as the Secretary in 2007. Dr. Strentzsch has published articles in the ACA Encyclopedia of Counseling as well as The Journal for Counseling and Development. Dr. Strentzsch belongs to a number of associations but is most active in TACES. She received the Who’s Who in Graduate student’s award in 2002 and again in 2010 for Who’s Who for College and University Faculty. Dr. Strentzsch continues to volunteer with agencies with a focus on helping at-risk youth.

Qualifications and reasons for seeking office
I am seeking the office of Trustee for the Association of Creativity in Counseling to continue my mission to promote a creative counseling environment for all. When I speak to others about Creativity in Counseling I often hear the refrain “that’s great for you, but I could never be that creative.” I once thought this about myself, but as I grow as a counselor and an educator, I have come to believe that each of us can, and do, enhance others to grow through creativity. My passion lies with exploring and researching the creative possibilities that can be discovered in the field of Neurofeedback and relationships. I hope to create this opportunity by giving ACCA members a forum to engage in research and support of neurofeedback and biofeedback in the field. I am committed to working hard to promote creativity in all forms for wellness and hope for a day when Neurofeedback can be offered as services to anyone in underserved populations. After volunteering for ACCA in Pittsburgh and Portland, I am even more interested in working to see this organization continuing to grow and develop. I eagerly look forward to the opportunity to serve and promote the mission of ACCA.

AMERICAN COLLEGE COUNSELING ASSOCIATION

President-Elect

Monica Z. Osburn

Professional background and experience


Qualifications and reasons for seeking office
I started working with ACCA 12 years ago when I began my career in college counseling after leaving community mental health. Currently, I serve as the Director of Counseling at The University of North Carolina at Pembroke. I know what it is like to enter this organization as a graduate student, to be welcomed, mentored and put to work. It is equally as gratifying to be part of this organization as a professional who can give back while continuing to absorb all that the membership has to offer. ACCA has always been my professional family. I have truly benefited from the leadership, advocacy and professional resources that have come with being a part of this group. Those three areas are the cornerstone to a successful association and the main areas of focus for me should I be elected. Leadership must come in several forms: Mentoring for our graduate students and new professionals; A strong voice to ensure ACCA is at the table for all issues in college counseling; and an executive team that focuses on the organization, its members and their needs. Advocacy for the students that we serve, our college counselors and centers on a state and national level must be a priority. Our profession is impacted daily with ever changing laws, media attention and crisis events. Particular attention needs to be focused on proposed confidentiality changes, staff to student counseling center ratios and opportunities for our graduate students in counseling center training programs. ACCA does a phenomenal job of providing state of the art professional resources. From the national conference, to the website, to Visions and the Journal of College Counseling; We need to continue assisting our membership with professional development. I am committed to this organization and would be honored to serve in this capacity.

Treasurer

David J. Denino

Professional background and experience
Title Director Emeritus, Counseling Services Adjunct Professor of Counseling and School Psychology (1986-present) Southern Connecticut State University, New Haven, CT Education: Southern Connecticut State University B.S. 1975; M.S. 1976 Counseling, University of Connecticut - advanced graduate study.
Certification and Licensure: CT Licensed Professional Counselor and Nationally Certified Counselor. Certified with American Red Cross for Disaster/Mental Health Services. Recent Professional Experience: Thirty five years experience in counseling, student affairs, and college administration. Clinical proficiency in counseling college students; areas of expertise in suicide prevention/education, safe zones training for LBGT population, career psychology, and clinical internship programs. Related Memberships/Previous Offices Held: ACA ACCA (past EC Member/Secretary) CT Counseling Association (past Governing and Executive Council) CT Career Counselors Association (past president). Awards and Honors: 2007 J. Philip Smith Outstanding Teaching Award at SCSU; Red Cross award for service as first responder to Katrina; Past Outstanding Emerging Leader, CT Counseling Association; CT Counselor of the year award, 1991. Awarded emeritus status upon retirement in 2010. Publications and Presentations: Numerous presentations for CT Counseling Association; Past presenter at ACCA and NASPA conferences. Consultant/Presenter for CT State Departments of Education, Labor, and Rehabilitation Services.

Qualifications and reasons for seeking office

All of my experience has been with college students at the center of my work. Student development has always been the most critical and seminal responsibility we have as counselors and student affairs professionals. The appropriate delivery of these services is critical to personal growth and development of students, and in support of overall retention rates at colleges and universities. I continue to keep current in the field of counseling college students, and membership in leading professional associations is a critical part of that mission. Of more importance is for professionals in our field to assume leadership positions and carry forward a set of goals for our association. I have participated at the state, regional, and national level to add expertise in planning and carrying out these goals. My recent experience as secretary for ACCA with a seasoned executive council exposed me to the quality and quantity of work that needs to be done nationally, and I hope to continue that work by once again serving on the executive council of ACCA as treasurer. At Southern Connecticut State, I received appointments to a wide variety of campus teams and committees. Among them have been enrollment management, academic standings, case review, strategic planning, emergency response, and served as the only counselor/student affairs member on the Institutional Review Board. Having recently retired after a 35 year career at SCSU, I was granted emeritus status and remain active as a part time graduate faculty member in counseling and school psychology, teaching classes and providing supervision as a clinical site supervisor. My work as a college counselor, administrator, and faculty member has given me much expertise in being able to forward the work of college counselors on a local and national basis; I look forward to continuing that work.

Graduate Student Member-at-Large

Hannah Bayne

Professional background and experience

I received my master’s degree in community counseling from the College of William and Mary, and am currently pursuing my doctoral degree in Counselor Education and Supervision at Old Dominion University. I am also a Nationally Certified Counselor working toward licensure. My experience in college counseling includes working at two public four-year institutions, advising at a community college, and working in other Student Affairs settings, such as in Student Activities and Career Services. In the past two years I have been the recipient of two ACCA Emerging Leader Awards, which have given me the opportunity to become familiar with the many goals and activities of ACCA. I am a member of ACA and three other divisions, and I am very active in attending and presenting at conferences at the regional, national, and international levels. I am also involved with my university’s Chi Sigma Iota chapter, holding offices each year and currently serving as the community services chair.

Qualifications and reasons for seeking office

Through my work with college students in counseling, advising, and career exploration I have noted the incredible variety of demographics and clinical issues available to those who work in college counseling. College counselors, whether at two-year, four-year, or community colleges, juggle multiple roles in order to meet the many developmental and personal needs of students. I find this variety very exciting, and my passion for college counseling has resulted in my resolve to pursue a professional identity within the field. I have found ACCA to be an invaluable resource in its support of the professional development of all members. The listserv is full of practical advice and resources, and ACCA’s leadership is continually looking for ways to enhance the association. As a student, I am indebted to ACCA for its grant programs, which have allowed me to attend both ACA and ACCA conferences on a limited budget. I have had the opportunity to present my own research at ACCA’s national conference, as well assist the conference coordinators by organizing and leading theme dinners to provide attendees with networking and collaboration opportunities. As a graduate student, I know that it can be difficult to get involved, or to see professional identity as something worth pursuing before graduation. If elected as the Graduate Student Member-at-Large, my mission would be to encourage student members to engage fully within ACCA through attending conferences, presenting, writing articles for the newsletter, posting questions on the listserv, and networking with more seasoned professionals. I promise to also work as a liaison, bridging the gap between student members and the Executive Council to ensure that graduate students have a voice within the association. Through this position, I would have the added personal benefit of advocating for student members while interacting regularly with ACCA’s passionate and dynamic leadership.
Yesim Saatci

Professional background and experience


Qualifications and reasons for seeking office

It would be an honor when I will be elected as a “Graduate Student Member-at-large” of ACCA Executive Council. As a doctoral candidate, I am known as inclusive of others, fair, caring, and consistent when it comes to advocacy issues and the counseling profession. I believe in networking and embracing diversity. I grew up in a democratic family culture, in which nobody looked down upon others for any reason but as a child I was taught to consider everyone as my equals regardless of their socioeconomic status, education, race, etc. When I was appointed as Texas College Counseling Association Emerging Leader, one of my goals of getting involved at the local level was accomplished. Now, if I will be able to get involved at the national level through ACCA to reach the college counselors another goal of mine would be to attract the attention of the graduate student members of ACA and bring them together and connected under the umbrella of ACCA. I believe also in power of groups, so in teamwork, social connectedness, and acceptance. As professional counselors, I suppose, we hate any form of abuse and imposing our own values onto others; therefore my value system is based on the basic respect, autonomy, voluntariness, justice, hard work and leadership through these qualities. My goal is to bring not only the graduate students but also the college counselors together and forward to discuss their needs and resolve their issues as a whole and united. Consequently, I plan to bring more membership. Currently, I am an active member of ASGW membership committee and cochair of ASGW International Group Work committee. These responsibilities already required networking, commitment, and dedication from me. I am ready to provide my best service to ACCA activities and support other existing ACCA committees and leadership.

Tracie Self

Professional background and experience

I received my Master’s degree in Mental Health Counseling from the University of Northern Iowa, and am currently working on a Ph.D. in Counselor Education and Supervision through the University of Iowa. I have received the NCC credential and have recently completed the requirements for the LMHC credential in the state of Iowa and am awaiting the ruling from the licensure board. My involvement with ACCA includes being a part of the community college taskforce since its inception, and most recently as part of the graduate student committee. I have served on the Iowa Mental Health Counseling Association’s board as a student representative, at large and mostly as the chair of the ethics committee. I have also served in leadership roles in my local chapter of Chi Sigma Iota. I was chosen as an emerging leader through ACCA for the ACA conference in Pittsburgh. I most recently presented at ACCA in St. Louis. I have also had the opportunity to present at the state level at the IAMFT/IMHCA conference.

Qualifications and reasons for seeking office

I first joined the American College Counseling Association in 2006 when I was working toward my master’s degree. Since that time, I have found ACCA to be an invaluable resource, as the organization has provided essential opportunities for my personal growth and development as a counselor. My experiences with ACCA, coupled with my working environment, have been the foundation for my commitment to college counseling, in areas of both service and scholarship. My working experience thus far has all taken place in college counseling centers, ranging from my early experiences in my master’s program at a mid-sized University counseling center to my current position as the sole counselor in a small community college, where I have been employed for almost four years. Research interests during my doctoral study include community college counseling and college counseling centers in rural areas. I see service to ACCA as a paramount component of my continuing development as a counselor. This organization has personally benefited me in so many ways through consultation and the opportunity to learn more about the field, that I feel drawn to give back through service to ACCA. If I am elected to this position, I would like to improve communication and services to the graduate student population within ACCA, particularly in the area of mentorship. Through the years I’ve
been a participant in ACCA, I’ve noted many graduate students have questions about how to obtain positions in college counseling centers, and I would like to see ACCA develop a formal referral service for students as well as a career center at upcoming conferences.

ASSOCIATION FOR COUNSELORS AND EDUCATORS IN GOVERNMENT

President-Elect

Andree’ M. Sutton

Professional background and experience

Currently I am a Licensed Professional Counselor (NJ) and a National Certified Counselor. My education credentials include a Post Graduate Degree in Marriage and Family Therapy, a Masters in Community Agency Counselor and Masters in Education specializing in Instruction Education. I retired from the U.S. Air Force at the rank of Chief Master Sgt. I specialize in providing a variety of counseling services to Veterans. My employment history as a Counseling professional include working at a Vet Center as a Readjustment Counseling Intern, a Vocational Rehabilitation Counselor and as a Regional Veterans Employment Coordinator providing Career Counseling Services and advocacy assistance to Severely Injured Veterans. I am also a member of Chi Sigma Iota and have presented at ACA on the subject of Counseling Combat Veterans.

Qualifications and reasons for seeking office

My rationale and reasoning for seeking the office of President of ACEG is to provide a greater platform within the Government Community and in particular within the Department of Veteran Affairs on issues facing counselors and educators within the Government Service. These issues include advocating for greater Continuing Education support and support for membership and attendance at ACA national conferences as forums to enhance their professional credentials and expand their knowledge base. My strategic goal is to raise awareness of the ACEG and ACA missions. In my humble opinion there are far too few Counselors and Educators within the Federal Government that are members of ACA and many are unaware of the benefits of membership. In order to advocate on behalf of the population groups we serve we need a strong collective voice and a solid platform to raise the important issues while at the same time draw upon the knowledge and experience of the membership to ensure all are in sync with the larger objective. There are many of us within the Federal Government that are LPCs, MFTs, LMHC that have all benefited from the inclusion of our profession within the Department of VA and the Federal Government. We need now more than ever an organization that will ensure we continue to move forward and be recognized for the hard work and professional experience we bring to table ACEG is that organization within ACA. I would be honored to continue to serve in any capacity within the ACEG organization but I believe I might be of best service in the leadership realm.

Director

David R. Brinkworth

Professional background and experience

David was appointed by his peers to fill a Director position in the Association for Counselors and Educators in Government (ACEG) in April 2010. He has been a member of ACEG, the International Association of Marriage and Family Therapists, and the American Counseling Association since 2003. After 10 years of active military service, he completed a Masters of Arts in Community Counseling with an emphasis in Marriage and Family Therapy and worked as a Therapist at the Veterans Affairs Outpatient Clinic and Northern Colorado Behavioral Health in Greeley, Colorado. He then accepted a position as a Community Readiness Consultant with the Department of the Air Force. Since then he has worked in the Airman & Family Readiness Centers at Beale AFB, California and now, Ellsworth AFB, South Dakota. David has past experience as a Career Counselor and Internship Coordinator at the University of Northern Colorado and served as a Youth Counselor in various levels of residential treatment facilities in Nebraska. He has been a member of Chi Sigma Iota Honor Society since 2006 and is a lifetime member of Psi Chi National Honor Society where he previously served as an Officer, in charge of the Chapter’s website.

Qualifications and reasons for seeking office

David is a veteran with 10 years of active duty service in the Air Force and five years with the Air National Guard and Reserves. Having worked in the mental health field since 2001 and in the Government with the Department of Veterans Affairs and the Department of the Air Force since 2005, he has worked with many veterans, active duty service members, and their families focusing on PTSD issues, marital conflict, and suicide prevention and education. David’s reason to be elected into a Director position with the Association for Counselors and Educators in Government is to continue to enhance our acceptance and status within our respective government agencies, and assure that counseling and education programs for our clients be of the highest professional caliber. He hopes to continue to break down the stigma of seeking help among service members and work on educating those in the private sector of our profession, of the diverse culture and needs of service members and their families. With today’s military being stretched to its limits and the demand that this places on the service member and their families, there is only going to be an increase in needs by this unique community. Currently there is a stigma among service members about seeking help when in need on active duty. As professionals, it is our job to work toward eliminating this stigma. Meanwhile, most government agencies are working with fewer resources each year, but we will eventually be overwhelmed when those service members, or veterans, do seek help. David feels that we can be more proactive with our services, whether in the counseling or educational field, by continuing to develop a network of professionals and sharing our experience and training with other professionals and those that will eventually replace us.
Laura Reed Goodson

Professional background and experience
I am a Master's Degree in Counseling Graduate student at the University of North Carolina at Charlotte with a special interest in working with combat trauma, complex trauma, and addiction. Though I am not a veteran, I come from a military family and have led writing workshops for veterans for the past 20 years.

Qualifications and reasons for seeking office
I have become more active in working with ACEG. I have become more active view of counselors and educators in the settings and roles and have a broad background and valuable perspective to ACEG. I've worked in various settings and roles and have a broad view of counselors and educators in the government. I have become more active with ACEG in the past two years and enjoyed being a part of the growth and renewed interest in our division. The face of ACEG has changed over the years and with a large part of our membership now composed of graduate students, I am eager to help move our division toward more diverse and inclusive programming that will enrich our future opportunities.

Miles T. Sakaguchi

Professional background and experience
Certification and Licensure: NCC // Education: M.Ed., University of Hawaii, M.Ed., University of San Diego, B.Ed., University of Hawaii/Recent Professional Experience: Education Services Specialist supporting a small counseling staff at Schofield Barracks Geographic Education Center. Assist students with college issues, to include tuition assistance, academic, personal & career issues both on site and in geographically separated areas // Association experience: ACEG (Past President), Hawaii Counseling Association (Treasurer - 3 years), Hawaii Association for Counselors and Educators in Government (President, Vice-President, Secretary) // Presentations: ACEG Professional Development Institute, Atlanta, Georgia 2005 // Community Service: Combined Federal Campaign action officer for the Army in Hawaii (two years), Combined Federal Campaign action officer for the Directorate of Community Activities, US Army Garrison, Hawaii (one year), Combined Federal Campaign action officer for the Education Services Division (one year) //

Qualifications and reasons for seeking office
I am currently a Polytrauma Post Doctoral Fellow for the Central Arkansas Veterans Healthcare System and an instructor for the University of Arkansas for Medical Sciences. I received a PhD from the University of Arkansas at Fayetteville in 2001. I am a past president of the Arkansas Counseling Association (ArCA) and continue to stay active in the organization. I received the 2008 ACA Robert Renken Emerging Professional Leader Award and lead several ArCA projects that have gained recognition from ACA and our region. My past experience has included working with children and family in therapeutic treatment programs, substance abuse programs, head start programs, and in public schools. I am currently working toward the development and implementation of a school based prevention intervention for military children and families experiencing combat related deployment.

Jennifer Kim

Professional background and experience
I have a master's degree in Counseling & Personnel Services and am a National Certified Counselor. I've worked for the federal government as an Education Services Specialist for the past seven years. I've been a member of ACA and ACEG as well as various other divisions for over 10 years. I am currently serving as an appointed Director for ACEG. Currently, I am also the Associate Editor for the Government Section of the National Career Development Association's web magazine, Career Convergence.

