Also inside:

• Reducing anger through therapeutic martial arts
• Helping sexual addiction clients and their partners
• Information on ACA, Division, Region elections
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Cover Story

Getting off the couch
By Lynne Shallcross

Not every client responds well to sitting across from a counselor and discussing his or her problems for 50 minutes. That's why some counseling professionals are incorporating active interventions into their work, allowing clients to gain personal insights not just through talking but by engaging in activities, whether in the great outdoors or right in the counselor's office.

Features

Knowledge Share
Reducing excessive anger in adolescents through a martial arts intervention
By Isaac Burt

Capoeira is both a unique martial art and an effective form of creative self-expression that, when integrated with more traditional therapy methods, can provide counselors with a strength-based modality for engaging challenging clients and cultivating change in them.

It's not about sex
By Stacy Notaras Murphy

To help clients struggling with sexual addiction, counselors must first move beyond a common misconception — namely, that the addiction is driven by the individual's overly active libido. Instead, counselors will find that these clients are attempting to use sexual gratification to fill other unmet needs.

Reader Viewpoint
A Decision without details
By John McCarthy

While on sabbatical in England, a counselor educator finds himself wondering how an anonymous man whom he would never meet arrived at a fateful, final decision — and whether something could have been done to prevent it.

Extras

ACA, Division & Region election information
By the Numbers

Antidepressant use

In October, new research from the Centers for Disease Control and Prevention was released concerning the prevalence of depression and antidepressant use in the United States. The findings were based on responses to a national annual health survey from 2005-2008 in which approximately 12,000 individuals participated. Among the revelations, which were released as a National Center for Health Statistics Data Brief:

- Prescriptions for antidepressants have risen nearly 400 percent since 1988.
- 9.1 percent of U.S. adults will have depression at any given time, but 11 percent of Americans 13 and older take antidepressants.
- At the same time, two-thirds of individuals with severe symptoms of depression do not take medication for the illness.
- Depression is seen twice as often in women as it is in men, and women are 2.5 times more likely than men to take medication for depression. Almost 23 percent of women in the 40-to-59 age group took antidepressants in 2005-2008.
- Although roughly 9 percent of adolescents between the ages of 12 and 17 had experienced a major depressive episode in the prior year, only 2.8 percent of boys and 4.6 percent of girls in that age group were currently taking antidepressants.
- Among individuals who used antidepressants, approximately 60 percent had taken them for two years or longer; 14 percent had been on the medications for a decade or longer.
- Among Whites, 14 percent took antidepressants, compared with 4 percent of Blacks and 3 percent of Hispanics.
- Less than one-third of the individuals taking medication for depression had visited a mental health professional in the past 12 months.
As I have traveled around the country talking with professional counselors and have received weekly emails from other professional counselors, it has become apparent to me that many of the concerns of ACA members are directly related to the activities of a group usually referred to as the “20/20 Commission.” The formal title of the group that began its work in 2005 is “20/20: A Vision for the Future of Counseling,” and it consists of representatives from 31 counseling organizations or entities. The group was very deliberate in its discussions under the leadership of Sam Gladding during the first five years and continues in that manner under the current direction of Kurt Kraus.

Earlier in the process, discussions by the 20/20 Commission resulted in seven “Principles for Unifying and Strengthening the Profession,” which 30 professional counseling organizations and entities have endorsed. Those principles are:

1) Sharing a common professional identity is critical for counselors.
2) Presenting ourselves as a unified profession has multiple benefits.
3) Working together to improve the public perception of counseling and to advocate for professional issues will strengthen the profession.
4) Creating a portability system for licensure will benefit counselors and strengthen the counseling profession.
5) Expanding and promoting our research base is essential to the efficacy of professional counselors and the public perception of the profession.
6) Focusing on students and prospective students is necessary to ensure the ongoing health of the counseling profession.
7) Promoting client welfare and advocating for the populations we serve is a primary focus of the counseling profession.

Following determination of the underlying principles, the group next sought to develop a consensus definition of counseling. The goal was a definition that would be all-inclusive yet concise, and also one that was specific and could be communicated to legislative groups and the general public. In March 2010, a consensus was reached and the group released a definition of counseling. That definition is: “Counseling is a professional relationship that empowers diverse individuals, families and groups to accomplish mental health, wellness, education and career goals.”

Recently, this definition was submitted to the chairperson or administrator of all state licensure boards with an endorsement from both ACA and the American Association of State Counseling Boards. The letter requested that the boards adopt and endorse the consensus definition when describing and defining what counseling is and what professional counselors do. Hopefully, we will begin to see the definition throughout the literature and on websites.

The next objective for the 20/20 Commission is even more challenging because it addresses the single-most-voiced professional concern I have encountered among counselors nationwide. That issue is licensure portability. The portability issue was included in the initial list of unifying and strengthening principles and has now emerged as the next focus of the commission. I suggest that you find your November issue of Counseling Today (also available at ct.counseling.org) and read the article “20/20 delegates pushing toward licensure portability” by Heather...
Moscone West Convention Center, Room 2016

Leaders in the field discuss their new ACA books in this highly informative series.

Friday, March 23, 2012

11:00 am – 12:00 pm

The Counselor and the Law: Avoiding the “Dirty Dozen” Legal and Ethics Traps
Anne Marie “Nancy” Wheeler and Burt Bertram

This session will summarize issues covered in the newly revised sixth edition of The Counselor and the Law such as updates to HIPAA (HITECH), client referrals, documentation, and reporting duties. The presenters will also provide an overview of current legal and ethical problems for counselors; tools to help clients achieve their goals while avoiding lawsuits and licensure board complaints; updates on new trends in confidentiality, privilege, privacy, and social media; and a decision-making model.

2:00 pm – 3:30 pm

Techniques to Help Challenging Youth Make Positive Life Changes
John Sommers-Flanagan and Rita Sommers-Flanagan

In this workshop, the authors of Tough Kids, Cool Counseling will focus on three overlapping counseling themes: (a) relationship connection strategies; (b) solution-focused and narrative (constructive) techniques; and (c) using intuition and timing to maximize goodness of fit between client (or student) and counseling interventions. Participants will be provided with an online link to the authors’ counseling resources.

3:45 pm – 4:45 pm

Creating Your Professional Path: Lessons From My Journey
Gerald Corey

This presentation is based on Gerald Corey’s book Creating Your Professional Path. Topics discussed will include turning points in the author's 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. Questions and participation from the audience are invited.