Qualifications and reasons for seeking office
With seven years experience working as an education and career counselor for the federal government, I bring a strong background and valuable perspective to ACEG. I’ve worked in various settings and roles and have a broad view of counselors and educators in the government. I have become more active throughout the Department of Defense in order to cut the budget deficits during one presidential administration. In another presidential administration, ACEG has seen the Army professional counseling and education staff, the last civil service holdouts in numbers, being reduced by half, only to be replaced by more contract staff, including contract counselors. In the early 1970s, the House of Representatives’ Report No. 93-662 directed the Army to discontinue the practice of hiring contract education counselors and stated that counseling positions should be civil service. This was largely due to problems and concerns in the 1960s and early 1970s. Obviously, not everyone in the Department of Defense are students of history or of lessons learned, as a result the same problems and issues that were concerns before will impact our Soldiers again and will take an equally strong resolve by counseling professionals within government service to overcome. ACEG needs to be at the forefront in seeking to put more qualified and quality counseling professionals in government service.

Angie Waliski

Professional background and experience
I am currently a Polytrauma Post Doctoral Fellow for the Central Arkansas Veterans Healthcare System and an instructor for the University of Arkansas for Medical Sciences. I received a PhD from the University of Arkansas at Fayetteville in 2001. I am a past president of the Arkansas Counseling Association (ArCA) and continue to stay active in the organization. I received the 2008 ACA Robert Renken Emerging Professional Leader Award and lead several ArCA projects that have gained recognition from ACA and our region. My past experience has included working with children and family in therapeutic treatment programs, substance abuse programs, head start programs, and in public schools. I am currently working toward the development and implementation of a school based prevention intervention for military children and families experiencing combat related deployment.
Qualifications and reasons for seeking office

As an active member of the Arkansas Counseling Association (ArCA) I have had a decade of experience working with leaders in our profession. As president I learned to represent counselors with various expertise and responsibilities. I am currently a Polytrauma Post Doctoral Fellow for the Veterans Healthcare System. I received this fellowship after explaining how counselors and our professional organizations can collaborate with the VA in identifying and assisting Operation Enduring and Iraqi Freedom Veterans and their families. As licensed professional counselors are beginning to see acceptance in the VA and as the VA is beginning to build programs that assist family members of the veteran, it is important to advocate for counselors and the prevention and treatment services we can provide. A goal for my future is to continue to create awareness of the counseling profession and our various areas of expertise. I see the value of counselors and educators in government. I feel that I am an advocate for prevention counselors and mental health counselors. I look forward to using my expertise to serving our members.

Nicole R. Hill

Professional background and experience

I am a professor in the Department of Counseling at Idaho State University, and I am licensed as a professional counselor in Idaho and Ohio. I completed my M.Ed. and Ph.D. degrees from Ohio University with a focus on Community Agency/Rehabilitation Counseling and Counselor Education, respectively. I am a member of ACA, multiple ACA divisions, and Chi Sigma Iota, and I have been committed to active involvement in leadership roles. I am serving as Secretary of CSI and President of Rocky Mountain ACES. Other professional service includes co-chairing ACA's Human Rights Committee, being President of the Idaho Counseling Association, serving as an editorial board member for Counselor Education and Supervision and Journal of Counseling and Development, being Communications Officer for CSJ, serving as a CACREP site team member, and cofounding ACES' New Faculty Interest Network. I have an active publication and presentation agenda that focuses on counselor development, wellness, supervision, mentoring, and leadership. I received the "Publication in Counselor Education and Supervision Award" from ACES in 2009. I believe that leadership is also necessary at the community level, so I volunteer my time by sitting on the Board of Directors for the Bannock Youth Foundation.

Qualifications and reasons for seeking office

ACES embodies the principles of leadership, advocacy, and stewardship, so I am delighted and honored to be nominated for ACES President. As a leader at state and regional levels, I am personally and professionally impacted by how counselor educators and supervisors shape the direction of the profession. My goals as ACES President would be to develop ongoing plans for ACES to be responsive to the needs of its constituents, identify ways to strengthen our leadership in the realm of scholarship, build collaborative partnerships with other divisions and ACA, and continue to create a legacy of leadership that is proactive, inclusive, and innovative. Responsiveness to ACES constituents includes members and their needs, and it also includes counselor education programs across the world. Higher education is experiencing tremendous financial pressure which impacts our ability to provide counselor preparation training in the most meaningful ways. Creating discussions of how we can help transform higher education, and thus, protect the integrity of counselor training programs is paramount. ACES can be an advocate as our colleagues encounter demands that compromise the integrity of training. Building collaborative relationships with other professional associations helps position ACES to be informed, active, and engaged in efforts to enhance all aspects of the counseling profession. We also must continue to provide services that are meaningful to our members as they evolve and encounter different experiences, so I am committed to understanding the needs and perspectives of members and other counselor educators and supervisors. I have greatly benefited from all the mentoring I received and all the leadership opportunities I have had. I strongly believe that a legacy of service, advocacy, and leadership is a cornerstone of ACES' vision as we collectively identify specific strategies for manifesting these principles. I appreciate your consideration of my nomination.

Christopher P. Roseman

Professional background and experience

I received my Ph.D. in Counselor Education from The University of Toledo in August 2006. I am an Assistant Professor at the University of South Dakota and serve as Coordinator of the Clinical Mental Health and Substance Abuse Programs. I hold licensure as a Professional Counselor in the State of Ohio and am a Nationally Certified Counselor. I have been a certified instructor in Nonviolent Crisis Intervention for the Crisis Prevention Institute, Inc. since 2002. My work experience as a professional counselor is in various settings such as clinical mental health and substance abuse agencies, correctional facilities, and the Department of Job and Family Services in Ohio as an Eligibility Specialist and Children's Services Worker. I am the Executive Director for the South Dakota Counseling Association after serving two years as SDCA President. I currently serve as the NCACES President, ACA Midwest Region Chair-elect, and Co-Chair of the ACA Branch Development Committee. I also serve as a board member of the ACAIT. I have been honored to receive the 2010 American Counseling Association Robert Rencken Emerging Professional Leadership Award and the 2006 Association for Counselor Education and Supervision Outstanding Graduate Leadership.

Qualifications and reasons for seeking office

The Association for Counselor Education and Supervision is a key leader in the advancement of our discipline, therefore responsible to assess
and act upon the current needs of the clients in which we serve. This must be accomplished through extraordinary research, curriculum development, and supervision. Additionally, ACES must continue to strive to unite and strengthen our profession through their work in Social Justice, Professional Advocacy, and the Accreditation Process. The members of ACES deserve the training, resources, and networking opportunities to ensure that the high standards we, as professional counselors, aspire to achieve and embody are met. Professional Counselors face constant challenges and changes; this will never cease. In a profession where our client’s needs are ever-changing, so, too, will change how we train counselors, how we research new interventions, and how we best practice professional counseling. There will be continuous legislative issues in which it is the duty of ACES to be aware of and act upon. ACES is so vital; it provides the voice, the forum, and the ideas of counselors, supervisors, and educators everywhere to understand, grow, and take ownership of this profession we dearly love and cherish. ACES has had phenomenal leadership; it continues to foster an environment which encourages and mentors its future leaders. Through strong, positive leadership and membership, ACES embodies a synergy that is contagious and appeals to students, counselors, supervisors, and educators. My goal is to continue and advance the ACES agenda whereby it is a role model for other professional organizations. This is accomplished through a) providing resources and development for its members, b) promoting the “brand” of ACES through technology, publications, and networking opportunities, and c) mentoring students, advocating for clients and professional counselors, and leading in a responsible and honorable fashion.

Secretary

Jelane A. Kennedy

Professional background and experience

I graduated from The College of William and Mary with my doctorate. I received the Ruth Strang research award for my dissertation from NAWE (National Association of Women in Education). I have been a National Certified Counselor since 1988, and became a member of ACA in the 1980s. I am licensed in Virginia and New York as a counselor. Prior to my work as a faculty member, I worked in student affairs in the areas of residence life, student activities, academic advising and career services. I also had a small private practice in Virginia. I became a member of ACES when I began my career as a college professor in the mid-1990s I have presented at over 40 conferences internationally, nationally and regionally in my career. I have published articles related to multicultural issues in a variety of journals. I have also received the Thomas A. Manion award for teaching at The College of Saint Rose where I am currently a Professor in the Counseling and College Student Services programs. While at The College of Saint Rose I also served as Department Chair of the Counseling and Educational Leadership programs where I shepherded our programs through our initial NCATE process.

Qualifications and reasons for seeking office

I have served as President-Elect of NY-ACES, President of NYACES and past President of NYACES (a six year commitment), and secretary of NARACES. I have served as the secretary for National Association of Women in Education (NAWE) and held several offices while in membership before the organization folded this included being one of the founding members of the Lesbian/Bisexual Caucus. I have always found that serving as a volunteer in the organizations that I belong to an honor. The opportunity to contribute to my profession over the years has been important to me and as an unexpected end result I have met wonderful people while networking. I have found in the past in my role as secretary, a way to support the mission and goals of the organizations that I belong to. It has also been a way to help keep a historical record that many times has proven valuable as we continue to grow and develop as a profession. It would be an honor to continue that tradition and to use my organization skills in a positive way.

Jennifer L. Murdock

Professional background and experience

I am currently an Assistant Professor of Counselor Education and Supervision at the University of Northern Colorado (UNC) with primary teaching responsibilities in professional identity and orientation, career counseling and career theory, and counseling skills courses for our master’s students as well as professional development, leadership, advocacy, and advanced career courses for our doctoral students. I completed a Ph.D. in Counselor Education and Supervision from the University of Wyoming and I am a National Certified Counselor, a Licensed Professional Counselor and Licensed School Counselor in the State of Colorado. Additionally, I am a member of ACA, ACES, NCDA, ASCA, the Colorado Counseling Association, the Colorado School Counseling Association, and Chi Sigma Iota. I currently serve as chapter co-faculty adviser for our CSI Rho Epsilon Chapter at UNC. I was also a corecipient of an ACES Research Grant from the ACES Research Grant Committee in 2008.

Qualifications and reasons for seeking office

If elected, I am enthusiastically prepared to assume the position of Secretary to serve ACES members. Using my strong organizational skills, ability to manage multiple tasks, communicate effectively, and collaborate as a contributing team member I can assist the Executive Council to support the mission of ACES and facilitate smooth management of association responsibilities. In line with ACES bylaws (Revised April 2006) I will provide careful management for all records of the current activities of the Association, the Executive Council, and Executive Committee through organized and clear documents and by devoting more than adequate time to this position. I will become familiar with all responsibilities of the office and establish an effective working relationship with members of the Executive Council and Executive Committees. Additionally, I am prepared to spend further time and energy to perform other duties deemed helpful or as assigned by the membership,
Jean Underfer-Babalisi

Professional background and experience

Professional Clinical Counselor (22 years) with Supervision Designation (13 years); ABD, Past Midwest Region Chairperson (involved in National ACA Leadership for 10 years), Past President of: Ohio Counseling Association (Leadership roles for 15 years), OACES, NWOCAs, OASGW (2x). Recipient of the Susan Sears Counselor of the year Award 2005 and OACES Doctoral Student of the Year 2006. Has volunteered in my community and have had leadership roles in social advocacy in my community for the past 30 years.

Qualifications and reasons for seeking office

I have held national leadership roles for the past 10 years, state leadership roles for 15 years, and social advocacy experience for 30+ years. My goal has always been to serve my community and profession in whatever manner is indicated and/or needed. As ACES Secretary, my goals are to be organized, timely, be active in the leadership process, take direction from ACES leadership, carry out my responsibilities with dignity and respect, advocate for the needs and direction of ACES, and to do my best at each moment.

ASSOCIATION FOR LESBIAN, GAY, BISEXUAL AND TRANSGENDER ISSUES IN COUNSELING

President-Elect

Pete S. Finnerty

Professional background and experience

As a counselor I have worked with the LGBTQIQQA community in various mental health settings and in various local, state, and national advocacy efforts. I received my Bachelor’s in Psychology and Master’s in Counseling from California State University Fresno where I also worked in community mental health agencies and inpatient care. I currently am in the internship phase of my doctoral degree in counselor education at Kent State University specializing in LGBTQIQQA/diversity issues in counseling. While in Ohio I have been active at the state and national level for ALGBTIC. I was part of cocreating an Ohio chapter of ALGBTIC while serving as its President. On the national level I cochair the taskforce to update the LGBQIIQA competencies and the state branch committee. I also present and teach on various counseling issues including LGBQIIQA issues in counseling on the local, state and national level through conference presentations and workshops. I have presided as President and Treasurer of Chi Sigma Iota during my graduate career and continue to develop my writing for professional newsletters, journals and periodicals.

Qualifications and reasons for seeking office

I would like to become President of ALGBTIC because I wish to serve the needs of counselors, students and the LGBTQIQQA community as a whole. Through education and outreach efforts I will lead in bringing LGBTQIQQA issues to the forefront of the counseling profession. I especially wish to recruit more Allies to our organization, both straight and from the LGBT community, in order to foster better education and advocacy efforts as a whole in counseling. In a time when LGBTQIQQA issues are so prevalent in the media and world alike we need to lead as a profession in providing the best services and advocacy to our communities to foster accepting, positive counseling strategies and safe environments for the LGBTQIQQA community. As President of ALGBTIC of Ohio I have assisted in the development of online resources, workshops, legislative action and advocacy efforts for counselors and the LGBTQIQQA community. I have served on several important committees for ALGBTIC national to create more positive environments in counseling and on the state levels for the LGBTQIQQA community. I also bring experience in LGBTQIQQA counseling research to my post along with firsthand knowledge of the toll of anti-gay attitudes through my counseling specialty and life. I hope you will join me in bringing better services and more pronounced social justice activism to counseling.

Board Trustee

Brandon Harper

Professional background and experience

My background experience is personal as well as professional. I am a transgender gay man, and I am due to obtain my Masters degree in Professional Counseling at Carlow University of Pittsburgh in December 2010. I coauthored the Competencies for Counseling Transgender Clients with the Association for Lesbian, Gay, Bisexual, and Transgender Issues in Counseling (ALGBTIC)’s Trans Task Force Committee. I am also on the revision committee that is currently revising the LGB competencies. I routinely provide LGBT advocacy trainings to various counseling agencies (Family Services of Western Pennsylvania, Parental Stress Center, Persad Center), counselor-education and other university programs (Shippensburg University, Slippery Rock University, Carlow University, Pittsburgh Medical School, Frostburg State University), counseling conferences (Pennsylvania Counseling Association, American Counseling Association, and business corporations (BNY Mellon). I also received the 2010 ALGBTIC Grad Student Award at the last ACA conference. I completed my practicum experience with the Pittsburgh AIDS Task Force and my internship with Holy Family Social Services, providing in-home counseling to families in need. I am a member of the American Counseling Association, Pennsylvania Counseling Association, their LGBT divisions, and the Greater Pittsburgh Counseling Association.

Qualifications and reasons for seeking office

My goals should I be elected as ALGBTIC board trustee would be to continue the advocacy I already do in educating counselors, counselor-educators, and other related helping professions about working with the LGBTQIQQA community and expand...
that campaign to reach wider members of these important professions. It would be my hope to focus on regions where help and support for this community is lacking, and where it would be most beneficial. An example of this is, although I am fortunate enough to live in a city where we have a counseling agency that specializes in supporting the LGBT community, there are individuals who travel 2-4 hours one way to seek treatment at my local agency because the next closest supportive agency they are aware of might be twice as far, if not farther. So it is my goal to strengthen outreach supportive services and help competent counselors in those regions be able to reach out to those individuals seeking LGBT affirmative care. It is also my goal to have more LGBT competent counselors and LGBT supportive services available not only to the youth who are victims of bullying in our schools, but the adult population too. Affectional orientation and gender identity/ expression can evolve or change over time, and not everyone realizes their identity when they are young, sometimes the piece of the puzzle is found later in life. It is my goal to assist ALGBTIC and ACA in increasing support in all these areas.

Samuel Sanabria

Professional background and experience
Samuel Sanabria is an Assistant Professor in the Graduate Counseling Program at Rollins College. He received his PhD in Counselor Education and Supervision from the University of Florida in 2002. He currently works with sexual and ethnic minorities providing couples and individual counseling. Samuel is an active member of the American Counseling Association (ACA) having served on committees including the bylaws and ethics committee. He served as cochair of the ACA Ethics Committee. He has been a member of several divisions in ACA including the Association for Lesbian, Gay Bisexual and Transgendered Issues in Counseling (ALGBTIC), Counselors for Social Justice (CSJ), and the Association for Multicultural Counseling and Development (AMCD). Samuel has contributed to the profession by presenting at national and local conferences, and publishing articles and book chapters on better understanding issues of sexual minorities. His current research interests include same sex parenting, and the development of homoprejudicial attitudes. Samuel is an active member of Equality Florida. He also served as a board member of ALSO OUT Youth (Sarasota county LGBTIQ drop in center), provided workshops on diversity issues for health care workers, and provided LGBT psychoeducational training for school counselors.