5:00 pm – 6:00 pm

Working With LGBT Persons and Their Families
Sari H. Dworkin and Mark Pope

In Casebook for Counseling Lesbian, Gay, Bisexual, and Transgender Persons and Their Families, Drs. Dworkin and Pope fill the training gap in work with LGBTQI clients. Case studies focusing on what is said and done in actual counseling sessions examine contemporary issues affecting these populations to assist students, practicing counselors, and other mental health professionals in assessment and treatment planning. The presenters will discuss how the cases can be used to train competent counselors.

Saturday, March 24, 2012

10:30 am – 12:00 pm

Clinical Supervision in the Helping Professions
Gerald Corey, Robert Haynes, Patrice Moulton, and Michelle Muratori

The coauthors of the book Clinical Supervision in the Helping Professions will describe why and how they wrote their book and address the following topics: 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. Questions and participation from the audience will be encouraged.

2:00 pm – 3:30 pm

Perspectives on Comprehensive School Guidance and Counseling Programs
Norman C. Gysbers and Patricia Henderson

Based on the new edition of the authors’ bestselling book Developing & Managing Your School Guidance & Counseling Program, this session will describe the evolution and current status of comprehensive school guidance and counseling programs and offer new perspectives on program development. Participants will learn effective leadership strategies for school counselors and other school staff to meet students’ mental health needs, and for responding to and advocating for diverse student populations.

3:45 pm – 4:45 pm

The Creative Arts in Counseling
Samuel Gladding

This session, based on Dr. Gladding’s new book, will focus on how the creative arts (literature, music, dance/movement, drawing, humor) can be used effectively in a wide variety of settings to help clients gain insight into problems and negotiate solutions to the concerns they bring into counseling.

5:00 pm – 6:00 pm

Cyberbullying: What Can We Do?
Sheri Bauman

This presentation, based on the author’s new book Cyberbullying: What Counselors Need to Know, will provide effective prevention strategies for responding to cyberbullying. Specifically, brief solution-focused counseling, the support group approach, and the Method of Shared Concern will be outlined and features of restorative justice that can be incorporated into these approaches will be discussed. Dr. Bauman will also review recent legislation and court decisions related to cyberbullying.
Executive Director's Message

What is the ‘new’ 60?

There was a time not that long ago when someone who turned 60 was considered to be in his or her “twilight” years. This person shortly would retire from a career, take up a hobby and hope that his or her health (and wealth) would hold up long enough to make that golden period of life happy and restful. Turn the clock back further, and you will find that those turning 60 in the year 1900 were considered extremely lucky to have lived so long.

I know a number of 60-year-olds. What I described above really doesn’t fit any of them. In fact, I know many who have reached that age only to begin yet another career. Some are so active into their 60s, 70s, 80s and beyond that their adult children complain that it is often difficult to find their parents at home.

In April, another “colleague” will turn 60. On April 1, 1952, an entity was born that would grow to have one of the greatest impacts on the counseling profession. The “birth” of this organization was due to the collective wisdom of four groups that came together upon realizing that a voice of one would be greater than each of them acting independently. The beginning of the American Counseling Association (then known as the American Personnel and Guidance Association) was 60 years ago.

Will the ACA that many of us know and love face a future like the one described in the opening paragraph of this column? Namely, will ACA ride out its remaining years reflecting on past successes, slowing itself down as it moves into the stage of a “mature” organization, with many considering it to be past its prime years of advocacy and support of the counseling profession? Or will we continue to be vibrant, as demonstrated by meeting the needs of today’s (and tomorrow’s) professional counselors? Will ACA be the professional organization that supports, develops and invigorates a profession that itself has seen dramatic change in training, experience and definition during the past 60 years of its evolution?

Something tells me almost all of us agree about the potential of ACA, and my sense is that this is a position embodied by our leadership, our “wisdom keepers” (those who have served as leaders), the staff and our more than 48,000 members. If this were not true, why would so many counselors and counselor education students decide to join our ranks each year? From my perspective, our growth and development as an entity proves that the organization is solid, knowledgeable and itching to stay both relevant and at the cutting edge in developing what professional counselors need to be successful.

Now, ACA isn’t a person, but it is about to celebrate a 60th birthday. ACA is an organization that, just as our forefathers and foremothers envisioned when they came together in 1952, speaks volumes louder as a collective of counselors rather than as several individual voices. Today’s ACA is dependent on its staff and leadership continuing to produce products, services, research and advocacy that the membership values. If we can meet these objectives, ACA will continue to grow and develop. Our cadre of staff and leaders is aware of the trust placed in them by ACA members and is vigilant in protecting that trust. Leaders, staff and others in ACA understand that the organization must be looked at as part of a continuum. We are stewards at this point in the association’s history so that those coming behind us (the ones who will plan our 75th and 100th anniversaries!) will have options to invigorate and support the profession (some members of which have not even been born yet). The job of today’s leaders and staff is to blaze a path and to ensure that those who come behind us will be able to advance the profession by walking on our shoulders.

So I say, let the celebration begin.

As always, I hope you will contact me with any comments, questions or suggestions that you might have. Please contact me via email at ryep@counseling.org or by phone at 800.347.6647 ext. 231.

Thanks and be well.
On Oct. 20, the Senate Health, Education, Labor and Pensions Committee approved legislation, with modest bipartisan support, to reauthorize federal elementary and secondary education programs in a 15-to-7 vote. The legislation rewrites the Elementary and Secondary Education Act (ESEA, most recently authorized in 2001 as the No Child Left Behind Act) and makes several significant changes to current Department of Education policies and programs.

Committee Chair Tom Harkin (D-Iowa) hoped to bring the legislation to the Senate floor in November to leave open the possibility of Congress enacting a reauthorization bill by the end of the year. If this happens, the updated law would preempt the Obama administration’s waiver of several key requirements under the No Child Left Behind Act announced in September. The Department of Education waiver program will give states a pass on following current law procedures for determining “adequate yearly progress.” In addition, states no longer would be required to restructure or take corrective action on Title I schools that fail to make adequate yearly progress for two consecutive years. The Senate bill would scrap the AYP requirement (although some testing requirements would remain) and restrict federally directed interventions to the lowest-performing 5 percent of schools and schools with persistent achievement gaps.