Qualifications and reasons for seeking office
I have been active in ACA as a board member of the Bylaws Committee and cochairing ethics committee. I have also been active in the profession by serving counselor education programs as a CACREP site team visitor and serving on the editorial board of Career Development Quarterly. At the same time, promoting awareness of the needs of lesbian, gay, bisexual and transgendered clients has been an important element of me professional career. Joining the ALGBTIC board of trustees would represent a natural progression and would allow me to contribute even more to the American Counseling Association, the counseling profession, and LGBT people. I would take the opportunity as board trustee to encourage research into areas where there are present and growing needs for new exploration. As a gay father, I am particularly interested in same-sex parenting issues. During my own research I found that the current body of work could be enhanced to further develop our understandings of the issues and to help provide effective services for same-sex couples and families. I am also interested in furthering research into homo-prejudicial attitudes and the impact they have on gay, lesbian, bisexual, and transgendered young people, especially in light of the spate of recent suicides among gay youth. I would like to use collected knowledge in this area to develop educational programs to foster the development of positive identities and to combat bullying in schools and workplaces. I have worked toward this pursuit for several years and would continue to advocate for this as an ALGBTIC board trustee. I am looking forward to contributing to ALGBTIC in whatever capacity I can and will do my best to represent the interests of ALGBTIC stakeholders as a board trustee.

ASSOCIATION FOR MULTICULTURAL COUNSELING AND DEVELOPMENT

President-Elect

Maritza Gallardo-Cooper

Professional background and experience
Maritza Gallardo-Cooper, Ph.D., is a marriage and family therapist and school psychologist with over 30 years of experience in the public and private sector. She completed her bachelor's degree at the University of Puerto Rico, master's degree at the University of Houston, and doctorate at the University of Florida. She directed programs in adolescent residential treatment, consultation, school-based day treatment, intensive family therapy, and outpatient clinics for children and adults. Her practice interests include cross-cultural, bicultural, and bilingual interventions. As a national certified school psychologist she specializes in multicultural assessment and consultation. She presents in numerous conferences and training programs on a wide range of topics as well as teaches clinical supervision at the Universidad del Valle de Guatemala graduate program. She was a task member of the Hispanic Task Force in the President’s Commission of Mental Health and selected by peers as Clinician of the Year. She served as vice president of the Latino Concerns network of AMCD and cochaired the ACA task force on Latino Family Counseling Competencies. She coauthored the book Counseling Latinos and La Familia: A practical guide with Azara Santiago-Rivera and Patricia Arredondo as well as published on bilingual counseling.
Qualifications and reasons for seeking office

As President of AMCD I will contribute from my experiences as a seasoned culturally and linguistically committed practitioner and as an avid supporter of multicultural knowledge and practice. My professional formation began at a time when the multicultural movement was in its infancy and there were no formal organizations or training to unravel concerns about culturally competent methods. As a practitioner, I am keenly aware of the challenges when translating theory and research into practice, navigating through the obstacles of resistance, pursuing culturally appropriate methods, and reflecting upon cultural counseling adaptations. My goals, therefore, focus on the application of multicultural theory and research to ongoing professional development and to have availability of multicultural resources to various community groups. All of these groups are potential partners/collaborators. I will endorse programs for students and counselors to learn through cultural exchanges and mentorship, language immersion experiences, and collaboration with other ACA divisions, organizations, and institutions. I will also concentrate on increasing participation in national advocacy initiatives and public exposure to multicultural issues (e.g., continued expansion of the AMCD website, including scholarly reports for professionals and the general public). I strongly believe that AMCD must meet the needs of the educator, researcher, and practitioner. We need to tap on the vast number of counseling practitioners, increase membership, lead in the development of standards for bilingual competencies, and establish a professional certification for multicultural counseling and supervision. We need to face current socio-political-economic realities of client groups together with conviction, consider new resources, and develop actionable strategies. The richness of our division relies on a vibrant and diverse membership with shared goals and complementary interests. I will be enthusiastic and committed to reach all members, create teams of action, and expand the role of the organization to stimulate a progressive division.

Tarrell Awe Agha Portman

Professional background and experience

Tarrell Awe Agha Portman currently serves as the VP for Native American Concerns within AMCD. She is an active member of the AMCD Executive Board and has served as the AMCD National Awards chair for several years. In 2006, Tarrell was selected as the first recipient of the Counselors for Social Justice Mary Smith Arnold Anti-Oppression Award. She was elected by The University of Iowa Faculty Senate to serve on the Charter Committee for Diversity and currently holds a 40% appointment in the Graduate College as the Director of the OGEI serving graduate students from underrepresented backgrounds across 100+ programs. Tarrell is a national Holmes Partnership Scholar Alum and served on the National Association of Holmes Scholar Alumni Board of Directors. She was honored as a National Indian Fellow through the United States Department of Education. Her dissertation was included in the National Museum of the American Indian at the Smithsonian Institute. She has contributed 62 publications and 131 presentations to the counseling profession. Tarrell Portman holds professional licenses as a K-12 school counselor, school psychological examiner, licensed mental health counselor, and teacher. She is an alumnus of Southeast Missouri State University (BA, MA) and The University of Arkansas-Fayetteville (PhD).

Qualifications and reasons for seeking office

Building a community of inclusiveness and understanding is my primary goal for serving AMCD. Early in my academic career I felt embraced by the AMCD family. It has been my good fortune to have known many AMCD leaders who have stood as giants in our profession. These leaders touched my life by teaching me how to observe and listen to the multicultural needs of others. I watched them lead in difficult times, witnessed their commitment to AMCD members and future professionals, and shared in their joys of changing the nature of counseling through creation of the multicultural competencies. My goal as AMCD President would be to continue the vision of these leaders and reach across boundaries to develop partnerships to promote the counseling profession. These partnerships would serve to increase AMCD membership, facilitate new product development, and enhance the integrity of the Journal of Multicultural Counseling and Development. I feel qualified to lead AMCD due to my ongoing involvement in the decision-making of the organization, my active involvement in other divisions of ACA, and previous national leadership experience. I truly believe in building consensus in organizations. My underlying value system upholds serving through leadership. AMCD provides members with a wonderful opportunity to make a difference in the counseling profession and the world.

Vice President for Native American Concerns

Lisa Grayshield

No information received

AMCD Western Region Representative

Sharon L. Bowles

Professional background/experience:

- A 34 year veteran math teacher and school counselor (retired).
- School Counseling Consultant/Volunteer.
- Instructor in the Counseling Department of SFSU for six years; currently teaching Multicultural Counseling courses.
- Approved Online Instructor/Developer of Lay Counseling Ministry courses for Fresno Pacific University Professional Development Department. Leadership Positions:
  - Served 21 years as Head Counselor.
  - Served three years on the Selection Committee for the National Merit Scholarship Corporation.
  - Served eight years on the Grant Advisory Committee (GAC) of the California Student Aid Commission; GAC Vice-Chair/Parliamentarian.
  - Inducted into Stanford University H. B. McDaniel Hall of Fame in 2008.

Professional background and experience

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Several years ago, I received the following message from a fortune cookie: “You never hesitate to tackle the most difficult problems.” The nature of a Professional Counselor lends itself to tackling difficult problems and finding solutions. I understand the word commitment and what it represents. Multicultural counseling and development from diverse cultures is essential to our personal growth as well as to our societal growth. Exposure to differences will enhance our cross-cultural knowledge base. Though the road ahead could be bumpy, our convictions, determination and faith in the power of the good we do daily will help smooth the path that we must travel to achieve our goals. Entrusting me to serve as your ACA Western Region AMCD Representative would indeed be a privilege. If given this honor, I will endeavor to work diligently to promote the ideals and goals of AMCD. It is my hope to assist the organization in forward progress but always remembering the efforts of the many members who sacrificed so much over the years to make AMCD what it is today. Let us celebrate our existence and renew our faith in the expectations of a bright future.

**Qualifications and reasons for seeking office**

I would be honored to serve in the capacity of ARCA President-Elect. During my years with ARCA as Chair of the Research and Knowledge Council, we have faced new challenges and experienced significant successes. The struggling economy of our nation has contributed to significant membership stress which has threatened the stability and potency of our profession through funding cuts, shrinking resources, and an upheaval of political priorities. Despite this, our ability as a professional organization to make a difference in the lives of people with disabilities has grown. We have become a more collaborative, flexible, responsive, and inclusive organization. We have provided local and national leadership around political issues, legislation, and leadership appointments. We have joined with our rehab brethren from other organizations to move forward on licensure issues, defining research agendas, and promoting ethical competent practice. Our work continues. If elected to the Board, I would work to continue nurturing our existing collaborative relationships and seek to develop new and stronger connections with other organizations, institutions, and disability stakeholders. I would push the Board to offer more opportunities for members to voice their feedback, share their wisdom and expertise, and be active participants of their ARCA. I would support efforts to generate and nurture our future leaders — both from inside ARCA and those who haven’t found ARCA yet. Finally, I would work to improve our communications, connections, and positioning within our field, and to enhance our visibility and relevancy — not just for ARCA, but for our collective profession. Ultimately, I humbly ask for your endorsement to the position of President-Elect so that I can continue working for you — for it is through the hard work, professionalism and dedication of our ARCA members that lives are changed.

**Treasurer**

Cherie King

**Professional background and experience**

Cherie King has been a Rehabilitation Consultant and Counselor for over 25 years in various settings including, mental health community-based treatment, vocational rehabilitation, disability management, private rehabilitation, and training. Before teaching full time, she taught as an adjunct for Assumption College and CCSU and Teaching Fellow for Boston University. She is the Chair of the Commission on Standards and Accreditation for the Council on Rehabilitation Education (CORE). She is a Commissioner for the Commission on Rehabilitation Education (CORE). She is a Commissioner for the Commission on Rehabilitation Education (CORE).
on Disability Management Specialists Certification (CDMSC) and is Chair of CDMSC’s Examination and Research Committee. Dr. King maintains a private practice focused on rehabilitation, disability management, and forensic consulting services. She is a past member of the National Board of Directors of The International Association of Rehabilitation Professionals (IARP) and Past President of the New England IARP Chapter. Her research and teaching interests are clinical supervision of counselors, distance education, rehabilitation counselor competencies and standards of practice, vocational rehabilitation, private rehabilitation, and disability management.

Qualifications and reasons for seeking office

My goal as Treasurer of ARCA is to provide fiscal accuracy and responsibility to the position. These are difficult times for professional associations and their members. Hard decisions must be made regarding how to provide quality membership service and benefits within a budget. I have been a part of several professional organizations’ Board of Directors and have faced the challenges of “saving” an organization from financial collapse in these difficult times. With focus on the bottom-line, I will bring a perspective to the Treasurer’s role by focusing on what is in the best long-term interest of organization and its members.

Council on Public Relations and Awareness

Nykeisha Moore

Professional background and experience

I am a vocational rehabilitation counselor for the Department of Veterans Affairs in Connecticut since 2009. I have a doctoral degree in Rehabilitation Counseling Education from the University of Iowa, a master’s degree in Rehabilitation Counseling from South Carolina State University, and a bachelor’s degree in Child Development from Claflin University. I have served as the student task force representative of the ARCA board beginning in 2006, and currently as Chair of the Council on Public Relations and Awareness.

Also, I am active member of American Counseling Association and National Council on Rehabilitation Education.

Qualifications and reasons for seeking office

I have served on the ARCA Executive Council since 2006, and have been a member of the organization since 2003. I am extremely honored to be nominated again to chair the Public Relations and Awareness Council and look forward to facilitating membership and public relations mechanisms. During my term, I plan to engender a sense of participation and collaboration among members and encourage membership from those professionals who have chosen not to join ARCA. Also, I will enhance the visibility of ARCA a primary duty by showcasing the organization at national conferences and local/state events, developing brochures and newsletters, and networking with professionals in the field. Furthermore, in effort to increase student visibility, I will continue to collaboratively work with the Student Task Force Representative (Dr. Quiteya Walker) to promote student mentoring, involvement, and recognition. On a final note, I will aim to publicly identify members who have made outstanding contributions to the association or profession by recognition, including but not limited to, presenting awards at national conferences and acknowledgments in newsletters and/or on the ARCA website. Being an active and engaged member of ARCA has been one of the most fulfilling parts of my professional life; I would welcome the opportunity to extend this commitment as one of your leaders of the ARCA Executive Council and work hard for changes that reflect the needs and desires of all members.

ASSOCIATION FOR SPIRITUAL, ETHICAL AND RELIGIOUS VALUES IN COUNSELING

President-Elect

Shannon Ray

Professional background and experience

Shannon Ray, Ph.D., LMHC, NCC, CCMHC is currently an Assistant Professor with the Center for Psychological Studies at Nova Southeastern University. She received her doctorate from the University of Central Florida in 2004. She has extensive clinical mental health experience and is a Licensed Mental Health Counselor in the State of Florida as well as a National Certified Counselor and a Clinically Certified Mental Health Counselor.

Shannon is the clinical coordinator for NSU’s field-based counselor education placements throughout Florida and has presented and published on a wide variety of topics including spiritual issues in counseling, eating disorders, domestic violence, clinical training, and children raised by grandparents. She is currently serving her second term on the ASERVIC Board of Directors and also serves as chair of the Awards Committee, cochair of the Membership Committee, and she cochaired ASERVIC’s August 2010 National Conference. Shannon is also active with ACES and chairs the long range planning committee for Southern ACES.

Qualifications and reasons for seeking office

It is an honor for me to be a candidate for President-Elect of ASERVIC, and I believe wholeheartedly in the mission of the organization with its overarching goal of infusing spiritual competencies and ethical practice throughout the counseling profession. During my two terms on the Board of Directors, I have seen the development, adoption, and ACA endorsement of ASERVIC’s spiritual competencies. If elected, my goals would be to continue to integrate spirituality throughout counselor education curricula with a distinct understanding of and respect for myriad religious delineations. I believe it is important to maintain focus on the ongoing importance of ethical values throughout counselor training, practice, and supervision and to provide ongoing professional development to members and all interested counseling professionals. One key way to implement this objective is through organization of ASERVIC’s biannual national conference and the continued offering of spiritual renewal and invigoration through the biannual spiritual journey. Finally, an
important goal remains to maintain and support the high quality of the ASERVIC journal Counseling and Values as well as to continually enhance member services. It would be incredibly meaningful for me to be able to serve ASERVIC in this capacity, and I would take the responsibility to heart, mind, and spirit.

## Board Member

### Stephanie F. Dailey

**Professional background and experience**

I am a licensed professional counselor and hold NCC and ACS credentials. I am a Counselor Education and Supervision doctoral candidate at Argosy University/ Washington, DC and an adjunct professor. As an active member of ACA I participate in three divisions, three state associations, and one regional association. Membership activities include, for example, serving as the coeditor for Interaction, ASERVIC’s newsletter; being an invited ACA blogger; and serving as the program manager for ACA’s DSM-V Task Force. In 2010 I received seven awards including Excellence in Faculty Research, ASERVIC Research Award, and ASERVIC Outstanding Graduate Student. I have presented 11 sessions at juried conferences related to spiritual integration, including three invited ASERVIC sponsored sessions and one invited ACA Presidential highlight. Recent publications include a chapter, Assessing the Religious and Spiritual Domains, in Cashwell and Young’s second edition of Integrating religion and spirituality in counseling: A guide to competent practice (in press, February 2011). I have been an invited presenter in four ASERVIC sponsored education sessions at the ACA National Conference and will be leading an ACA presidentially highlighted session on spiritual integration in 2011. Currently, I am conducting research to further validate ASERVIC’s Spiritual Competencies and to evaluate spiritual competency among ASERVIC membership. My vision for ASERVIC is continued enhancement and promotion of spiritual competence among graduate students, practitioners and educators. Providing members, especially students, with a clear understanding of the components that make up spiritual competence prevents a myriad of unethical practices that may include operating from personal religious/spiritual bias and failing to utilize best practices when addressing areas of spirituality. Spiritual competence, for both educators and trainees, is paramount. This relates to another goal, research and publication, which serves to provide counselors and educators with practical tools for spiritual integration. Other goals include revitalizing our relationship with state chapters and continuing to focus on diversity within our membership. These goals serve not only to raise awareness of ASERVIC but also to sustain the livelihood of our fellowship.

## Qualifications and reasons for seeking office

My qualifications for this office include previous work on the ASERVIC board as an appointed officer. I agreed to fill this position for a board member who was unable to serve due to a conflict of interest in order to assist the organization. Additionally, when a secretary was needed, I agreed to move into that position from the board as requested. I have assisted ASERVIC as newsletter editor and this has provided me with up to date information regarding the organization’s events, goals, plans, and needs. As newsletter editor, I have a unique understanding of the organization and connection with the membership. Serving as membership committee cochair has also given me insight into the membership. This past year, I was able to volunteer to be conference committee cochair for the second ASERVIC conference on spirituality. Assisting in organizing and participating in this event was not only education but,
again, helpful in gaining insight into the direction that ASERVIC is headed. ASERVIC has identified long range goals and plans that I am excited about investing in. I would like to continue to have an active role in conference organization and decisions, committee and bylaw reorganizations, establishing a registry for counselors working with spiritual and religious issues, financial and business decisions that contribute to the overall success of ASERVIC because this is an organization whose mission and values are essential to counselors and client well-being. I will work toward those goals by being present, being engaging, and offering assistance in any task assigned to me as a board member.

Leila Roach

Professional background and experience
Leila received her Ph.D. Counselor Education - University of Central Florida, M.Ed. Human Development Counseling - Vanderbilt University, and B.S. Special Education, Deaf - University of Tennessee. She is an LMHC, LMFT, and supervisor for MH counselors in Florida, and an NCC. Leila is an assistant professor of counselor education at Stetson University and coordinator of the Marriage, Couple, & Family Counseling Program. She has worked as a counselor for 21 years. Leila has served on the ASERVIC and Florida Counseling Association boards and is a CACREP site team member. She belongs to ACA, ACES, ASERVIC, IAMFC, AMHCA, AAMFT, APT, regional, state and local affiliates, and Chi Sigma Iota. She has presented for the International Counseling Conference (ICC), EBACA, ACA, ACES, IAMFC, SACES, and FCA on several topics including advocacy, ethics, wellness, spirituality, couples counseling, culturally sensitive counseling for Deaf persons, and group counseling, in addition to local workshops. She published two papers for ICC on advocacy and an article for CES on counselor wellness. She has coauthored a book chapter on spirituality and wellness that is currently in press. Leila is an American Red Cross Disaster Mental Health volunteer and community resource speaker and mentor for Seminole County schools.

Qualifications and reasons for seeking office
For many years, I have worked in organizations where spirituality and religion have been a part of the institution. I believe in the mission of ASERVIC to “create an environment that empowers and enables the expression, exploration, development, and research of evolving spiritual, ethical, and religious values as they relate to the person, to society, and to the profession of counseling and human development.” I believe it is essential that we continue to support the mission of ASERVIC through dialogue with other divisions within ACA and the profession; and through a research emphasis on spiritual, ethical, and religious values. In my role as Board member, I would like to work collaboratively with other divisions on issues important to our profession; to promote and serve ASERVIC through ongoing projects and the 2012 National Conference; and to support community outreach projects. I would also like to see the organization reach out to state organizations to support membership and involvement of counselors, counselor educators, and students on the local level. I have been a member of ASERVIC for many years and have served one term on the Board and as Ethics Committee Co-Chair. I would be honored and humbled to continue my service in this important ACA division.

William R. Sterner

Professional background and experience
I am currently in my second year as an Assistant Professor of Counselor Education at Marymount University. I graduated from Penn State University with a Ph.D. in Counselor Education in 2007 and a Master's degree in Counselor Education in 1994. I am Licensed Professional Counselor in Pennsylvania and North Carolina as well as a National Certified Counselor. My clinical experience has focused on community counseling with an emphasis on mental health and addictions issues. I also have experience conducting substance abuse assessments within the criminal justice system. Current memberships include ACA, ACES, and ASERVIC. For the past year I have been involved in various research projects addressing spiritual and religious issues with deployed military personnel and counselor education training. Other areas of interest include existentialism and career counseling, clinical supervision and work-related issues, bullying, counseling competencies, counselor continuing education and training, student incivility, co-occurring disorders, and suicide. I have presented on various topics at ACA, ACES, and the Pennsylvania Counseling Association since 2004. I was the principal investigator on a $361,460 Pennsylvania Department of Community and Economic Development HOME Grant awarded to establish a Fairweather Lodge in Central Pennsylvania.

Qualifications and reasons for seeking office
Through the integration of spirituality and meditation, I have developed a more compassionate understanding of the human condition and a clearer vision of the spiritual interconnectedness that binds all life. I am seeking to become an ASERVIC board member because much of what this association stands for is consistent with my personal and professional values and beliefs. Serving on the ASERVIC board provides me the opportunity work with others who see the importance of establishing counselor competencies regarding spiritual, ethical, and religious values and beliefs as an integral part of the client’s worldview. I am currently working on the ASERVIC Editorial Review Committee to assist counselor educators with tools for implementing spiritual/religious issues in the classroom. It is my hope that these outcomes will extend to practitioners in the next phase of this project. The counseling profession has rightfully embraced the ideals of treating the whole client to the point of distinguishing itself through its professional identity from other helping professions, yet my experiences within the profession indicate many professional counselors are not comfortable or competent addressing spiritual and religious issues in their work with clients. I believe my role as an ASERVIC board member is to continue to expand the discourse on the importance of spiritual, religious, and ethical values and how these values
Kurt L. Kraus

Professional background and experience

To lead the Association for Specialists in Group Work, I am particularly proud that: I became a member of ASGW in the early 1980s as a student; I have been a member ever since. My early career as a professional counselor I was a school counselor in rural Maine. I became licensed as an LPC in Maine the year licensure passed. I was the first LPC hired at the Acadia Psychiatric Hospital in Bangor Maine. I pursued my doctorate. I have been a counselor educator for 15 years. I am now a Full Professor, in the Department of Counseling and College Student Personnel at Shippensburg University of Pennsylvania. I was the host and one of three faculty of the inaugural ASGW Advanced Group Training Institute in 2004. I am the proud 2005 Fellow in ASGW. I was awarded the Pennsylvania Counseling Association’s David W. Hall Advocacy Award in 2007. I am the immediate past Chair of the Board of Directors of the NBCC, Inc. and Affiliates. Group work is a passion of mine. Through my career thus far, I’ve served many roles as a member in ASGW; I would love to be elected your president-elect.

Qualifications and reasons for seeking office

I am prepared to lead the Association for Specialists in Group Work; I’m honored to run for the position of President-Elect. I consider it a privilege to join the ranks, past and future, of people committed to furthering the mission and function of the Association. To vote for me you should know my perception and vision of this stellar association. ASGW is a professional, multidisciplinary association that succeeds in growing and maintaining a loyal number of professionals and students who value the power of group work. ASGW embodies for me what a professional association should be: I marvel at its model of leadership and our membership’s dedication to shared governance and responsibility, its lateral rather than hierarchical model of organization and task group leadership, its care to continually emphasize relationships, and its scholarly dedication to enhancing what practitioners from diverse backgrounds know about groups. I also highly value ASGW’s proud history within the American Counseling Association. My commitment if elected is to continue the current path of purposeful expansion and service. In our unforgiving economy when professionals must make difficult decisions about where their association dollars will be spent, I want to strengthen the practical, economic value of joining and renewing their ASGW membership. I trust the membership to guide the growth of the Association — so I intend to look for new ways to ease and strengthen the general membership’s invaluable input. Third, I want us to assert our presence — primarily as professional counselors across disciplines where group work is vital and vibrant. Our unique ability to attract members, group workers from other professions, sets us apart within ACA and I want to celebrate that in all we do. If elected, I’ll want to hear from you — ASGW is our association. Thank you for the opportunity to lead.

Rebecca A. Schumacher

Professional background and experience

Service to ASGW: Treasurer, Secretary, and Process Observer. ASGW Committees service: Registration Chair for the ASGW National Conference in New Orleans, Professional Development Chair, State Divisions Chair, ASGW Representative for 20/20 Delegation, and Co-Chair for ASGW at the ACA National Convention. New England ASGW Branch: President, Chairs for Program Committee, and Chair of the Finance Committee. ACA Service: Chair of the Professional Development Committee. Education: Ed.D., Counselor Education from the University of Maine, a C.A.S. and M.A. in School Counseling, Fairfield University, and B.S. in Education with a specialty in Multicultural Education, Indiana University. I am a member of ASGW, ACA, and ASCA. I was named ASGW Fellow and received the ASGW President’s Award twice. I have presented nationally and regionally on group work in school and consulted with schools on developing group work programs. I have run groups with k-12 students in public schools and have taught group courses to prepare school counselors for the use of group work in schools. Currently I am a visiting faculty for the School Counseling Program at the University of North Florida and previously was on faculty at the University of Massachusetts Boston.

Qualifications and reasons for seeking office

I am very honored to be selected as a candidate for the office of ASGW President. Spanning three decades, I have been fortunate to have been involved in ASGW at the state, regional, and national levels. Financial planning and management, professional development, and strategic planning are particular areas that I have in-depth experiences. I believe that these combined years of experience will guide my leadership to facilitate the work of the ASGW leadership team and our association. Experiences alone though do not define a leader. Vision, beliefs, and passion also influence leadership. I hold strong beliefs for the use of group work. I am passionate that group work can promote understanding in our diverse culture, and enhance development of human beings. Simply stated, I believe group work can make our world a better place. ASGW was founded “to promote quality in group work training, practice, and research.” This guiding principle is as timely now as it was in 1973. In addition, ASGW has long held the values of “service, leadership, and community.” Based on the founding beliefs and guiding values.
of the organization, if elected, I would emphasize two areas. 1. Enhance our professional development activities and explore the use of technology in professional training. 2. Development of a strategic plan that includes short and long term goals for the next decade. I am committed to furthering the mission of ASGW and promoting the strong values of the organization. I am especially excited of the possibility of serving as the ASGW President.

Governing Council Representative

Burt Bertram

Professional background and experience


Qualifications and reasons for seeking office

ASGW is a friendly and relevant organization — it is my professional home. Anyone who has ever attended our conference, “hung out” in our exhibit booth, or attended our luncheon during the ACA Conference can attest to the inclusive energy that binds us together. I am honored to offer my time and talent to be our representative to the ACA Governing Council. If elected, it will be my pleasure to represent the needs and interests of ASGW and, when there is an opportunity, to provide a sprinkling of group process “Pixie Dust” (what do you expect … I live in Orlando). Let me tell you why at this stage of my career I am seeking this opportunity. In the early 1980s, while serving as president of the Florida Counseling Association (then Florida Association for Counseling & Development), I was involved in the initial counselor licensing struggles in Florida. These activities proved to be pivotal in terms of cementing my commitment to professional identity development. For the last 30 years I have invested myself in the ongoing evolution of our profession and the professional identity development of students and practitioners. Whether serving as an association officer/ committee member, counselor educator, author, clinical supervisor/mentor, or practitioner I have been ever mindful of the enormous importance of the work we do and how absolutely vital it is that professional counselors are supported by a robust professional association. ACA has come a long way … and yet, in many ways, has only begun to address the many and complex needs and interests of professional counselors. I relish the opportunity to have a voice in the governance ACA as we strive to support the growth and development of counselors. I believe I can represent the interests of ASGW and at the same time be a calming “non-anxious presence” on Governing Council.

M. Carolyn Thomas

Professional background and experience

M. Carolyn Thomas is Professor and Coordinator of Counselor Education, Auburn Montgomery, AL. Education: B.S. Newcomb College (Zoology); M.Ed. Tulane University (School Counseling); Ph.D. University of Iowa (Counselor Education); M.S. AUM (Community Psychology) Certification and Licensure: Licensed Professional Counselor, Certified Counselor Supervisor, Licensed Marriage and Family Therapist, Licensed Bachelor Social Worker Professional Experience: Counselor Educator (37 years); Director, University Counseling Centers (25 years); Counselor, Montgomery Family Violence Center (27 years) Association Experience: ACA Governing Council Representative (current); ASGW President (2005); ASGW Treasurer (1997-2003); ACA Treasurer (2003); NCDA Trustee-at-Large (1992-1996); ACA Governing Council Process Observer (2001) Professional Memberships: ASGW, NCDA, ACES, AADA, Alabama CA, ALASGW, ALCDA, ALAADA, ALACES, APA, Division 49 Recognition: ASGW Fellow (1993); NCDA Fellow (2002); Point of Light (1991); AUM School of Education Research Award (2006); Outstanding Counseling Center Director (1999); AUM Community Outreach Award Publications and Presentations: Chapters, articles, and presentations on group work with victims of family abuse, shy students, older persons, GLBT clients, k-12 career development and career planning for battered women Community Service: Helped start the Domestic Abuse Shelter and Coalition Against Domestic Violence. Train DAS hotline counselors and conduct groups for battered women, mothers of sexually abused children, and survivors of sexual abuse.

Qualifications and reasons for seeking office

My combined involvement and leadership in ASGW and ACA have provided me with a comprehensive understanding of governance and fiscal responsibility at the division and ACA levels. My experiences as a past ACA Treasurer, past chair and current member
of the ACA Financial Affairs Committee, and ACA Governing Council Process Observer formed a strong foundation for current contributions to responsible fiscal planning. My history of ASGW leadership as ASGW President and ASGW Treasurer gave me the knowledge and skills to work closely with ACA as an ASGW representative. My most significant qualification is my history of forming collaborative and close working relationships within and between ACA and ASGW. My goal as ASGW President was to maintain a division professionals join because of the way we treat each other. My goal in ACA leadership was to foster fiscal responsibility while encouraging new services and creative solutions to difficult problems. My ASGW colleagues and I have consistently believed that divisions are the backbone of ACA, and governance models must preserve the strength of individual divisions so that members can realize their maximum potential in making specialty contributions to the counseling profession. While maintaining the viability of individual divisions, the ACA Governing Council is a crucial conduit for building collaborative alliances among the divisions. By preserving the strength of divisions and maximizing the sharing of specialties, the total counseling profession will remain a comprehensive entity. If re-elected as the ASGW Governing Council representative, I will represent ASGW and ACA members in the combined efforts to keep ACA a stable, diverse, creative, and growing profession.

COUNSELING ASSOCIATION FOR HUMANISTIC EDUCATION AND DEVELOPMENT

President-Elect

Mark B. Scholl

Professional background and experience

I have a PhD in Counselor Education and have worked as a counselor or counselor educator for the past 12 years. I am a Licensed Mental Health Counselor, a National Certified Counselor, and an Assistant Professor of Counselor Education at East Carolina University. Another relevant leadership position I have held was the Chair of the American College Counseling Association’s Professional Advocacy and Public Awareness Committee. I have been an active member of C-AHEAD including my two terms as Editor of The Journal of Humanistic Counseling, Education and Development and I continue to serve as a member of the JHCEAD Editorial Board. My research interests include client preferences for counselor role, culturally responsive counseling, and constructivist career counseling. I am currently coediting a book for C-AHEAD titled “Humanistic Perspectives on Contemporary Counseling Issues.” In addition, I am a member of a C-AHEAD task force charged with developing professional credentials for humanistic counselor educators and counseling practitioners.

Qualifications and reasons for seeking office

I have been an active member of the Counseling Association for Humanistic Education, and Development (C-AHEAD) for over eight years. A salient strength of C-AHEAD has been our Division’s participation in joint projects involving other ACA divisions. Along these same lines, I am interested in forming partnerships with other divisions for purposes of combining talents and resources in order to more effectively address important issues, develop new initiatives, and provide services to counseling professionals. Through my past involvement with C-AHEAD I am familiar with our Division’s involvement in social activism (e.g., promoting children’s rights) and charitable causes (e.g., the Empty Plate Project) and I fully intend to contribute my energies to continuing these vital traditions. Our current and past Presidents have actively engaged Division members through the use of technology. I intend to continue the practice of utilizing technological resources such as social networking sites, electronic publications, and webinars to attract new members and to enhance and maintain the involvement of current members. I have been actively involved in Executive Council meetings leading to the development of new forms of recognition for individuals who are making distinctive contributions as humanistic counselors, educators, and scholars. I intend to continue to promote these forms of recognition as a means of increasing awareness of C-AHEAD, and the important role of humanism in the counseling profession. Last, I am a member of a Division task force that is in the process of developing two national credentials: 1) the Certified Humanistic Counselor, and 2) the Certified Humanistic Counselor Educator. I plan to continue to contribute to the development and implementation of these credentials as a means of promoting awareness and implementation of humanistic practices among counseling professionals.

Governing Council Representative

Michael Walsh

Professional background and experience

I received my Masters in Rehabilitation Counseling from the University of South Carolina School of Medicine and my PhD from the University of South Carolina School of Education. I am a Licensed Professional Counselor (LPC) in South Carolina, a Certified Rehabilitation Counselor (CRC) and a Certified Psychiatric Rehabilitation Practitioner (CPRP). As a faculty member at the University of South Carolina School of Medicine’s Rehabilitation Counseling program, I am involved in teaching both traditional in-person classes as well as high quality distance education courses. I have spent some time researching the factors that are involved in effective distance education and have a strong interest in developing ways to bring humanistic educational principles into the process. As an active private practice clinician, I am always looking for ways to improve my clinical skills as well as my ability to enhance the relationship with my clients. I am currently at work on a number of writing projects having to do with effective education and clinical practice. I am also an active community leader, heading a nonprofit mental health agency for the past five
years. I would welcome the chance to bring my background and experience to the Governing Council on behalf of C-AHEAD.

Qualifications and reasons for seeking office
I have been involved with C-AHEAD since 2004 and am very excited to be a part of this organization. As a two-time president of this division, I am firmly committed to bringing awareness of humanistic practices to the counseling community. I also feel that I have built solid relationships with ACA staff members as well as members of other divisions. Thanks to the pioneering work of the C-AHEAD leaders before me, we have, in recent years, established collaborative relationships that will enhance our ability to thrive in years to come. I would very much like to have a chance to see some of those opportunities through and to foster new ones. In my opinion, there has never been a better time to take a humanistic approach to our clients and our students. I believe that in focusing on enhancing the relationship among people, we bring enhanced opportunity for growth. As Governing Council representative, I would very much appreciate the opportunity to work for the good of the division and to foster the relationships that will help us to be successful.

COUNSELORS FOR SOCIAL JUSTICE

President-Elect

Rhonda M. Bryant
Professional background and experience
I am a counselor educator at Albany State University in Albany, GA. I identify strongly as a counselor and have been involved with ACA for over 10 years. I hold a Ph.D. in Counselor Education from the University of Virginia and have counseled in community and K-16 settings. I currently hold the LPC credential in Georgia and the NBCC counselor and school counselor national certifications. Last year, I was awarded the O’Hana Award for promoting social justice in my community and the counseling profession. I have been on the leadership team of CSJ for the last three years and have served on various committees. I have published in ACA Journals including the Journal of Counseling and Development and Professional School Counseling. Currently, I am coeditor of the Activist newsletter, a publication of CSJ. I especially enjoy mentoring new counselor educators through the tenure process and volunteering with local school counselors.

Qualifications and reasons for seeking office
I have been involved with C-AHEAD since 2004 and am very excited to be a part of this organization. As a two-time president of this division, I am firmly committed to bringing awareness of humanistic practices to the counseling community. I also feel that I have built solid relationships with ACA staff members as well as members of other divisions. Thanks to the pioneering work of the C-AHEAD leaders before me, we have, in recent years, established collaborative relationships that will enhance our ability to thrive in years to come. I would very much like to have a chance to see some of those opportunities through and to foster new ones. In my opinion, there has never been a better time to take a humanistic approach to our clients and our students. I believe that in focusing on enhancing the relationship among people, we bring enhanced opportunity for growth. As Governing Council representative, I would very much appreciate the opportunity to work for the good of the division and to foster the relationships that will help us to be successful.