The committee’s bill would eliminate the Elementary and Secondary School Counseling Program (ESSCP) and many other Department of Education programs. The American Counseling Association and several other organizations representing specialized instructional support personnel, including the American School Counselor Association, the School Social Work Association of America and the National Association of School Psychologists, urged the committee to maintain ESSCP and pushed for inclusion of language in the bill to explicitly recognize school-based mental health and student support professionals.

Unfortunately, virtually none of our suggestions for improving the bill were reflected in the legislation the committee approved.

Instead of pushing for a stand-alone program strongly focused on supporting school counseling services, the legislation includes a section titled “Successful, Safe and Healthy Students,” which is modeled on S. 919, a bill Harkin introduced earlier this year. As adopted by the committee, this section of ESEA would support state and local education agencies in developing “comprehensive programs and strategies to foster positive conditions for learning” in schools through activities that promote student physical health and well-being (including nutrition); promote student mental health and well-being; prevent school violence and harassment; and reduce substance abuse; and promote safe and supportive schools.

The Successful, Safe and Healthy Students program would provide funding to states to develop systems measuring conditions for learning in public schools. Whether this funding is distributed on a formula basis to all states or a competitive grant basis to a smaller number of states would depend on the total amount of money appropriated for the program in a year. If appropriations are more than $500 million, formula grants would be used. Applications for funding would have to include a needs analysis.

To obtain a grant, states would have to require all local education agencies to establish policies that “prevent and prohibit conduct that is sufficiently severe, persistent or pervasive to limit a student’s ability to participate in or benefit from a program or activity of a public school … or to create a hostile or abusive educational environment … including acts of verbal, nonverbal or physical aggression, intimidation or hostility.” During committee consideration of the bill, Sen. Al Franken (D-Minn.) offered and then withdrew an amendment to insert the text of his Student Non-Discrimination Act (S. 555). Franken’s amendment, which he intends to offer on the Senate floor during the bill’s consideration, would prohibit discrimination against students on the basis of “actual or perceived sexual orientation or gender identity.”

The Successful, Safe and Healthy Students program would also require states to establish a reporting and information system that tracks school-level data, including physical education indicators; student attendance and truancy; suspensions, expulsions, disciplinary transfers and referrals to law enforcement; the incidence and seriousness of violence and drug-related offenses; and the incidence and prevalence, age of onset, perception of health risk and “perception of social disapproval” of drug use and violence, including harassment. The legislation also requires that programs implemented through subgrants to local education agencies be based on scientifically valid research. In awarding subgrants, states would have to give priority to applications demonstrating the greatest need according to local assessments or targeting schools with the highest concentrations of poverty.

With its elimination of ESSCP and a lack of provisions recognizing school counselors as an integral component of successful schools, the legislation the Senate committee approved is somewhat lacking. To cite one important example, the legislation would continue the current law’s focus on supporting teacher and principal development without also extending training and recruiting support to school counselors and other specialized instructional support personnel.

ACA will continue working in coalition with our sister organizations to push for federal recognition of the important role of school counselors and related staff in our education system. For more information, contact Scott Barstow with ACA at sbarstow@counseling.org.
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THE TWO-MINUTE ADVOCATE - By Scott Barstow

All members of Congress can be reached by phone through the U.S. Capitol Switchboard at 202.225.3121. Simply provide the name of the member of Congress you wish to reach. Remember, only representatives can cosponsor House bills, and only senators can cosponsor Senate bills (such as S. 604).

Ask senators to cosponsor Seniors Mental Health Access Improvement Act of 2011 (S. 604)

Medicare is the single-largest health insurance program in the country, covering more than 47 million Americans. Many Medicare beneficiaries have a hard time finding qualified mental health professionals, and access problems are going to get substantially worse as more and more Americans become eligible for the program even as more mental health professionals retire from work. Congress is expected to consider legislation before the end of the year to address the 30 percent cut in physician payment rates under Medicare that are scheduled to take place Jan. 1.

We need Medicare coverage of licensed professional counselors to be included in this larger legislation. Nationwide, more than 120,000 LPCs are authorized to practice independently under state law. Private sector health plans have covered LPCs for many years.

Ask both of your senators to cosponsor S. 604, bipartisan legislation to cover state-licensed professional counselors and marriage and family therapists under Medicare at the same reimbursement rates and in the same settings as those for clinical social workers. S. 604 was introduced by Sens. Ron Wyden (D-Ore.) and John Barrasso (R-Wyo.).

If you have already contacted your senators on this issue but they have not yet told you what their position is on S. 604, contact them again!

You can identify your senators using ACA’s Internet advocacy website at capwiz.com/counseling, and all senators’ offices can be reached through the U.S. Capitol Switchboard at 202.225.3121.

The current cosponsors of S. 604, listed by state, are:

- Sen. Mark Begich (Alaska)
- Sen. Barbara Boxer (Calif.)
- Sen. Daniel Inouye (Hawaii)
- Sen. Dick Durbin (Ill.)
- Sen. Kent Conrad (N.D.)
- Sen. Jeff Bingaman (N.M.)
- Sen. Sherrod Brown (Ohio)
- Sen. Tim Johnson (S.D.)
- Sen. John Barrasso (Wyo.)

Regardless of whether you call, write or send an email, take a moment to put your request in your own words. Studies show that one individualized message written in a constituent’s own words carries significantly more weight with congressional offices than one hundred form emails or letters.

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

ACA adds staff to policy department

Two new staff members have joined ACA’s public policy office. Art Terrazas is ACA’s new grass-roots advocacy coordinator. Previously, Art was a staff member for former Rep. Harry Teague of New Mexico. Art will be working to increase the effectiveness of counselors engaging in legislative advocacy, improve coordination between ACA and its members in communicating with policymakers, and recruit new counselor advocates. Art can be reached at aterrazu@counseling.org or 800.347.6647 ext. 242.

Guila Todd joins ACA as our new public policy coordinator. He will be responsible for responding to member inquiries, scheduling meetings, carrying out research and data collection, and handling the day-to-day operations of the department. Guila previously worked as an analyst both for the Naval Facilities Engineering Command and the District of Columbia. Guila can be reached at gtodd@counseling.org or 800.347.6647 ext. 354.