Selma D. Yznaga
Professional background and experience
Selma D. Yznaga is a counselor educator at The University of Texas at Brownsville. She earned her doctorate at St. Mary’s University in San Antonio, Texas in Counselor Education and Supervision. Her professional experience includes school counseling at the elementary and secondary school levels. She is currently tenured faculty at UTB. Dr. Yznaga’s research interests include immigration issues, acculturation, and ethnic identity development. She has presented extensively on culturally appropriate treatment of Mexican-descent students and clients, multicultural competencies, and ethics. Dr. Yznaga is a former cochair of the Texas Counseling Association’s Ethics Committee, and the School Counselor Issues, Advocacy, and Public Policy Committee. In 2007, she founded the Texas Counselors for Social Justice and recently completed a three-year term as the division’s director. Her passion for social justice and the counseling profession has been recognized by state and national organizations, including the Texas Counseling Association (Molly Gerold Award for Human Rights), the Texas School Counselor’s Association (Counselor Educator of the Year), and ACA’s Counselors for Social Justice (‘Ohana Award). Dr. Yznaga is a current appointee of the ACA Human Rights Committee and the National Implementation Planning Committee for the ACA 2011 New Orleans Project.

Qualifications and reasons for seeking office
Guided by the principles of equity, access, participation, and harmony, it is my desire to serve Counselors for Social Justice in the capacity of president. My goals as an advocate and an educator are simple: 1) to identify and enlist all individuals who value human dignity...
Geneva Gray

Professional background and experience

Education Ph.D - Counselor Education and Practice; Georgia State University Certification and Licensure LPC, NCC Recent Professional Experience Assistant Professor - Argosy University Atlanta Individual/Family Therapist for Children and Adolescents Clinical Supervisor ACES, SACES, CSI, IAAOC Chair, IAAOC Multicultural Addictions Committee Secretary, IAAOC CSI, Alpha Upsilon Alpha, Suprina-Turner

Qualifications and reasons for seeking office

I am honored and humbled to be nominated for President-Elect of the International Association for Addiction and Offender Counseling. I have been actively involved in IAAOC as a graduate student and professional member for the past five years. My experience began when Simone Lambert and Laura Veach encouraged me to participate in the graduate student carousel at ACA in 2005. It was this experience of mentoring that sparked my excitement and enthusiasm about IAAOC. Through support and encouragement from many of the executive council members, I’ve had the opportunity to serve as the Secretary and Chair of the Multicultural Addictions Committee. IAAOC is a strong organization dedicated to the advocacy, leadership, and prevention in the field of addiction and criminal justice. During my involvement in IAAOC, I’ve recognized a need for increased emphasis on diversity and advocacy in the addiction and criminal justice. As President of IAAOC, I plan to create mentoring programs to increase involvement of diverse populations in leadership positions within the association. I would also like to increase community agency counselors’ involvement in IAAOC projects and programs. Additionally, I would like to continue to collaborate with community programs to promote prevention, advocacy, training for the treatment marginalized populations with substance abuse and criminal justice problems.

Secretary

Keith Morgen

Professional background and experience


Qualifications and reasons for seeking office

I see IAAOC as a thriving and growing division. For the past two years I have served this exciting division as Chair of the Spirituality Committee, where I worked on building the spirituality programming within IAAOC that
included an ACA panel on spirituality in addictions, a special issue of JAOC on spirituality, and an upcoming chapter on 12-step spirituality in a major text on spirituality and religion in counseling. I am also developing ACA service experience with my recent appointment to the Research and Knowledge Committee. I see the role of Secretary as first and foremost assisting the President with the current agenda and goals for IAAOC. As a member of the IAAOC governing body the Secretary is one voice amongst the other officers, current, past and future IAAOC Presidents, committee chairs, and (most importantly) our members. I would work in any capacity to enhance the IAAOC membership experience for our professional and student members. IAAOC welcomed me to become as involved as I wished right from the start of my membership. IAAOC (and ACA) is my professional home. I would greatly appreciate the chance to serve the dedicated members of IAAOC as Secretary.

Governing Council

Todd F. Lewis

Professional background and experience
I hold a Ph.D. in Counselor Education and Supervision from Kent State University and am a Licensed Professional Counselor in North Carolina and a National Certified Counselor. I am a member of the American Counseling Association, the International Association for Addictions and Offender Counseling, the Association for Counselor Education and Supervision, and the Association for Assessment in Counseling and Education. I have held previous leadership positions as IAAOC President and Treasurer. I have twice been the recipient of the IAAOC Research Grant Award, as well as the Outstanding Research Award through IAAOC. My professional publications have primarily been in the areas of adolescent and collegiate substance use, motivational interviewing and its application to treatment of substance abuse and other addictions, and Adlerian models applied to drinking behavior. I hold an Advanced Statistical Studies - Social Sciences certificate from Statistics.com and am currently enrolled in their Clinical Trials Program for Advanced Statistical Studies.

Qualifications and reasons for seeking office
I am honored to be nominated as the Governing Council representative for the International Association for Addictions and Offender Counselors. I once again feel privileged to be associated with a great organization that is dedicated to the development and leadership of counselor educators, counselors, and counseling students who have an interest in addictions and offender issues. When I think of IAAOC, I immediately reflect upon the dedicated and hardworking professionals and leaders who have helped make it one of the top divisions within ACA. If I am fortunate enough to be elected Governing Council representative, I see part of my responsibility as continuing the positive developments of the past and helping to keep IAAOC leadership informed of the many exciting ways ACA is moving forward. I envision myself as an important communication link between IAAOC and ACA. It will be particularly important for IAAOC to have a voice in legislative matters, and I am dedicated to fulfilling this role. My experience as IAAOC President confirms that the Governing Council representative holds an important position in our leadership, offering key insights into the latest movements and trends within ACA. I pledge to honor my commitment to this important position should I be fortunate enough to be elected to it.

NATIONAL EMPLOYMENT COUNSELING ASSOCIATION

President-Elect

Tom Ayala

Professional background and experience
Education: PhD [Student], Organizational Leadership, The Chicago School of Professional Psychology; MA Counseling George Fox University; MS Interdisciplinary Studies, California State University, Stanislaus; Professional Studies, Industrial/Organizational Psychology, Oregon State University; Professional Studies, Management, Lincoln University, New Zealand

Affiliations: NECA — Dedicated to helping people prepare for, enter, understand and progress in the world of work through Legislative advocacy, establishing standards and guidelines, showcasing best practices and networking, ACA, Professional — a professional and educational organization dedicated to the growth/enhancement of the counseling profession. American Psychological Association — a scientific and professional organization that represents psychology in the USA. Nationally Board for Certified Counselors — an independent, voluntary, nongovernmental corporation established to advance credentialing of professional counselors. National Association for Rural Mental Health — focuses on rural people and associated mental health issues. Information Resource Management Association — a research-based organization dedicated to advancing concepts/practices of information resources management in postmodern organizations. Counselors for Social Justice — a community of counselors, who seek equity, an end to oppression, and injustice affecting social, cultural, and institutional systems.

Distinguished Recognition: HDR, Inc. National Pathfinder Award – Leadership Outstanding Service Award – Veterans Administration Roseburg Healthcare System, Oregon Lebanon’s Communities That Care; Volunteer of the Year 2009.

Qualifications and reasons for seeking office
The state of our economy at this time and the toll it is taking on the financial and mental health of our culture is astounding. As counselors, we strive to continue to address the many important related issues as they effect our clients. Nonetheless, reports indicate as dire as the economy is, those who are transitioning into new roles are said to be much happier. NECA is committed to continue to serve as a valuable resource for career development and employment counselors who work in the trenches with clients who are working through challenging transitions. As President of NECA I will focus on continuing the
NECA charter to address the many issues that face our hardworking counselors such as competence, self-care, the environment, discrimination, burnout and stress. Employee Assistance work, technology and employee rights. I work in private practice in rural mental health and employment counseling. I also serve the community as an organizational consultant. This experience allows incredible insight into the very issues that face NECA as an ACA Division and allow me the leverage to consult and collaborate with others to address the issues at hand. I believe every rural mental health clinician should be a member of NECA to stay connected to the issues they encounter every day and the valuable resources that enhance their helping skills.

**Treasurer**

**Michael C. Lazarchick**

**Professional background and experience**

I am a NECA past president and have served on your executive board for two decades. When I was your ACA governing council representative, I served on the financial affairs committee. I have been looking at the financial affairs of NECA for years and will ensure that we spend our money wisely.

**Qualifications and reasons for seeking office**

I am a licensed professional counselor, well versed in ethics, who will ensure the integrity of our finances.

**Trustee**

**Andrea Edelman**

**Professional background and experience**

I hold a Masters Degree in Education from the University of Maryland, am a Licensed Professional Counselor, a Certified Rehabilitation Counselor, and a Global Career Development Facilitator. My work experience spans 20 years during which time I have provided career and employment counseling to individuals 12-60 years old, including individuals with disabilities. My experience is comprehensive and includes employment with community based organizations, national organizations, health care, and educational institutions. I have provided individualized career counseling, researched, developed and implemented career and transition programs, directed and managed employment-related projects, both at the local and national level, and developed and maintained partnerships at all levels to build capacity and leverage resources. I have coauthored several book chapters, presented at local and national conferences, and provided training and consultation to a variety of employers including private employers, as well as Federal, State and local governments. I am a member of the American Counseling Association, National Employment Counseling Association, and the National Rehabilitation Counseling Association.

**Sharon McCormick**

**Professional background and experience**

Sharon McCormick has worked with corporate, Federal, higher education and nonprofit organizations in career coaching, career counseling, career development, career planning, human resources, human services, job placement, recruiting, staffing, teaching and training. Her Master's Degree is in Counseling. Sharon is a Master Career Counselor (MCC), a Certified Leadership & Talent Management Coach and a Certified Career Management Coach. She is a National Board Certified Career Counselor (NCC); a National Board Certified Counselor (NCC), a nationally Certified Professional Resume Writer (CPRW), a Distance Certified Career Counselor (DCC) and a Career Development Facilitator (CDF). An active volunteer in the community for 15+ years, she serves on a local Workforce Development Board, as an HR & Job Placement Consultant to the InStepp Employment Program, as a Career Counselor with Futures for Kids, and with other career and employment organizations. She developed and taught career and workplace classes at six colleges and universities including Duke University, Indiana University, Meredith College, and the University of North Carolina at Chapel Hill. She is a published writer and career author in national resume writing books.

**Qualifications and reasons for seeking office**

I have a broad-based background in counseling, human services, mental health, and substance abuse services. This includes in-home services, residential, outpatient and inpatient locations. I have worked with just about every client population as a counselor, and I served as a telephone crisis counselor volunteer for five years as well. I have served as a College Career Counselor, Social Worker for the home-based frail elderly, Counselor for a teen pregnancy grant, nursing home social work Department Head, Youth Home Counselor, Psychiatric Social Worker, Assistant Director of Psychiatric Utilization Review, as a Vocational Counselor, Family Counselor, Tutor, Staffing Specialist, Recruiter, Corporate career coach, Career Instructor, EAP Trainer, Director of Career Services, Federal Human Resources Specialist and business owner of a HR and Career Counseling firm for 15+ years. In addition, I have a wealth of experience in the counseling field both as an employee and as a volunteer, with 15+ years of volunteer experience. I value people that is how I demonstrate my commitment to the field. I would be thrilled to be a part of such a valuable organization and my goals would be to continue to drive forward the organization’s mission and vision for success.

**John Watters**

**Professional background and experience**

During my career I have been working primarily in the areas of recruiting, marketing, and general management. As an executive recruiter for DHR International and most recently with the Watters Group, I recruited executives for management, marketing, sales, finance, information technology, and human resource positions across a variety of industries. During my 14 years as a recruiter, my clients have included a wide
range of large multinational corporations as well as many small, midsize, and start-up companies. My marketing and management background was developed while working in the media industry for Knight Ridder Newspapers and the hospitality industry for the Jerrico Corporation where I was responsible for general and financial management, strategic planning, media sales, promotions, marketing and new product development. I received my Bachelor of Arts in Psychology from Florida State University and my Masters in Business Administration from the University of Miami. For three years I served as adjunct professor at the University of Central Florida where I taught marketing, advertising and retail management. I have completed the requirements for the Global Career Development Facilitator and am currently applying for the certification. I am a member of the National Employment Counseling Association and the National Career Development Association.

Qualifications and reasons for seeking office

When I was nominated for the NECA trustee board, I was frankly somewhat surprised since I am not a professional counselor. Then I realized that I could bring a perspective from my years of working as a headhunter and a business executive that might be useful to the organization. This became evident during my recent course work for the GCDF certification. My colleagues were counselors and I was a businessman. At first I felt out of place but as time went on, my contributions increased and I was able to provide a different approach and solution to many of the issues and problems facing those of us who work in career related fields. This was not a one-way street; I was able to gain a tremendous amount of insight for the counseling side of career development and the needs of the displaced counselor while working with professional counselors on a wide variety of topics. I guess what I’m saying is that the synergy that took place because of our different backgrounds was quite productive.

While my academic qualifications are not those of a professional counselor I feel my real world experience and consultive work over the years will enable me to contribute to the goals of the organization. I’m not a joiner by nature. In fact I try not to get involved with organizations unless I feel I can make a difference and will actually participate. The NECA is an organization that I feel I will be able to dedicate the kind of time required because it has a mission and purpose that I support. Whether I am elected to the trustee board or not, I want to thank you for letting me participate in the selection process and I will be glad to help in any way I can.

SOUTHERN REGION

Governing Council Representative

Annette P. Bohannon

Professional background and experience

I received my Ed.D. in Counselor Education am currently a high school counselor. My work experience includes assistant professor, part-time private practitioner, and education specialist. I am a LPC and NCC. Association memberships include ACA, ACC, ASCA, ACASR, ALCA, ALSCA, ALMHCA, and DKG International. I currently serve on ACA Executive Committee and as ACASR Representative to Governing Council. Professional service: offices in ACA at the regional, branch, division, and chapter levels. Awards and honors: recognition as ACASR Secretary-Treasurer, ACASR Chair, ALCA President’s Award, Beta State Achievement Award, ALCA Chapter VII Outstanding Member, Outstanding and Dedicated Volunteer, Russell Corporation Award-Special Area. Publications: Bohannon, A. P. (2009). Confidentiality. In American Counseling Association (Ed.), The ACA encyclopedia of counseling (pp. 65). Alexandria, VA: American Counseling Association. Jenkins, M. C., Friery, K., Bohannon, A. P., Kiser, J. D., and Kiser, T. R. (2001). Alabama achievers: Studies for character development. Livingston, AL: Alabama Counseling Association. Community Service: Sponsor, Chi Theta Chapter, Chi Sigma Iota; Coosa County Family Festival Committee and past Board Member Cheaha Mental Health Center. Grants received: ACA PPL FY 07 Legislative Grant, ACA PPL FY 07 Legislative Institute Attendee Grant, ALSDE Dependent Care Grant, and ALSDE Community Education Grant.

Qualifications and reasons for seeking office

I currently serve as Southern Region Representative to ACA Governing Council and am a member of ACA Executive Committee. My involvement as an active member in ACA began in graduate school. My service began in my state branch where I served as president, secretary, and treasurer. I have also been an officer at the division and chapter levels. I have 18 years experience in the counseling profession. As Southern Region Representative Governing Council, I would like to continue serving in that role for the purposes of advancing ACA’s work. As ACA moves forward, I believe I can work collaboratively and successfully with other ACA members and officers in our association’s advancement. Our association has a rich history and the future looks promising as we work together to advocate for our profession and our customers. We have been involved internationally for a while, and we are truly moving toward a global presence in the counseling profession. We are working toward unity and diversity within our association and the profession. Our association will always be changing and growing as we are committed to improving the quality of life for those we serve and our members. The work of Governing Council provides an important and valuable service. As Southern Region Representative to Governing Council, I commit to serving ethically and responsibly. I will serve as a representative with the interest of all members and customers in mind.

Jeff Siskind

Professional background and experience

Professional Experiences: Primarily in Seminole County, Florida. I have served as district Lead Counselor, having been a counselor at the elementary, middle, and high school levels. Other previous positions include: President of school district’s teacher association (full-

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time position for 2500 teacher-based employees); Teachers as Advisers Program Coordinator; Secondary School Teacher. Part-time positions: Private Practice; Adjunct Counselor/Instructor, Seminole State College and Rollins College/University of Central Florida graduate counseling programs. Education: Ph.D.; Ed.S., Counselor Education, University of Florida; M.Ed., Guidance/Counseling, Rollins College; B.A., Psychology; Social Studies Education, Florida State University Certification and Licensure: LMHC, LMFT, NCC, NCSC, School Counseling Certification Association Experiences: Chair, ACA-Southern Region; Executive Director, Florida Counseling Association (FCA) (16 years); President and Treasurer, FCA; President, Seminole County Counseling Association. Member, ACA Developmental School Counseling Committee and State Branch Task Force. Chair, Florida ACT Council. Pre-K Executive Cabinet Representative, Florida Education Association. Membership in a multitude of national/state divisions. Awards/Honors: ASCA Secondary School Counselor of the Year; ACA Government Relations Award; FCA Advocate of the Year; initial recipient of: Joseph Wittmer Distinguished Professional Award (University of Florida) and Alumnus of the Year (Rollins College Counseling Program).

Qualifications and reasons for seeking office

Having been elected and then serving as your Southern Region Chair, I am honored to be nominated for Southern Region Governing Council Representative by the state leaders of our respective Southern Region branches. As a candidate, I believe I offer diverse association experience, demonstrated leadership, and a collaborative working style that will assist our Governing Council in leading ACA toward our preferred future. In addition to my leadership positions in local, state, and regional counseling associations, I served as President, locally, and as Pre-K Executive Cabinet Representative, statewide, of another nonprofit professional association. My Executive Director role (16 years) of the Florida Counseling Association required a management rather than leadership viewpoint. These as well as other nontraditional ACA organizational experiences have afforded me invaluable perspective. Furthermore, I believe the recognitions I have received affirm my demonstrated leadership rather than my simply possessing previous association titles. If elected, my Governing Council member priorities would include: • Given the many association choices members now face, ACA must demonstrate the “value-added” of being an ACA member, especially to practitioners. • We must prioritize communicating the value of counseling to the public, especially to policy-makers. We must have a strong legislative voice. • ACA must promote the inclusiveness of counseling while fostering collaboration of divisions and regions. Branch development is imperative. • ACA is a business; the Governing Council must provide strong oversight, especially in regard to fiscal responsibility. • As our membership ages, it is critical that we grow and include new leadership. Although I’ve spoken of my experience, I believe I would provide the 15,000 members of our Southern Region states a fresh perspective on the Governing Council. Advancing our association is our collective responsibility. I would appreciate the opportunity to do my part by serving you as your Governing Council representative.

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In this upbeat, entertaining introduction to play therapy, Jennifer Baggerly uses puppets to help communicate the rationale, principles, and basic skills of play therapy. Each skill is demonstrated through clips of play therapy sessions with culturally diverse children. Skills shown include tracking play behavior, reflecting feelings, returning responsibility, showing encouragement, building self-esteem, facilitating understanding, and setting therapeutic limits. Includes Leader’s Guide with questions for reflection. Produced by Microtraining and Multicultural Development.

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Victor E. Bibbins Sr.
Past leader of AMCD, advocate for multiculturalism and beloved mentor

Victor E. Bibbins Sr., past president of the Association for Multicultural Counseling and Development (2000-2001), a division of the American Counseling Association, died Oct. 17 at the age of 63.

Bibbins, who lived in Chesterfield, Mo., and retired in 2009 from his position as chief student services officer of the Manassas campus of Northern Virginia Community College (NVCC), led a 40-year career of teaching, counseling, management and leadership in various capacities. A passionate cheerleader for multiculturalism in counseling, Bibbins coedited the book *Multicultural Competencies: A Guidebook of Practices*, published by ACA in 2003.

Daya Singh Sandhu, immediate past president of AMCD, reflected on his more than 10-year friendship with Bibbins. “Not only was Victor my close friend, but I also consider him my mentor,” said Sandhu, who coedited *Multicultural Competencies* with Bibbins. “It was Victor who encouraged me to run for the AMCD presidency. He supported me through guidance, encouragement and much-needed advice from time to time, even while he was facing his own serious health challenges. I would dare to say that he was one of the rarest persons I have met throughout my life. He was truly a man par excellence.”

Bibbins was “charismatic, energetic and full of wisdom and compassion. Victor was truly warm, kind, humorous and a people person,” Sandhu said. “Amidst all the challenges, he always had a great smile on his face. He greeted life, regardless of if it brought happiness or sorrows.”

Bibbins, the youngest of six children, was born in Detroit in 1947. After high school, he went on to earn his bachelor’s and master’s degrees in secondary education and counseling from Western Michigan University, followed by a doctorate in educational psychology from the University of Michigan. Upon graduating with his master’s, Bibbins’ first job was as a counselor in the Detroit public school system. He moved on to become assistant director for Wayne State University’s Upward Bound Program, where he had the opportunity to travel to the 1972 American Personnel and Guidance Association (now ACA) convention. AMCD was born at that conference, although under a different name, and Bibbins joined on the spot.

Sandhu called Bibbins a “shining star” in AMCD. “He was passionate about the issues that affect minorities, the poor and the oppressed. As he was raising during the civil rights movement, Victor was a great advocate and courageous activist in promoting equity and social justice. . . For almost 40 years, he remained a dedicated and brave hero for the cause of the oppressed.”

Bibbins leaves behind a powerful legacy within AMCD. One of Bibbins’ favorite catchphrases, “differently the same,” continues to permeate the ranks of AMCD, according to Sandhu. “He was truly a loving person, a gentle giant, a visionary leader and an innovative and invigorating person who took AMCD to the highest zenith during his presidency through dedication, hard work and thoughtfulness. Victor, my friend, will always be sorely missed but never forgotten in the golden pages of AMCD history.”

Cirecie West-Olatunji remembers Bibbins pulling her aside for a chat shortly after she was appointed to her first academic position at Xavier University of Louisiana. “He explained why I should run for a national office, why it is important to serve the profession. I was not easily convinced, and it took some lengthy discussion,” said West-Olatunji, associate professor and mental health track coordinator in the Counselor Education Program at the University of Florida. “However, Victor’s easygoing style and sense of humor helped me to see things more clearly and to see the value in professional service.”

Bibbins was a mentor to West-Olatunji as she served in AMCD, first as vice president of African American concerns and then as president of the association. “Looking back, I realize that I have systematically followed Victor’s advice that he offered way back when,” said West-Olatunji, now serving as AMCD’s representative to the ACA Governing Council. “Even my interest in developing international outreach initiatives, beginning with southern Africa, was an idea rooted in Victor’s insight and vision for social justice in counseling. You see, Victor had led an AMCD-sponsored trip to South Africa several years prior to my initial trip in 2007. He believed that AMCD should serve as a leader, as a champion for social justice and advocacy ideals, in partnership with other ACA divisions as well as other professional organizations.”

“In sum, Victor will always be a compass for AMCD and ACA,” West-Olatunji said. “His groundedness in knowing that ‘it will all work out,’ his faith in the profession and his sense of integrity founded upon his identity as a strong African American male are a guiding light for all of us. His legacy to counseling is a bright, burning torch. May it stay lit for generations of counselors to come. I will truly miss his warmth, his wisdom and his laughter.”

Among Bibbins’ other professional accomplishments were serving as director of the employee assistance program for the Washington, D.C., Metropolitan Police Department, as assistant vice chancellor for student affairs at Elizabeth City State University, as assistant to the president of Edward Waters College and as dean of student services at NVCC. In his role as chief student services officer at NVCC, Bibbins developed and taught an innovative e-learning student success course for students pursuing careers in teacher education. He also led students and faculty on a study tour in South Africa.

Bibbins was actively engaged in creating policy to advance theological education as a member of the Board of Trustees of Payne Theological Seminary in Wilberforce, Ohio. He was also a member of Metropolitan African Methodist Episcopal Church, the Cathedral of African Methodism in Washington, D.C.

Bibbins is survived by his wife, Odessa B. Bibbins; three sons, Victor Jr., Issa and Immanuel; a daughter, Shamari; three grandchildren, Kason, Marcia and Christian; four sisters, Alice, Nellie, Leila and Karen; and his brother, Keith.

A memorial service was held Oct. 23 in Washington.
The Substance Abuse and Mental Health Services Administration (SAMHSA) honored writers and producers of hit film and TV productions at the 2010 Voice Awards, held Oct. 13 at Paramount Studios in Los Angeles, for increasing public awareness of mental health and substance use issues. Emmy Award-winning actor Hector Elizondo and Academy Award-winning actor Louis Gossett Jr. cohosted the fifth anniversary event, which this year spotlighted storylines illustrating the unique challenges facing military families.

The American Counseling Association once again served as a program partner for SAMHSA’s Voice Awards. ACA President Marcheta Evans and ACA Executive Director Richard Yep attended the awards ceremony to show ACA’s support for efforts that give a voice to those with mental health problems.

“To be able to experience the Voice Awards is an awesome experience and opportunity for ACA,” Evans said. “It allows us to see the positive ways in which mental health issues are being portrayed in the media. A lot of times, we have a tendency to focus on the negative, and we miss the positive ways that others are trying to portray the struggle some people endure in working through their mental health needs. The stories covered not only the needs of the individuals needing direct services but how their struggles directly impacted the support system and family members as well.

“Another positive outcome of ACA’s participation was the opportunity to connect with other mental health associations and providers. I had the wonderful opportunity to meet staff from the Ad Council, the National Association of Social Workers and others, which resulted in potential opportunities for further collaborations.”

“ACA’s ongoing support of the Voice Awards is just one more way we help to decrease the stigma of mental illness and reinforce the positive and selfless work of mental health professionals,” said Yep, who served on one of this year’s Voice Awards review panels. “Those in the entertainment industry who receive recognition with a Voice Award are shining examples of how this important issue can be portrayed in a dignified and respectful manner. I hope that their industry peers take note of these achievements.”

Among the array of actors from nominated programs who presented awards at the event were America Ferrera of The Dry Land, Peter Krause of Parenthood, Julia Ormond of Temple Grandin, Sandra Oh of Grey’s Anatomy, Elmo of Sesame Street and Marc Indelicato and Tony Plana of Ugly Betty.
SAMHSA is grateful to the writers and producers of these stories for bringing national attention to the plight and courage of people with behavioral health conditions and their families,” said SAMHSA Administrator Pamela S. Hyde. “The outstanding works we honor tonight can have a profound impact and advance public understanding of mental illnesses and addictions. SAMHSA is also pleased to recognize national consumer leaders with Voice Awards. These individuals have walked the walk and shared the story to help others find their way. Thanks to these leaders, more people know the power of recovery.”

This year’s awards program recognized the countless contributions of America’s military men and women and spotlighted the behavioral health issues they face as they return home from the battlefield to their communities and families.

Awards were also given to outstanding leaders in the behavioral health recovery movement who promote the social inclusion of people with behavioral health problems and exemplify the real possibility of recovery.

The 2010 Voice Awards entertainment winners were:

Television category
- Army Wives (Lifetime) for a series of episodes addressing how post-traumatic stress disorder and traumatic brain injuries can affect military members and their families
- Desperate Housewives (ABC) for the episode “How About a Friendly Shrink?” addressing inpatient psychiatric care
- Grey’s Anatomy (ABC) for the episodes “Good Mourning” and “Goodbye” addressing the effect of post-traumatic stress disorder on military families
- Mental (FOX) for the episode “Lines in the Sand” addressing the effect of post-traumatic stress disorder on military families
- Mercy (NBC) for the episode “Pulling the Goalie” addressing the effect of post-traumatic stress disorder on military families
- Parenthood (NBC) for the episodes “Pilot,” “Man Versus Possum” and “The Deep End of the Pool” addressing Asperger’s syndrome
- Temple Grandin (HBO) for addressing autism

Film category
- Adam for addressing Asperger’s syndrome
- The Dry Land for addressing the effect of post-traumatic stress disorder on military families
- Precious for addressing depression

Documentary category
- Coming Home: Military Families Cope With Change (Sesame Workshop) for addressing the effects of post-traumatic stress disorder and traumatic brain injury on military families
- No Kidding, Me Too! for addressing the effects of clinical depression, post-traumatic stress disorder, bipolar disorder, and attention-deficit/hyperactivity disorder on military families
- This Emotional Life (PBS) for addressing post-traumatic stress disorder, depression and anxiety and including their effects on military families

In addition, former First Lady Rosalynn Carter was honored with the SAMHSA Special Career Recognition Award for her work in championing mental health awareness. Carter’s 40-year campaign to improve the mental health system and to educate American families, including military families, about behavioral health has reduced prejudice and discrimination and encouraged more people to seek recovery.

A Lifetime Achievement Award was presented to Moe Armstrong of West Haven, Conn., for his leadership and contributions to the behavioral health recovery movement. Armstrong first experienced and was hospitalized for psychiatric symptoms at age 21 while serving in the Vietnam War. He later became an advocate for people with mental health and substance use issues and founded the Vet-to-Vet Program.

The peer-support model helps veterans to deal with behavioral health issues while supporting resiliency and recovery. The program now operates in veterans centers in 39 cities around the country.

Consumer Leadership Awards were bestowed on Gayle Bluebird of Gainesville, Fla.; Fredrick Frese of Akron, Ohio; Clarence Jordan of Nashville, Tenn.; LaVerne Miller of Delmar, N.Y.; and Janet Paleo of San Antonio. The Young Adult Leadership Award was presented to Lorrin Gehring of Provo, Utah. All of these individuals were recognized for their work to promote community acceptance and support in facilitating recovery for people with mental illness.

“My favorite part of attending the Voice Awards was getting to hear the stories of these awardees,” Evans said. “To hear what they have overcome to be where they are today was overwhelming. It made you walk away with a smile and a feeling of hope and joy in the resiliency of man.”
The purpose and benefits of national certification

California’s passage in 2009 of a state licensure law, making it the 50th and final state to pass such legislation, represented a hallmark for the counseling profession. This year, we have witnessed a major development in the recognition and use of professional counselors within the U.S. Department of Veterans Affairs (VA). Although we have accomplished much, important work is yet to be done. It is crucial that the counseling profession protects its achievements and continues to develop to meet the growing needs of citizens. One way to ensure the profession's success is to maintain the National Certified Counselor (NCC) credential. Not only is it necessary for the continuation of a single set of standards for certification in the profession, but it is also beneficial to the individual NCC.

Efforts such as the ones to achieve state licensure have shown it is most effective to have individual professionals, such as NCCs, as well as counseling organizations involved. In fact, it is critical to have the cooperative effort of both practitioners and counselor organizations calling for change. The National Board for Certified Counselors was created in 1982 to provide a register of counselors who meet profession-defined and appropriate requirements for practice. NBCC provided data to legislators about the numbers of certified counselors in specific areas, and by demonstrating this, the need for licensure was proved. Membership and professional accreditation organizations established other critical components that legislators look for when considering licensure or regulation. Yet, it is the involvement of local counselors that is uniquely able to provide experiences that illustrate how the professional data connect to serve the needs of state residents.

Even with the collaborative efforts between counselor organizations and individual counselors, it took more than three decades (34 years to be exact) for all 50 states (as well as Puerto Rico, Washington, D.C., and Guam) to achieve state licensure for counseling. Although this seems like a long period of time, it is consistent with the amount of time it took other mental health professions. For example, it took psychology 32 years and social work 47 years to achieve the same task.

NBCC, along with countless other individuals and organizations, has pushed and continues to press for the recognition of professional counseling at the state and national levels. Beyond the efforts to establish licensure laws and to include counselors in the VA, some examples of ongoing pushes include recognition of counselors as Medicare providers and the removal of referral and supervision requirements for counselors in TRICARE.

Now more than ever, it is imperative that counselors maintain their NCC designation. This is beneficial both to the profession and the individual NCC. Professional counselors can have a profound political effect because we know how to communicate effectively and possess extensive knowledge of the profession. With more than 45,000 NCCs currently certified, NBCC’s federal and state lobbying power is strong, and by working together, we can achieve necessary changes. However, counselors must remain active and communicate to their public officials how specific legislation impacts counselors’ ability to provide services to the public. This means we must remain certified if we want our voice to be heard.

It is important to note that state licensure boards were created to implement the laws passed by local governments, not to advocate for the profession. Rarely can they take active roles in advocacy matters. Certification fees allow us to advocate for counselors at the state and federal levels. This is a benefit — perhaps one of the most important — of being an NCC. Collectively, NCCs can achieve recognition at multiple levels. We are working with you and for you.

In addition to major advocacy efforts, there are many other benefits that come with being an NCC. These benefits include:

**Portability:** The NCC credential travels with the individual from state to state.

**Marketability:** When competing for jobs with other master’s-level professionals, national certification is a voluntary distinction that can set you apart from the rest. Certificants demonstrate professional identity and dedication to continued skill development and adherence to ethical standards. NBCC also offers specialized certifications such as the Master Addictions Counselor, National Certified School Counselor and Certified Clinical Mental Health Counselor to further distinguish you as a professional.

**Fair Access Coalition in Testing (FACT):** NBCC is a founding member of FACT, an organization created when professionals in certain states faced cease-and-desist orders from psychology boards regarding their use of testing instruments. Details are available at [fairaccess.org](http://fairaccess.org).

**Institute for Personality and Ability Testing Inc. (IPAT):** NBCC collaborates with IPAT to enable NCCs to purchase discounted testing instruments, such as the 16PF.

**International involvement:** Counseling in the United States has just achieved a milestone, but internationally, it is still in its infancy. In fact, research shows that more than 450 million people suffer from mental health issues, and in many places, there are no resources. NBCC International, a division of NBCC, partners with the World Health Organization and UNESCO (the United Nations Educational, Scientific and Cultural Organization) to provide access to mental health services for remote and underserved populations. This is accomplished through the Mental Health Facilitator (MHF) program. To date, NBCC-I has trained approximately 300 MHFs and 174 MHF trainers around the world. For more information on this program, visit [nbccinternational.org](http://nbccinternational.org).
**Psychology Today:** This past year, NBCC partnered with Psychology Today to bring services to our certificants. The first is a free trial of the Therapy Directory. The other is a discounted subscription to the magazine. We also created a way to gain continuing education credits for reading selected articles and taking an assessment. For details, go to nbcc.org and click on the Psychology Today icon at the bottom of the page.

**The Professional Counselor: Research and Practice (TPC):** NBCC will launch a new academic journal this year with the goal of creating an online resource that will appeal to NCCs around the world while also speaking to counselor educators, practitioners, graduate students, researchers, supervisors and the general public. Expect the first edition in late 2010. For details, go to nbcc.org and click on the TPC icon at the bottom of the page.