Welcome, Guila and Art!
The ACA Foundation Supports You!
Here are just a few ways in which the ACA Foundation supports you:

**Graduate students in counseling programs**
- Scholarships and essay competitions
- Grants to attend the ACA Conference

**Counseling professionals who are affected by disasters and tragedies**
- Counselors Care Fund (assistance to members when tragic events such as hurricanes strike)

**Counseling professionals in all communities**
- Special programs and initiatives to benefit your clients
- Activities to raise the awareness of the counseling profession
- Awards and recognition for excellence in the profession

*And there is much more to come in 2012!*

Please remember the ACA Foundation in your charitable giving all year long, but especially as a tax-deductible donation for 2011! Visit acafoundation.org and click on the “Donate Now” button.

On behalf of the ACA Foundation Board of Trustees, our best wishes for you and for those you serve in 2012.
Donna Henry, a licensed professional counselor, chemical dependency counselor and registered play therapist, wanted to attend the American Counseling Association’s first webinar. When she called and expressed concern about whether the webinar would come in at her remote location — one of the Aleutian Islands in the Bering Sea — we began to talk. I was intrigued by her forthright, can-do attitude and her ability to overcome obstacles. Here is her story.

**Rebecca Daniel-Burke:** What is your current counseling position?

**Donna Henry:** Lead behavioral health clinician.

**RDB:** What led you down the path toward a career in counseling?

**DH:** I chose counseling after seeing people make poor choices for themselves. I wanted to help people who may have started off in circumstances beyond their control start making changes in their lives and understand their own worth — to help them understand that regardless of what has brought them to this point, they have the choice now to make life better.

**RDB:** When you start with a client, what assessment tools might you use? Do you take a history?

**DH:** We use several screening tools at my place of employment that determine the likelihood of a mental health condition, substance use disorder or possible traumatic brain injury. These then assist the clinician in identifying the appropriate assessment and treatment needs. We also use a client status review tool designed to measure the client’s quality of life. It is used throughout treatment and again at discharge. I take a comprehensive history of the client and their family of origin history as well. Subject matter includes the presenting problem; history of the issue; personal and family history of mental health concerns; substance abuse; suicidal ideation or attempts; trauma, including domestic violence; emotional, physical or sexual abuse; and issues with developmental milestones. The assessment also covers relationships with others, spiritual/cultural involvement and work and school history.

**RDB:** How do those tools and that assessment help you plan a strategy for counseling?

**DH:** The client and I sit down and review the assessment summary together and then create a treatment plan. Oftentimes, when clients hear or read their concerns and their history, they come to a better understanding of what has brought them here, what direction they would like to take in counseling and what goals they want to see come to fruition in their lives.

**RDB:** Is there one theoretical orientation you gravitate toward more than others? Why?

**DH:** If I had to choose, it would be person-centered because it really is the relationship that heals. I think we all just want to be accepted for who we are. No expectations, no judgments. Just accept. When we feel that inside of ourselves, we grow past all the self-criticism, traumatic abuse and negative living that we may have endured. Acceptance feels good for the soul. I feel very fortunate to be a part of that with someone.

**RDB:** How is counseling on a remote island different?

**DH:** Counseling here is difficult in many ways. There is no detox available. There are no regular psychiatric services. A psychiatrist visits about six times a year for medication management. There are no inpatient options here for mental health issues. We will have psychiatric emergencies that require inpatient [services], and we have to fly them with an escort into Anchorage [Alaska] — 800 miles — to the nearest hospital. If the person is actively suicidal or violent, they must be in a secure environment. We do not have a secure environment, so we must utilize our local public safety, which is essentially jail. It’s the only secured facility on the island.

Obtaining services is even more difficult if you are assessing them telephonically because they are on another island. You are coordinating with the village safety officer to retain the client and keep the person safe while you work with the local medical person. Sometimes you are working with a community health advocate because some of the villages in the Aleutians are very small, so they may not have a doctor or nurse.

Finding inpatient for alcohol and substance rehabilitation is very, very difficult. It sometimes takes months to find an available bed for the client. Often we will find one, but the facility will hold it for only 48 hours, and by the time we line up a ticket on the aircraft’s limited seating or weather delays the departure, the facility has given away the bed. That is incredibly discouraging for the client and the clinician.

Groups are difficult to run because we are a fishing town. People are out on the fishing vessels for weeks at a time so coordinating [and] running a group is problematic.

**RDB:** Your work is intense and you have to climb over so many obstacles. What ways do you find to take care of yourself and to fill yourself back up?

**DH:** Having time with friends is so important to me. I need that time to laugh and decompress. I think everyone does. I live on a remote island in the Bering Sea, so weekend getaways are out of the question. Travel just doesn’t happen that often due to cost. Fortunately, the area I live in is gorgeous, and when
the weather is good, there are plenty of hiking and outdoor activities. Even when things are hectic, it’s hard to feel cranky when I look outside and see the most brilliant rainbow, with every color, evident over a mountain range and a bald eagle flying by. How could I possibly complain?

**RDB:** As you look back on your career in counseling, what has been your favorite part of the work you do?

**DH:** Like most, I have had multiple roles as a counselor. I would have to say that I enjoy volunteering in local schools the most. I enjoy talking with children about healthy relationships with others because you can effect change on a larger scale. When you can help classrooms full of children understand the impact of negativity and bullying on themselves and their peers — and then the converse of kindness — it’s amazingly rewarding. When kids come back to tell me what they chose to do differently in a situation, that gives me an immense sense of satisfaction.

**RDB:** Who are your heroes?

**DH:** I think my clients are my heroes. That might sound hokey, but the perseverance through trauma and pain can sometimes be a wrenching process, but ultimately a rewarding one when we find peace and an improved quality of life. I think that my clients are so brave to face those issues, share their experiences and try something different when all they know is what they’ve been doing. That’s really hard work. Change is hard. Confronting situations in our lives that are dysfunctional is hard. The clients I see are courageous. I work with a population in which there is significant historical trauma. They are often changing the trajectory of their lives and their children’s lives. That is heroic.

**RDB:** Has studying counseling been transformational for you?

**DH:** More than I can say. Studying and practicing counseling has made me change the way I think about everything. Some may not agree, but I believe that a part of counseling is teaching. There is an education process, and I believe if I am teaching it, I better be living it. Learning is a lifelong process. I learn and grow, not just from the research that I do to help clients, but from how that knowledge helps facilitate my self-exploration.

**RDB:** What mistakes have you made along your career path, and what lessons have you learned from those mistakes?

**DH:** I have certainly made my share of mistakes. But I can tell you what I have learned: that while people might be looking for validation or skills or guidance, people are the experts on their own lives. They are capable of tremendous things.