**Low-cost liability insurance:** NBCC offers, through Lockton Affinity, reasonable insurance that is available to all graduate students and NCCs. Rates range depending on location and specialty, but you can obtain an instant, free quote 24 hours a day without providing personal information. For details, go to nbcc.org and click on the Lockton icon at the bottom of the page.

These are just a few of the many benefits of being an NCC. Above all, the NCC designation identifies that a counselor has met and maintains exceptional professional standards. This propels the counseling profession forward and provides collective strength to carry us through the upcoming decades. By becoming and remaining an NCC, you can be a part of the future of counseling.

I don’t like the idea that we are underserving those we have committed to serve. What can we do to make sure we meet their needs? There are no easy answers, but I know you are committed to being the best possible counselor you can be. I’m asking you to survey your work setting to see if you can identify groups that might be underserved. We sometimes get so caught up in doing our jobs that we lose sight of why we started on this career path in the first place. I know you are only one person, but remember the impact you have on the future of all those you serve. You are the most important tool you take into the counseling session. You are that change agent. You are the one who can make the difference, just as you have already done so many times in the past.

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Jolie A. Long is the executive projects coordinator for NBCC. Kristi McCaskill is NBCC’s director of professional advocacy and ethics.

Letters to the editor: cti@counseling.org
ACCA expands online resources

Submitted by Brian Van Brunt
brian.vanbrunt@wku.edu

The American College Counseling Association recently held its national conference in St. Louis with more than 300 attendees. A special thanks to Sylvia Shortt for coordinating this Herculean effort!

ACCA is excited to tell you about some of our new online resources. We have developed a members-only section on our website (collegecounseling.org/forum) that provides excellent resources, presentations, handouts, syllabi and articles available for download. Did you miss our conference in St. Louis? Fear not, all the presentation handouts are uploaded there. Are you an ACCA member who needs access to the forum? E-mail brian.vanbrunt@wku.edu or melissa.nard@sru.edu, and we will be happy to assist you.

We also have an active electronic mailing list that provides consultation and information to members. This is a closed e-list and is only available to ACCA members. The e-list is currently being managed by MJ Raleigh (mraleigh@smcm.edu). It is important to note that this e-list is different from the online forum on our website because this is a common area of confusion.

Our next online seminar (in partnership with PaperClip Communications) will be offered by Brian Van Brunt and attorney Carolyn Wolf and titled “Parent Involvement: Five Legal and Practical Issues When Including — and Not Including — Parents in Higher Education.” The program will include several case studies and opportunities for interactive sharing and dialogue about how to include parents in their students’ education and ways to address and facilitate parents in the “letting go” process. Join us as we address how to better manage parents who are upset, emotional, confused or frustrated as they transition into their new role.

This presentation will be offered live on Feb. 15 from 2 to 3:30 p.m. Eastern time and is also available for purchase on CD. ACCA will offer CEUs for this event, either live or on CD. For more information, visit paper-clip.com or collegecounseling.org. As always, a large portion of the earnings from the online seminars goes back to ACCA to increase membership benefits and to keep our membership costs low.

AACE seeks journal editor

Submitted by Dale Pietrzak
dale.pietrzak@wst.edu

The Association for Assessment in Counseling and Education is seeking applications for the position of editor of the journal Measurement and Evaluation in Counseling and Development. The journal is a national, peer-reviewed publication with a readership composed of counselors, educators and other professionals interested in providing leadership, training and research in the creation, development, production and use of assessment and diagnostic techniques. Its mission is to promote and recognize scholarship, professionalism, leadership and excellence in the development and use of assessment and diagnostic techniques in counseling.

The appointment of editor is a three-year term beginning July 1.

Appointment is conditional upon the following qualifications:

1. Experience as an editorial board member of a professional publication or similar experience (associate editor or editor of another publication)

2. A record of scholarly publications in refereed journals

3. Demonstrated expertise in assessment and research methods (quantitative, qualitative, SSRD, etc.)

4. An understanding of and commitment to the mission of AACE, including AACE membership and involvement if selected

Preference will be given to those with a history of involvement with AACE/ACA-affiliated organizations.

Interested individuals should submit formal application materials by Jan. 10. Materials should include a current curriculum vitae, a complete list of publications and reprints of no more than five of the applicant’s most significant publications, a statement of vision for the editorial direction for the journal and a statement from an administrator of the applicant’s institution or organization describing support for the appointment (if applicable). Reviews of the candidates will begin Jan. 10 and continue until filled. The appointment will be announced as soon as possible, with the editor-elect expected to begin working with the current editor approximately March 1 to facilitate the official transition on July 1.

A verification of receipt will be sent within 48 hours of receipt. Materials should be submitted electronically (Word or PDF) to Dale Pietrzak, AACE member-at-large of publications, at dale@drpietrzak.com.

NCDA rolls out new training curriculum

Submitted by Deneen Pennington
dpenm@ncda.org

The National Career Development Association will launch a new training curriculum titled “Supervision for Career Development Practitioners” in early 2011. This curriculum was developed through a joint collaboration with the Japan Career Development Association. This internationally piloted curriculum is intended to be the next step for those who have completed the Career Development Facilitator Training or who may have experience in the career development field but no formal training in overseeing employees.

The curriculum will be a 50-hour program delivered in a blended approach. Modules will be delivered via e-learning, as well as conducted face-to-face. NCDA
is honored to have Sandra Manoogian as the author of the curriculum. Manoogian is completing her doctorate at Oakland University and has extensive experience with supervision. Judith Hoppin has also served as contributing editor and brings years of curriculum development experience to the project. Hoppin was an original author of the Facilitating Career Development training curriculum when the initiative was started in the early 1990s.

An April training is scheduled, and additional quarterly offerings will be planned for 2011 and beyond. Watch the NCDA website at ncda.org for more news on this exciting new program.

ASERVIC offers recap of fall board meeting

Submitted by Jennifer R. Curry jcurry@lsu.edu

The Association for Spiritual, Ethical and Religious Values in Counseling Executive Council and Board had a productive fall meeting. We reviewed our bylaws, planned ACA Annual Conference events, worked on finding a hotel location for the 2012 ASERVIC Conference in New Mexico, solidified pertinent information for the journal editor search and discussed specifics of the upcoming ASERVIC spiritual journey. The meeting provided a good forum for the board to establish long-term goals and to begin strategic planning for upcoming initiatives.

Members interested in viewing bylaw changes or the ASERVIC event schedule for the ACA Annual Conference should visit our newly updated website at aservic.org. We would like to give special thanks to our webmaster, Daniel Gutierrez, for his ongoing efforts to improve the site for our members.

In addition, we are in the process of initiating our first spiritual journey. The spiritual journey will be a 12-day visit to England and Scotland highlighting sites of historical and spiritual significance. For more information about the spiritual journey, contact ASERVIC President-Elect Mark Young at myoung@cfl.rr.com.

NECA offers online certification and Day of Learning

Submitted by Kay Brawley kbrawley@mindspring.com

As we move into the second decade of the 21st century, career counseling is an occupation in high demand. Those skilled in professional employment counseling are promised a long line of customers. Whether you work in a workforce development center, a community-based organization, an executive search firm or operate your own private practice, completing the “Working Ahead, Moving Forward” Global Career Development Facilitator (GCDF) training will dramatically increase your effectiveness.

This online GCDF curriculum, created by Kay Brawley of the National Employment Counseling Association and Roberta Neault of Life Strategies Ltd., gives 24/7 access to a substantial learning opportunity leading to certification from the Center for Credentialing and Education (ccc-global.org/home). Graduates send a clear message about competence to potential employers and customers.

The lead instructor for the next GCDF course, beginning Feb. 15, is Michael Lazarchick, who has 35 years' experience providing individual counseling and facilitating group discussions. A true employment counseling expert and a certified online instructor, Lazarchick offers students a wealth of knowledge, and his graduates will always have access to his advice and counseling. For more information, contact Kay Brawley at kbrawley@mindspring.com or register online at employmentcounseling.org.

Lazarchick has a reputation for inspirational public speaking and has researched, written and delivered hundreds of training seminars. He entertains while translating complex issues into an easy-to-understand, practical format. He will be speaking live at NECA’s Day of Learning, March 25, during ACA’s Annual Conference, with an impressive array of colleagues, including: Roberta Neault, British Columbia; Spencer Niles, Center for the Study of Career Development and Public Policy, Penn State; Carolyn Greer, Texas A&M; Tom Ayala, People Solutions LLC, Oregon; Bill Fenson, Fenson Counseling, Dallas; and Kimberly Key, Encompass Work & Family, Austin, Texas.

Presentations run from 11 a.m. to 6 p.m. with topics such as bioenvironmental counseling solutions, hope, strategies after long-term unemployment, life-span-focused treatment, crises leadership and holistic solutions for harnessing resiliency. Join us if you have clients whose mental well-being would be greatly enhanced if a truly worthwhile job became part of their reality. For more information, visit employmentcounseling.org.

WCA announces 2010 award winners

Submitted by Janet de Vries jdevries@caspercollege.edu

The Wyoming Counseling Association presented the following four awards at its annual fall conference. Lance Goede, the “lone ranger” counselor at Central Wyoming College (CWC) in Riverton, received the Outstanding Service Award. He serves on the Wyoming Mental Health Professionals Licensing Board representing licensed professional counselors. Goede started his career as the housing director at CWC before moving into the counseling position, where he serves on the college's behavioral intervention team.

Richard Hannon, counselor at Cody's Livingston Elementary School, received the Richard R. Means Elementary/Middle School Counselor of the Year Award. Hannon's educational career spans more than 30 years, including working as a teacher, administrator and school counselor.

The Wyoming Mental Health Professions Licensing Board was presented with the Garth Shanklin Exemplary Practices Award for a mental health organization providing outstanding public service for nearly 25 years. It is one of the nation's earliest and most effective legislatively mandated, comprehensive omnibus bodies to safeguard the health, safety and welfare of its citizens. It ensures that those individuals licensed or certified to provide mental health services in Wyoming are appropriately qualified.

Veronica Skoranski received the F.L. Sievers Human Service Award, which recognizes an individual who has made a significant contribution to the field of human services. Skoranski serves as the executive director of the Mental Health Professions Licensing Board, which she has mentored since its inception. She and her staff provide full administrative support for 17 boards.
COMING EVENTS

ASERVIC Spiritual Journey
May 11-22
England/Scotland

The Association for Spiritual, Ethical and Religious Values in Counseling is pleased to announce its first Spiritual Journey—a 12-day adventure in England and Scotland visiting areas of religious, spiritual and cultural significance. Highlights of the guided tour include stops in London, Glastonbury, York and Edinburgh. Participants will have the opportunity to visit many historical sites that signify the enduring spiritual legacy and rich religious diversity England has to offer. For more information, contact ASERVIC President-Elect Mark Young at myoung@cfl.rr.com.

FYI

Call for journal editor
The Association for Assessment in Counseling and Education is seeking applications for the position of editor of the journal Measurement and Evaluation in Counseling and Development. The journal is a national, peer-reviewed publication with a readership of counselors, educators and other professionals interested in providing leadership, training and research in the creation, development, production and use of assessment and diagnostic techniques. Its mission is to promote and recognize scholarship, professionalism, leadership and excellence in the development and use of assessment and diagnostic techniques in counseling. The appointment of editor is a three-year term beginning July 1. For more information, visit theacaonline.com/MECD_Editor.pdf.

Call for submissions
The Australian Counselling Association 2011 National Conference, to be held Nov. 12-13 in Melbourne, Australia, invites abstract/paper submissions in Word format of between 500 and 1,000 words providing a brief outline of your proposed paper/workshop. Specialty subjects in relation to research, counseling, psychotherapy, guidance, youth, family, relationships, elastic brain and modalities are encouraged. Abstracts are for 90-minute workshops and papers for 30-minute presentations. Include the title of the presentation, a brief bio of qualifications and experience, audio-visual requirements and full contact details. Submit by Dec. 30 via mail to ACA, P.O. Box 160, Grange QLD 4051, Australia or via e-mail to philip@theaca.net.au. Applicants will be notified by Jan. 13.

Call for proposals
The 2011 International Association for Counselling Conference, themed “No Nation Left Behind: Challenges and Opportunities of Counselling and Education for All,” will be held in Montego Bay, Jamaica, June 13-17. IAC invites papers in the following strands: counseling for educational opportunity with children, young people and adults; counseling for employment and career opportunities; promoting peace and human rights; counseling for educational access and equity; and counselling and HIV/AIDS education. Abstracts should be limited to 250 words. Please include the following: paper title; name, organization and qualifications; professional counseling membership; audio-visual requirements; and name, address, e-mail and daytime and cell phone numbers, including country and area code. Submit abstracts by Dec. 31 to angela.gordon@swinmona.edu.jm.

Call for submissions
The Journal of Counseling & Development invites submissions for a special section focusing on the prevention and treatment of eating disorders. Interested scholars and practitioners are invited to send proposals of original manuscripts in the following areas: manuscripts that describe and provide support for primary prevention programs in schools and communities or for secondary prevention programs for groups at highest risk for eating disorders, and manuscripts that describe and provide support for best practices in the treatment of eating disorders. Manuscripts that address the unique treatment needs of diverse client groups are strongly encouraged. Submit your proposal to Laura Choate, guest editor, no later than Dec. 15. For more information regarding the preparation of proposals, e-mail Laura Choate at lchoate@lsu.edu.

Call for proposals
The South Carolina Counseling Association will be hosting its 47th Annual Conference Feb. 3-5 at the Marriott Resort at the Grand Dunes in Myrtle Beach. Themed “South Carolina Counselors: Agents of Change,” the conference will be loaded with great workshops on numerous topics related to mental health. We are still accepting proposals for workshops. CEUs for workshop attendance will be available. For more information, visit scounselor.org or contact David Scott at dscott2@clemson.edu.

Call for submissions
Contemporary Psychotherapy is a free international e-journal for counselors and psychotherapists of all modalities. With the professional community of psychotherapists and counselors in mind, Contemporary Psychotherapy aims to be progressive, inquiring and creative; to encourage interactive debate with its international readership; and to address, rather than avoid, the possibly contentious. We are seeking authors interested in submitting articles of up to 2,500 words on all therapeutic issues. The spring 2010 issue is available at contemporarypsychotherapy.org. For more information, e-mail Werner Kierski, editor-in-chief, at editor@contemporarypsychotherapy.org.

Bulletin Board submission guidelines
Items for the Counseling Today Bulletin Board must be submitted via e-mail to lbhallcross@counseling.org with “Bulletin Board” in the subject line. Limit submissions to 125 words or less. Non-calendar items will be published for a maximum of three consecutive months.◆
ACA invited to present at TRICARE symposium

American Counseling Association Chief Professional Officer David Kaplan was an invited panel member at an Institute of Medicine (IOM) symposium, “A Quality Management System for Licensed Mental Health Counselors and Other Behavioral Health Professionals in the Military Health System,” held Oct. 13-15 in Washington, D.C. The symposium was held to build on recommendations made in the IOM report “Provision of Mental Health Counseling Services Under TRICARE.” ACA, along with the Council for Accreditation of Counseling and Related Educational Programs and the National Board for Certified Counselors, previously provided testimony for this critical report that unequivocally recommended independent practice status for mental health counselors in TRICARE, the health care system for active and retired military personnel and their families.

At the recent IOM symposium on TRICARE, ACA was asked to speak on scopes of practice in the civilian and military health systems. Kaplan, with materials prepared by ACA Director of Public Policy and Legislation Scott Barstow, provided evidence that diagnosing and treating mental disorders is well within the scope of practice of licensed counselors. He also emphasized that TRICARE scopes of practice and privileging should be based on the competency of the individual provider rather than the particular license held (for example, counseling, psychology, social work, or marriage and family therapy).

The ACA PowerPoint, as well as 18 other presentations and the symposium’s complete agenda, can be accessed through the IOM website at iom.edu/Activities/MentalHealth/TRICAREMentalHealth/2010-OCT-13.aspx. Additional information about the symposium will be provided in an upcoming Washington Update column in Counseling Today.

Experts assess efforts to rebuild Iraq’s behavioral health care system

From Oct. 19-21, the Iraqi Cultural Center in Washington, D.C., hosted six teams of behavioral health specialists from Iraq who spoke about their efforts to strengthen Iraq’s behavioral health care system. Their work is part of a six-year partnership between the Iraqi government and the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) to rebuild and expand Iraq’s mental health services capacity and to improve services to special populations in the United States.

Since 2004, the Iraq-SAMHSA Partnership on Behavioral Health has helped Iraq reestablish its behavioral health service system by sponsoring planning conferences and enabling Iraqi behavioral health leaders to visit U.S. host sites that practice interventions which the Iraqis want to implement in their country.

The Iraqi and American presenters at the symposium agreed that, in general, this partnership, as well as a similar one with the British government, has helped the Iraqi Ministry of Health become increasingly able to provide a wider array of innovative mental health services well suited to its communities. In particular, Iraqi mental health providers are developing greater insights and skills in providing help to those with post-traumatic stress disorders and other serious psychological conditions.

The symposium also revealed that the partnership has greatly benefited U.S. participants as well, providing them with a much better understanding of how to effectively address the needs of refugees and immigrants from Iraq and other culturally similar countries. The knowledge and skills gained also hold tremendous promise in terms of treating trauma-affected U.S. troops returning from Iraq and other areas of conflict.

“This extraordinarily successful cooperative venture has yielded important new perspectives of how trauma and its many behavioral health consequences can be successfully treated,” said SAMHSA Administrator Pamela S. Hyde. “This insight promises to help free millions of people suffering from the devastation of exposure to violence and other forms of trauma from lives of despair to lives of hope and fulfillment.”

ACA unveils CE Connection

ACA has been rolling out many new opportunities for its members to earn continuing education credits. Now ACA members will be able to see all of the CE credit options in one place — CE Connection, an e-newsletter that will be delivered monthly to all members for whom ACA has an e-mail address.

In the e-newsletter, CE offerings will be organized into categories that make it easy to find information on opportunities to earn CE credit through ACA. For example, if you want to find the program with the highest number of CE credits, visit the section that breaks out the program by number of credits. If you want to find a program on a specific topic, take a look at the breakdown by topic.

You can earn CE credit in many ways through ACA, including taking online courses; reading a book, book chapter or journal article; reading featured Counseling Today articles and taking the CT Learning test (formerly called JournaLearning); and, our newest offering, listing to ACA podcasts. In addition, attendees at the ACA Annual Conference & Exposition in New Orleans in March can earn as many as 38 CE credits in a matter of days.

Whatever medium you choose, the price per CE credit through ACA is the same: $20 per credit for ACA members and $30 per credit for nonmembers.

In addition, all ACA members are eligible for the free CE of the month opportunity. For more information on the free CE, e-mail FreeCEoftheMonth@counseling.org or call 800.347.6647 ext. 222.
Under the Radar

1. The U.S. Census began counting biracial or multiple heritage people for the first time in:
   - 1910
   - 1960
   - 2000
   - 2010

2. The student group created by Derrick Paladino at Rollins College to serve multiracial clients was given what name by the members?
   - Multicultural Students United
   - Multiethnic Student Society
   - Crossing Cultures Club
   - United Across Cultures Society

3. In order to be effective in counseling in the Appalachian culture, Kathryn Russ suggests that counselors:
   - Practice active listening
   - Be sensitive to coming across as an expert or “know-it-all”
   - Practice some level of self-disclosure
   - All of the above

4. Which of the following issues or problems is not cited by David Hof as a concern of the Native American reservation population:
   - The dropout rate
   - The teen suicide rate
   - The infant mortality rate
   - The divorce rate

Spotlight on Journals

5. Sheri Bauman opines that efficacy research is often overlooked because of the challenges inherent in conducting research in “real-life” circumstances.
   - True
   - False

Counselor Involvement in DSM-5 Field Trials

6. The purpose of the field trial stage in the development of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) is to:
   - Make certain that all mental disorders are included
   - Evaluate the practical use of the proposed DSM-5 diagnostic criteria in real-world clinical settings
   - Prioritize diagnostic criteria relevant to specific mental disorders
   - Identify therapeutic strategies appropriate to particular disorders

Reader Viewpoint: Helping Clients With Limb Loss

7. Statistics from the Amputee Coalition of America and Johns Hopkins University set the U.S. population with limb loss at:
   - 500,000
   - 1,250,000
   - 1,700,000
   - 2,500,000

Reader Viewpoint: Counselors’ Response to Mexican Immigration

8. The authors cite the North American Free Trade Agreement (NAFTA) as having a positive effect on the economic stability of the people of Mexico.
   - True
   - False

9. Which of the following interventions is viewed as especially validating and empowering for Latina/o immigrant clients?
   - Storytelling
   - Journaling
   - Play therapy
   - Role playing

Private Practice in Counseling

10. According to the column authors, January is important to private practice counselors because:
    - New insurance deductibles kick in
    - A new tax year begins
    - Office leases typically must be renewed for the year
    - None of the above

Instructions

Online: Complete the test at counseling.org/Resources/OnlineLearning.aspx. You will be able to pay online and download your CE certificate immediately.

Mail: Complete the test and form above and mail (with check or money order made payable to American Counseling Association) to: ACA Accounting Department/CT, American Counseling Association, 5999 Stevenson Ave., Alexandria, VA 22304. Allow 2–4 weeks for processing. For further assistance, please contact Debbie Beales at dbeales@counseling.org, or by phone at 800-347-6647, x306.

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Classified advertising categories include: Calendar; Merchandise & Services; Consulting; Office Space Available; Business Opportunities; Educational Programs; Call for Programs/Papers. Other categories can be added at no charge.

- Rates: Standard in-column format: $10 per line based on 30 characters per line, $60 minimum. $8 per line for advertisers paying for six months. No cancellations or refunds. Classified ads can be placed online only at a rate of $8 per line, based on 30 characters per line; 30-day posting.
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Display ads in the employment classified section are available and can be designed by ACA’s graphics department. Call for details. Classified and employment ads are not commissionable and are billed at net rate only.

- ACA Members: If you are seeking a position you may place a 45-word ad for $10. This is a one-time insertion only.
- Deadlines: Vary per issue. Contact Kathy Maguire at 607.662.4451 or kmaguire@counseling.org for further details.
- Direct all copy or inquiries to Kathy Maguire via e-mail at kmaguire@counseling.org.
- Phone: 607.662.4451
- Fax: 607.662.4415

- Ads are subject to Counseling Today approval; however, Counseling Today cannot screen or evaluate all products or services advertised in the classified section and does not guarantee their value or authenticity. The publication of an advertisement in Counseling Today is in no way an endorsement by ACA of the advertiser or the product or service advertised. Advertisers may not incorporate in subsequent advertising or promotion the fact that a product or service has been advertised in any ACA publication. ACA endorses equal opportunity practices and will not knowingly accept ads that discriminate on the basis of race, sex, religion, national origin, sexual orientation, disability or age.
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THE DEPARTMENT OF VETERANS AFFAIRS (VA), MENTAL HEALTH OPPORTUNITIES NATIONWIDE

The Department of Veterans Affairs (VA) is one of the largest, most technologically advanced health care systems in the United States. Our employees work at 154 medical centers, 875 ambulatory and community-based outpatient clinics, 136 nursing homes, and many other facilities, such as domiciliaries and readjustment counseling centers. More than a century ago, President Lincoln made a promise to America’s servicemen and women, pledging the care and concern of a grateful Nation for the sacrifices they made to preserve freedom. Since 1930, VA’s mission has been to keep that promise.

Veterans’ mental health is a top priority at VA. After returning from combat, many veterans struggle to readjust to life at home. Our mental health care providers play a critical role in helping these veterans reclaim their lives by providing cutting-edge care. VA supports this mission by ensuring that our mental health professionals have the most innovative technologies, facilities,
and training at their fingertips. When you join VA, you will be a core member of our interdisciplinary care team structure, collaborating with both primary care and other mental health professionals to establish the right course of treatment for patients. VA has health care facilities in all 50 states, the District of Columbia, and Puerto Rico. Should a mental health professional desire to relocate, he or she may seek employment at any location where there is a vacancy and, if hired, transfer without loss of benefits. Only one active, unrestricted state license is needed to practice in a VA facility in the above locations.

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CALIFORNIA

CHICAGO STATE UNIVERSITY, NORTHRIDGE
Assistant Professor, Career Counseling and College Counseling/Student Affairs.

The Department of Educational Psychology and Counseling in the Michael D. Eisner College of Education at CSUN seeks qualified doctorate level candidates with an established teaching and practice record to fill a full-time, tenure-track position at the rank of Assistant Professor. The primary instructional assignment for this position is with the Career Counseling and College Counseling/Student Services master’s level CACREP-accredited programs.

Application: Priority will be given to applications received on or by December 1, 2010. Review will subsequently continue until the position is filled. To apply, please submit a cover letter addressing each of the required qualifications: a curriculum vitae, graduate transcripts, three current letters of reference, records and/or evaluations of teaching effectiveness, and other evidence that supports successful experience in recruiting, mentoring, and advising diverse graduate students. Applications should be addressed to: Dr. M. Simon, Career/College Counseling Search Committee, Dept of EPC, CSUN, 18111 Nordhoff Street, Northridge, CA 91330-8265 or merril.simon@csun.edu. Planned start date is mid-August 2011. CSUN is an Equal Opportunity/Affirmative Action employer. Full position listing: http://csucareers.calstate.edu/careers/details.asp?pid=26606

MARYLAND

UNIVERSITY OF MARYLAND EASTERN SHORE
Counselor, Office of Counseling Services

The Division of Student Affairs invites resumes for a full-time, twelve month, Exempt category position with full benefits. Salary is commensurate with experience and qualifications. Fulfilling the position of staff counselor is an active and vibrant opportunity. Our primary purpose is to enhance the student’s academic success by promoting emotional well-being and retention. Responsibilities: The major job requirements consist of: the provision of individual and group therapy; clinical assessments, workshop development and facilitation; outreach; and consultation services to diverse academic community. Performs other related duties as assigned. Qualifications: Master’s degree in Counseling or a closely related field with a minimum of five years experience in a mental health capacity. Must be licensed or licensed eligible within a year in the state of Maryland. The applicant should be comfortable utilizing diagnostic procedures, the DSM IV, computer literate, and possess oral and written communication skills. Strong leadership skills, in-depth
knowledge about the practice of counseling, active participation in professional associations, and a proven record of clinical experience is highly desirable. Resumes will be accepted until the positions are filled. Qualified applicants should submit a letter of application, resume, and have three letters of professional recommendation sent directly by reference to the Department of Human Resources, University of Maryland Eastern Shore, Princess Anne, Maryland 21853. E-mail: mvames@umes.edu 

**Note:** Verification of degree is the responsibility of the candidate. Individuals with degrees outside of the US may be subject to verification. UMES is an EEO/AA employer. The successful candidate must be able to show acceptable documentation establishing the right to accept employment in the United States of America. Minorities, women and persons with disabilities are encouraged to apply.

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**NEW JERSEY**

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Primary duties include teaching graduate level courses in the Master of Arts Clinical Mental Health Counseling program. The successful candidate will demonstrate excellence in curriculum development, teaching graduate courses areas such as crisis intervention, addictions counseling, drugs alcohol and substance abuse, theories of counseling, multicultural counseling. The candidate should have some experience with oversight of practicum and internships and clinical supervision in counseling.

Earned doctorate in counselor education or counseling psychology; Licensed professional counselor

Employment is contingent upon a satisfactory background check. Candidates for hire will be required to sign a waiver authorizing the background check and produce a Social Security Card. LCADC, SAC, NCE certification, Approved Clinical Supervisor. Fairleigh Dickinson University is an Equal Opportunity/Affirmative Action Employer committed to a diverse workforce M/F/D/V.

Interested candidates can learn more about and apply for this position through the University’s Web site www.fdu.edu by clicking on the Employment link at the bottom of the page.

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**MONMOUTH UNIVERSITY**

**Assistant Professor School Counseling**

**JOB POSTING NUMBER: 0600491**

**DEPARTMENT:** Ed Leadership, School Counseling and Special Ed.

**FULL TIME**

**JOB DUTIES:** Teach 9 credits per semester (12 credits with a 3 credit course load reduction), including courses in School Counseling/Student Affairs and College Counseling. Serve on committees. Advise students (including student counseling association). Participate in CACREP accreditation process and maintenance. Coordinate and administer CPCE testing. Maintain disciplinary currency.

**REQUIREMENTS:** Doctoral degree in Counselor Education and Supervision or related field. Candidates must demonstrate evidence of a research agenda or a clear potential for scholarly activities as well as evidence of excellent teaching or potential of excellent teaching. Field experience in School Counseling or Student Affairs/College Counseling should be evidenced. Collaborative skills necessary. ABD candidates may be considered with degree completion expected by date of employment. Excellent interpersonal, organizational and communication skills. PREFERRED QUALIFICATIONS: Graduate of a CACREP accredited program in Counselor Education. Proficient in hybrid or online course development a plus. CLOSING DATE FOR APPLICATIONS: 12-10-2010.

**SPECIAL INSTRUCTIONS TO APPLICANTS:** Anticipated opening for the 2011-2012 academic year. Tenure track. Transcripts and letters of recommendation should be directed to Tina Paone, Search Committee Chair, Department of Educational Leadership, School Counseling and Special Education, Monmouth University, West Long Branch, NJ 07764. For additional information about the department, please go to:

http://www.monmouth.edu/academics/departments/edleadership.asp

**REQUIRED APPLICANT DOCUMENTS:** Resume or Curriculum Vitae, Cover Letter. The University offers Tuition Remission for employee, spouse and IRS dependent children. TO APPLY: For further information on this position, additional vacancies, or to apply; visit: http://jobs.monmouth.edu MONMOUTH UNIVERSITY Where Leaders look forward™ Monmouth University is an Equal Opportunity, Affirmative Action Employer

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**TEXAS**

**TEXAS A&M UNIVERSITY - COMMERCE**

**Counselor Education: Department Head position.**


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**UNIVERSITY OF HOUSTON – VICTORIA**

**Tenure-track Assistant/Associate Professor**

University of Houston-Victoria invites applications for a tenure-track Assistant/Associate Professor position in counseling starting Fall 2011. UH-Victoria, one of four independent universities that constitute the University of Houston System, operates out of the main campus in Victoria, Texas and offers programs at the Cinco Ranch and Sugar Land satellite campuses near Houston, Texas. UH-Victoria is a 4-year and upper division degree granting institution and is composed of the School of Education & Human Development, School of Business Administration, School of Nursing, and School of Arts and Sciences. The Counselor Education program at UH-Victoria offers two CACREP-accredited 48-semester-hour Master’s of Education programs in School and Community Counseling, and one 36-hour program in Student Affairs.

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Tenure Track Assistant / Associate Professor in Counseling starting fall 2011. Candidates must have: (1) an earned doctorate with a primary emphasis in Counseling or related field from a CACREP accredited university; (2) demonstrated record of research, scholarly publications, and funded projects or a clear indication of potential success in these areas; (3) excellent English communication skills. Must be Texas LPC and/or school counselor license eligible. Persons with experience in supervising counselors in the public school system and those with experience with diverse populations of students are especially encouraged to apply. Major responsibilities include: (1) teaching master’s level courses in counseling such as practicum, basic counseling skills, theories courses; (2) curriculum and program development; (3) supervising counseling interns; (4) student advisement and recruitment; (5) working cooperatively with area public schools; (6) maintaining an active research and publication agenda; and (7) participating in school and university committees and professional organizations. This position will office & teach on the UHV-Victoria campus in Victoria, TX. Salary is competitive. Apply on-line at http://uhv.simplehire.com. Screening of applications will begin November 22, 2010; however applications will be accepted until the position is filled. For more information about the Counselor Education Program at UH-Victoria of the School of Education & Human Development, see our web-site at www.uhv.edu/edu. The University of Houston-Victoria is an affirmative action/equal opportunity employer committed to cultural diversity.

WEST VIRGINIA

MARBELL UNIVERSITY
Assistant/Associate Professor, COEHS, Counseling Department
Position Type: Nine-month, tenure track position with summer teaching available.
Rank and salary: Commensurate with qualifications and experience. Qualifications: An earned doctorate in Counselor Education with emphasis in School Counseling; preference will be given to applicants with school counseling experience; applicants with marriage and family counseling experience is desired; applicants should have general clinical skills; licensed or eligible for licensure as a counselor in WV; possess a demonstrated record of college teaching, evidence of or capacity for scholarly activity and knowledge/experience in using technology to deliver instruction. In addition, applicants should have evidence of effective communication skills; commitment to continued professional growth and teaching experience required. Duties: Responsible for preparing and teaching graduate courses, maintaining and advising students, engaging in scholarly activities and service, and participating in departmental and institutional functions. Send cover letter, resume, official transcripts and contact information for three references to Brean Stewart, Marshall University, and contact information for three references to Brean Stewart, Marshall University, Jenkins Hall 218, 1 John Marshall Drive, Huntington, WV 25755. Candidates interviewing on campus must have all official transcripts forwarded directly to chair of the search committee by their degree granting institutions. Deadline for applications: Position is open until filled. STATUS: OPEN.
BACKGROUND CHECK REQUIRED.

WISCONSIN

UNIVERSITY OF WISCONSIN-MADISON
Assistant Professor, Rehabilitation Psychology/Rehabilitation Counseling
Tenure-track position to begin August 29, 2011. To ensure consideration applications must be received by January 14, 2011. Information, including responsibilities, qualifications, and application procedures, may be found under “Announcements” at http://rpse.education.wisc.edu. Inquiries and applications should be directed to Professor Norm Berven, Department of Rehabilitation Psychology & Special Education, 401 Education Bldg., University of Wisconsin-Madison, 1000 Bascom Mall, Madison, WI 53706; Phone: 608-263-7917; FAX: 608-262-8108; Email: nlberven@wisc.edu. The University of Wisconsin-Madison is an equal opportunity/affirmative action employer. We promote excellence through diversity and encourage all qualified individuals to apply.

UNIVERSITY OF WISCONSIN - WHITewater
Tenure-Track Positions
The Department of Counselor Education at the University of Wisconsin – Whitewater seeks highly qualified candidates to fill full-time, tenure-track positions in the Master of Science Program in Counseling, in both community counseling and school counseling emphases, at the rank of assistant or associate professor. For full position descriptions go to: http://www.uww.edu/employment/unclassified.html
A counselor’s story...

8:00 a.m. Get to the office early. Start the coffee. Check voice mail. Leave a brief message for my client Brad. Don’t want his wife over-hearing anything confidential.

9:00 a.m. First client, Mark. Dealing with depression. Lost his job of 15 years. Body language anxious. Admits he is contemplating shooting his ex-boss.

10:00 a.m. Christine has a long-running drug and alcohol problem. Making great progress. Offers to clean my house in return for counseling sessions.

11:00 a.m. Mary gave me a big hug, again. She wants me to testify at her son’s child custody hearing. Let’s me know husband is going to subpoena her records. She invites me to dinner.

12:00 p.m. Grab lunch at desk. Check email. Sign up for CE class on crisis management. Read an article on lawsuits filed over ‘client confidentiality.’ It is important to know when to protect a client’s privacy and when it’s required by law to report certain behavior.

Make sure your story has a happy ending.

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