**RDB:** What do you try to think about or remember when the going gets tough?

**DH:** Stress and problems exist; that’s just a part of life for everyone. When the going gets tough, it can be hard to remember why I went into the counseling field. That rough road usually has nothing to do with client work and everything to do with paperwork and politics. I enjoy reading Carl Rogers because he can be so inspirational. When things are rough, I need to be inspired.

I have a quote at my desk that I like: “Promise yourself to be so strong that nothing can disturb your peace of mind. Look at the sunny side of everything and make your optimism come true. Think only of the best, work only for the best and expect only the best. Forget the mistakes of the past and press on to the greater achievements of the future. Give so much time to the improvement of yourself that you have no time to criticize others. Live in the faith that the whole world is on your side so long as you are true to the best that is in you!” — Christian D. Larson.

I am also a registered play therapist and have another quote up near the play area: “You are braver than you believe, and stronger than you seem, and smarter than you think” — Christopher Robin to Pooh. I really like that one.
In psychotherapy fantasyland, an hour lasts 50 minutes. Writing a progress note takes less than 10 minutes, leaving just enough time to squeeze in a potty break. And the next client on the schedule arrives precisely when the big hand reaches 12.

In my world, I am pleased to say my schedule runs like clockwork. As long as the clock is a Salvador Dali timepiece melting over a barren tree limb. Although that iconic image has never made sense to me, I’m learning to understand how to use the clock to my advantage in my work. There is an art to it.

Supervisor was the first to suggest that Dali’s liquefied clock does indeed convey at least one valuable lesson: Flexibility. This was going to be a stretch for me. Touch my nose to my knee? No problem. Proceed without a set plan? No can do. Or so I initially believed. Structure is, was and always will be my comfort zone. Minutes, hours, days, months, years — each passing in a delightfully fixed order.

So it was that I arranged my clients according to this fixed logic. Each new client automatically received a standing appointment. Easy-peasy recorded in the iPhone calendar. Three taps and I never need think of it again. “Repeating Event,” “Weekly,” “Done.”

Except it wasn’t done. Imagine my surprise when attendance for a significant segment of my caseload began to flag. As in red flag. Supervisor advised an attitude of surrender. As in white flag. “Let me get this straight,” she said. “Do you give every client a standing?”

“Well, um, yes,” I stammered, gleaning that perhaps this was not a good thing.

Supervisor picked her chin up off the floor and continued. “I almost never do that. When clients have to think about making an appointment from week to week with you, it fosters a conscious sense of commitment on their part. It’s the client’s responsibility to make the commitment to come to therapy, not yours.” Duly noted.

Added bonus: When I need to schedule my own appointments for say, an annual physical, my daughter’s lacrosse game or even an occasional lunch date with my husband, it’s perfectly OK to block some time off the book. Even if it means inconveniencing a client every once in awhile.

My next lesson in purposeful scheduling came courtesy of one of the first clients assigned to me when I began practicum. Longtime Client followed me to the new agency where I had transferred to complete my postgrad internship. At the end of our first session after the switch, he opted to schedule my first appointment of the week for his regular slot. A Marine plagued by an intriguing combo of post-traumatic stress disorder symptoms and Asperger traits, he was a veritable poster boy for Standing Appointment Worthiness.

Then one day he arrived predictably at the allotted time, slid into his seat, tipped his chin down and gazed with wide, unblinking eyes at my forehead. I said nothing, recognizing he was working up the courage to confront me. Longtime Client ventured to ask for a change of the day and time for his weekly session. I arched my left eyebrow, a signal for him to elaborate. After more than a year together, we had developed a sort of nonverbal shorthand. My gesture broke the tension. He chuckled at our “in-joke” and broke the silence.

“Well, I feel like your energy is really scattered every week,” he said, “and I think it has something to do with our appointment time.”

I hate to admit it, but Longtime Client had me pegged. By this point, I could tell the difference between Client-based resistance and Counselor-based boneheadedness. He had picked up on my Monday morning spillover from the Sunday-night jitters of a newbie intern anticipating the workweek to come. (I am well acquainted with the origins of this pattern of mine. It began the night before my first day of elementary school, when Demonic Older Brother put his arm around my skinny little shoulders, pulled me close and whispered behind his cupped hand: “If you get one wrong on any assignment, You Will Fail First Grade.” So much for insight therapy, eh?)

In any case, one of Longtime Client’s treatment goals had been to decrease debilitating hypervigilance. Apparently, therapy was helping. In confronting me about this issue, Longtime Client had displayed in a concrete way that he could moderate his anxiety, identify his needs and then ask to get them met. In return, I was inspired by his example to exorcise my own anxiety demons.

Some might say I crossed a line in the self-disclosure department when I came clean with my reply. After a moment of personal reflection, I validated Longtime Client’s observation, albeit with deliberate vagueness. “Yeah, I
think you're right,” I admitted. “I do tend to be a bit more high-energy at the beginning of my week.” Request granted.

I must admit I felt a bit cowed by the experience. At first. Then I took the lesson to heart, compartmentalized the shame and resolved to be mindful of projecting my own stuff onto my clients. I also resolved to start each week with an “easy” client, or at least one whose issues would not be colored by any of my residual Monday Morning Blues.

The next Lightbulb Moment came at an enlightening professional seminar on the topic of codependency. The lecturer had just made the point that those of us in the helping professions tend to understand codependency from the inside out. Needing to Be Needed (by our clients). Sacrificing to Prove Our Own Worthiness (to ourselves). Silently Resenting (“everyone takes me for granted”).

“Yeah, I’ll bet this ballroom is bursting with self-sabotaging enablers,” I thought to myself, hooded eyes surreptitiously scanning the assemblage of psychotherapists.

During a subsequent break, I talked shop with Fellow Attendee, enthusiastically carping about how certain clients totally tap me out. “I have one guy who is so high-maintenance,” I said through clenched teeth, “that after the door closes behind him at the end of a session, I find myself bouncing on the balls of my feet and shaking out my hands, wishing the room was soundproof so I could scream at the top of my lungs.”

As Fellow Attendee happened to be a more seasoned therapist than I, but equally codependent, she began to therapize me. After a couple rounds of Socratic questioning it became clear that I had yet another blind spot in the scheduling department.

That is, giving back-to-back appointments to a Borderline and a Bipolar in manic mode simply ain’t smart. “Just because you have a certain slot open in your schedule doesn’t mean you have to offer it to the client,” she said. “You’re draining yourself for no good reason.” Ding! Ding! Ding! We have a winner!

A variation on that same theme: You are not obligated to accept every client who presents for therapy. “That’s why we do intake interviews before we assign anyone to a therapist,” Supervisor told me. “Not every client is appropriate for every setting.” Problem is, at times an inappropriate client slips through. For example: The Old Gent who had requested treatment, ostensibly for “anxiety and depression.” At the beginning of our initial session he made a show of digging deep into his pocket to — how shall I put it? — hoist his petard. I let it go, reasoning that, hey, we’ve all had an unbearable wedgie at some point, right?

“So, what brings you to seek counseling at this time?” I began.

Big smile, revealing Chiclet-white dentures: “So I can sit in a room alone with a pretty girl for an hour each week,” he answered.

“I hear sirens,” I thought. “Is there another kitchen fire at the restaurant next to our building?” Then, a realization: The only fire burning around here is the one in the loins of Prospective Client. The alarm bells I had heard were inside my head. Quickly I assessed whether I had a clear path to the door, confirming I had a “fire escape” if one became necessary.

Noting that Prospective Client appeared to suffer from chronic frontal wedgies at regular intervals throughout the hour, I begged off scheduling a second appointment when he requested one at the end of the session. “I don’t have any openings available next week,” I fibbed, despite his insistence that he would very much like to continue therapy with me right away. “Here’s my card. Call in a week and we’ll see if anything opens up.”

Long story short, Supervisor listened to my account and affirmed that I was wise to trust my gut. Prospective Client did, in fact, call back the next week. Supervisor had coached me to tell him that “based on what you shared with me about the longstanding pattern of trauma in your life and how it has affected you, it is clear that you need long-term therapy, and this agency offers only time-limited counseling.” Supervisor had made it clear to “blame it on the agency. Don’t tell him that your qualifications as a counselor don’t match his needs, because then he’ll probably just ask to see someone else here.” I provided him with a couple of appropriate referrals to satisfy his ethical duty, and thus Inappropriate Prospective Client was safely relegated to the Closed File pile.

Time for one last scheduling epiphany: At the agency where I work, Gatekeeper rings my phone extension once to alert me when a client has arrived. Within days of starting work there I became conditioned, much like Pavlov’s dog, to drop whatever I was doing at that moment and salivate profusely. Just kidding. Actually, I’d speed to reception to greet Client immediately. Even if Client had arrived early.

Newly aware that time is what one makes of it, I no longer regard Gatekeeper’s single telephone ring as a starting gun for a race against the clock. Instead, I think of it as a gentle wake-up call. A reminder that I do in fact have enough time to finish the thought I’m thinking. Or the breath I’m taking. Or the peanut butter sandwich I’m eating. This more peaceful perspective keeps me in the moment, which keeps me present in equal measure both to myself and to my client. Time is on my side.

“Learning Curve: Notes From a Novice” explores the unique challenges that fledging counselors face during the transition from the Ivory Tower of graduate school to the Real World of clinical practice. Students, new professionals, supervisors and seasoned counselors alike are invited to suggest topics, offer comments and share their experiences in future columns. Contact Suze Hirsh by emailing suze.hirsh@gmail.com.◆

Suze Hirsh is a state-registered intern in mental health counseling at a not-for-profit community social services agency in South Florida.

Letters to the editor: ct@counseling.org
Comprehensive examinations: Elements of a positive journey

For most doctoral students, passing comprehensive examinations is the first major hurdle in their academic journeys. In this month’s “New Perspectives,” Rochelle Cade shares the lessons learned from her exam preparation process.

Cade obtained a doctorate in counselor education from Texas A&M University-Corpus Christi in 2007. Currently, she is an assistant professor in the Department of Psychology and Counseling at Mississippi College and a licensed professional counselor.

Rochelle Cade

Comprehensive examinations, commonly called “comps,” can quiver the lips of even the most astute of students. Unfortunately, this apprehension is contagious and is passed from cohort to cohort as students share their dread, anxiety and horror stories about their own examinations. In the year leading up to my comps, I too heard anecdotes of students who threw up and of bizarre exam questions that left the most prepared students bewildered. Instead of expanding on the negative lore associated with comprehensive exams, I will share my journey and give voice to strategies I utilized that transformed the experience into something, dare I say, positive.

A year before I was scheduled to take comps, the cohort ahead of mine prepared for their comprehensive examinations. The metamorphosis of a cohort from lively doctoral students into solemn-faced zombies was hard to ignore. There was a low murmur in the hallways as they speculated on their success and worried about the consequences of failure. They gave stern warnings to upcoming doctoral students about sleep deprivation, mass coffee consumption and endless hours of preparation. As their testing time came and went, the atmosphere peaked in its intensity. Then, the rumor mill churned with fury. Stories emerged of lightning storms stealing electricity from students at crucial moments in their exam. I heard again and again how difficult the questions were, how monstrous preparation efforts had been in vain.

My cohort and I began the spiral downward into the depths of anxiety and trepidation as we realized our comp date was approaching. We struggled to find successful preparation strategies and pooled with the previous cohort to share their wisdom for survival. During one particular class, I realized I was on the hamster wheel of negativity and needed to get off. I examined my thoughts and realized I had been looking for a single strategy, a magic silver bullet, to get me through comps.

In preparing for comps, there were three essential elements to my success. I am sharing them in hopes that you may have a more positive journey as you prepare for your comprehensive examination.

Organization

My comprehensive exam covered CACREP’s eight common core curricular areas, and the faculty expected depth and breadth of knowledge in each core area. In my early efforts to study, I found that I was printing and reading anything related to the core areas. I had sizeable stacks of articles piled haphazardly all over my office. I felt completely overwhelmed with my stacks and struggled to connect meaning between articles.

I needed to develop a strategy for gathering articles and keeping them organized, both mentally and physically. I began to look for seminal works, time lines of the core areas and articles identifying current trends and future research as a search strategy. Next was a strategy to keep things physically organized. Articles were divided into core areas and then put in alphabetical order by the author’s last name. With my materials obtained and in an organized fashion, the chaos in my head and my office dissipated. I felt more at ease when studying.

Motivation

The next essential element in preparing was finding methods to generate and maintain the motivation to study. There were days when I was feeling energized and productive. I read, highlighted, took notes and retained information. Then there were days when I wanted to forget about comps and everything related to academia and organize my sock drawer or watch the Home Shopping Network. In the early phases of preparation, I let the days come and go and felt either productive or guilty for being unproductive. Somewhere in the midst of my pendulum swing of motivational efforts, I realized this “see what kind of outcome will happen” approach was not going to work out in the long run.

In my struggle to stay on track, I found two methods for motivation. My first method: visualizing where I wanted to be as a result of studying. On the days I had to drag myself to study materials, I closed my eyes and visualized the end result. I saw myself at graduation waving to my daughter while my family frantically snapped pictures. I opened my eyes after this visualization and felt a readiness to grab a highlighter and study.

My second method was a little more basic. I did something related to exam preparation every day. On days when I was having a motivational deficit despite my best efforts, I updated my bibliography, printed articles to be read on another day or organized my existing materials. These small strategies, along
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To nominate an exceptional student or new professional to be featured in “My life, my story,” email dfletche@westga.edu.

This month, Golden Fanning is featured as chair of the American Mental Health Counselors Association Graduate Student Committee.

Age: 26
Current residence: Athens, Ohio
School/program status: Currently pursuing doctorate in counselor education and supervision from Ohio University; M.Ed. in clinical mental health counseling from Ohio University; B.A. in psychology with minor in family relationships from Miami University.

Proudest professional accomplishments: My goal is to work with college students, so completing my master’s practicum and internship in a college counseling center was very rewarding. Also, during my doctoral program, I have supervised and taught a number of master’s counseling students and co-taught courses with accomplished faculty in my department. These opportunities shaped the learning experiences of future counselors, and to learn from those who are established in our field has been invaluable in my development as a counselor and future counselor educator.

Biggest challenge: Balancing the demands of a doctoral program with a job, personal life and professional involvement. It is extremely important to get involved in professional counseling organizations while in graduate school. They help students to develop a sense of professional identity and provide networking opportunities. While balancing can be challenging, my work with AMHCA has been beneficial to my development.

Words of advice for students: Explore your interests in the counseling field and get involved! Everyone has something to contribute to our field. Be active in professional organizations. Conduct research. Submit pieces for publication and present at conferences. These are just a few ways you can present ideas to others. The work we do as clinicians and counselor educators is valuable. We can learn from each other and collaborate to further shape our field!

Professional identity
Developing a strong sense of connection to my profession was my third and final element of success. After spending a significant amount of time with articles in each core area, I could readily associate authors and clinicians with topics and concepts and began to feel more comfortable with and connected to literature in the counseling field.

One day I looked up from reading an article and felt I was shedding my identity as a student and easing into a neophyte professional role. Coupled with this realization came a shift in my thinking about the entire comp process and my role in it. All along, I had seen myself as a doctoral student studying for a huge test and missed how much I was learning as a professional counselor. At that point, I stopped focusing on testing and started focusing on learning.

The strategies I am sharing are not intended to serve as a “how-to approach” for succeeding on comprehensive exams. Rather, they offer a means of creating a positive mind-set for comp — one that does not dwell on the amount of studying, preparation or array of negative emotions often associated with the examination.

Words of advice for students: Find your own way to prepare for your comprehensive exams. Understand that there are many ways to approach studying for your exams and choose the method that best suits you.

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Ph.D. in Counseling Psychology

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Making good first impressions by ... voice mail?

If you're like many counselors, much of your day is spent in session. Because of this, a new client's first contact often isn't with you — it's with your voice mail! An important question to answer is whether this first impression reflects competence, approachability and your unique personality.

You have reached the confidential voice mail of Joyce Drupal, M.A., licensed professional counselor and certified alcohol and drug counselor. I'm not available right now to take your call, but please leave a message, speaking slowly and clearly, and I will return your call within two business days. If you are experiencing a medical emergency, please hang up and dial 911 or go to your nearest emergency room. If you have an appointment and are driving to the office, park in the lot behind the building and not on Fifth Street where you WILL be ticketed [five seconds of fumbling as Joyce tries to hang up her phone and finally ... BEEP!]

Sound familiar? I make about 50 phone calls to counselors per week — and leave about 49 voice mail messages. Although it would be better to reach a live person, the real nuisance is the droning (and, dare I say, depressing) voice mail messages. They're too often uncreative, uninspired and, at times, unprofessional.

Let's raise the bar! Here are nine tips for improving counselor voice mail messages.

1) **Trim the fat.** Voice mail recordings are often too long. Trim them back! Does one really need to say, “I'm not available right now to take your call”? Isn't that self-evident? Is it necessary to recite degrees and certifications attained, or could a simple “This is counselor John Doe” suffice?

2) **Smile.** Smiles are audible. Broadcasters know that smiling when speaking literally changes their voices, making them sound more positive and energetic. Remember this, and always be smiling when recording an audio message.

3) **Provide value.** Try to give something of value to those who call in. An inspiring quotation, a kind word or even a well-told joke might improve a caller's experience. A few examples: “Don't forget to vote today”; “In the middle of difficulty lies opportunity” — Albert Einstein; “Happiness is not a place you arrive, but a way of traveling.”

4) **Hang up.** When you're finished with your message, end the call. Fumbling to hang up the phone can make one seem incompetent and might detract from a caller's confidence in the counselor's abilities.

5) **Um, write it out.** Having a script might sound a bit formal, but it aids in avoiding those “ums” and “uhs” that can creep in when recording a message. A script will also help you keep your message tight. However, you might need to practice reading through your script a few times so that you don't sound stiff.

6) **Update daily.** Time-sensitive updates are a double-edged sword. Having a voice mail that says “Today is Tuesday the 1st” can make you sound on top of your game — unless it's Wednesday the 2nd (or even Tuesday the 2nd).

7) **Consider your emergency instructions.** If your practice offers emergency procedures on voice mail, always have someone available to guide clients in crisis, and ethics codes address the issues of both client abandonment and emergency.

The ACA Code of Ethics, in Standard A.11.a., states “… Counselors assist in making appropriate arrangements for the continuation of treatment, when necessary, during interruptions such as vacations, illness and following termination.” Standard A.11.d. says, “When counselors transfer or refer clients to other practitioners, they ensure that appropriate clinical and administrative processes are completed …” And Standard A.12.g.9. states counselors are to “Inform clients of emergency procedures, such as calling 911 or a local crisis hotline, when the counselor is not available.”

Although this is a matter that can benefit from continued ethical debate, if a counselor discusses emergency procedures with clients during informed consent, there might not be a need to restate those procedures during phone mail.

8) **Return calls.** Let callers know when you're going to get back with them, and make this as short a time period as possible. If you offer 50-minute sessions, can you return calls between appointments? If so, say, “I return most calls within an hour.”

9) **Veto voice mail.** In a previous article, I wrote that to provide the best client experience, always have someone answer the phone, even if the live attendant can only take a message. There are many answering services available for
An easy win
Voice mail is low effort, yet high impact. Spending a few minutes preparing a quality message can help you not only to make a good first impression but also to serve your clients and your practice for months and years to come.

Anthony Centore is the founder of Thriveworks, a company that helps counselors get on insurance panels, find new clients and build thriving practices. Contact him at Anthony@Thriveworks.com.

Letters to the editor: ct@counseling.org
The Mindful Way Through Anxiety: Break Free From Chronic Worry and Reclaim Your Life

Likely due to an increasing number of significant research outcomes in clinical trials, a growing number of counselors are using, or examining the possibilities for, mindfulness-based treatment approaches. For those counselors treating anxiety disorders, the work of Susan M. Orsillo and Lizabeth Roemer offers an important resource. Grounded in a cognitive and behavioral background, these research clinicians have spent years studying and testing some of the leading modern medical adaptations of ancient mindfulness approaches to emotional wellness. Fortunately, Orsillo and Roemer are also clear writers who have previously provided counselors with practical and thoughtful clinician guides to implementing mindfulness-based counseling theories for mental health conditions, including anxiety disorders. This year, they have published The Mindful Way Through Anxiety, their first book aimed at laypersons struggling with anxiety.

The Mindful Way Through Anxiety can stand alone as an accessible self-help text, or counselors could use the book, as appropriate, to complement an individual treatment plan. Counselors already versed in mindfulness-based therapy will find the book worth reading because it offers a well-articulated and simply stated navigation of a comprehensive treatment approach. For counselors new to mindfulness-based approaches to anxiety, this resource is an engaging starting point for exploring how clients might view and experience the theory.

True to their acceptance-based application of mindfulness theory, Orsillo and Roemer start The Mindful Way Through Anxiety with nonjudgmental observations about the nature of anxiety and how a person’s relationship to anxiety affects his or her ability to live a valued life. The next section of the book explores how mindfulness practices relate to the mechanisms of anxiety. Building on these foundations, the remainder of the book lays out a path toward behaviors derived from values-based responses rather than habitually anxious reactions. Orsillo and Roemer carefully establish the vehicle for moving down the path as the space between reaction and response — a pause cultivated by friendly and nonjudgmental awareness of anxiety as it is observed and understood in the present moment. Each chapter includes mindfulness exercises, many of which are supplemented by audio guidance found on a publicly available website.

Throughout the book, the authors effectively use realistic and diverse vignettes to illustrate points. Clinicians might find these short stories useful reading for clients feeling alone in their symptoms or treatment challenges. Similarly, one of the book’s strengths is its well-paced, interwoven acknowledgments of the various difficulties and barriers clients can encounter as they explore and transform their relationship with anxiety. Consistent with the mindful acceptance approach, each potential obstacle is greeted as an opportunity to deepen the client’s awareness, self-compassion and ability to stay open and present with whatever challenge arises.

Although numerous books are being written for laypeople on mindfulness for emotional well-being, The Mindful Way Through Anxiety distinguishes itself as being particularly noteworthy of a counselor’s attention. Underlying this highly accessible guide is the authors’ depth of knowledge and experience with the current research and theory in this field. Further, Orsillo and Roemer’s language and content choices evidence an authentic compassion for our courageous clients who choose to face their anxiety. Reviewed by Sevilla P. Rhoads, associate mental health counselor, Present Health and Wellness P.L.L.C., Seattle.

When Kids Are Grieving: Addressing Grief and Loss in School

Author Donna M. Burns examines grief experiences at different developmental levels and illustrates ways to help students handle emotions associated with loss, promote communication and respect cultural attitudes toward loss and grief. The book will help educators and counselors to better understand and respond to the extraordinary challenges faced when dealing with grief and loss.

Burns captures the wisdom and sensitivity she has used in a lifetime of work with grieving families, encouraging us to discover our strengths as we mourn the people we have loved and lost. She also shines a spotlight on the profound grieving of young people, which many adults may not readily recognize as an issue that calls for sensitive support. The symptoms associated with childhood and young adult grieving are often mistaken for other issues because young people are so often indirect in the ways they process grief. Burns provides an excellent resource for preventing traumatic grieving, recognizing youthful grieving as it occurs and constructively responding to grieving youth at the individual, classroom and school levels.
The book is divided into seven chapters. The first chapter discusses topics related to counselor competence and factors that affect counselors’ attitudes and beliefs regarding loss. The second chapter addresses the dimensions of loss and the conceptual framework for understanding grief responses. The next two chapters examine factors related to child and adolescent grief and include tables reviewing Erik Erikson’s and Jean Piaget’s stages of development, as well as stages in children’s conceptualization and response to grief. The chapters cover adolescent development with respect to cognitive, social and emotional factors and offer a quick look at suicide and suicide prevention.

Chapter 5 provides tips for telling children about a death and highlights rituals and activities that might be conducted at school. Burns also reviews the healing role of humor in grief situations. Chapters 6 and 7 explain elements of school-based crisis response and resources that schools should have available. Burns also provides a review of preparedness, response and recovery, noting the functions and composition of school crisis response teams as well as the needed skills and training required of crisis responders. The book contains excerpts from materials by the National Association of School Psychologists on helping children cope with grief and loss, plus an article by Stephen Brock on best practices in school crisis prevention and intervention. When Kids Are Grieving also offers a useful review of resources through its annotated bibliography and a listing of online resources.

Written in a clear, concise style that is free of academic jargon, Burn’s book is a helpful guide for any counselor or educator trying to help children face one of life’s most difficult challenges. It features an easy-to-navigate format that allows for quick access to specific topics. Various case studies are mentioned, as are the related experiences of other authors. At the same time, the book’s contents are very well organized, coherent, practical and technical in approach.

This resource is a worthwhile read for practitioners who want to understand and respond appropriately to students’ unique expressions of grief, facilitate effective interventions and determine when to refer a child to a specialist. I highly recommend it.

Reviewed by Deeba Khumar, master’s student in clinical mental health counseling, Marymount University (Va.).

Drugs and Alcohol in the 21st Century: Theory, Behavior and Policy (eBook)


Drugs and Alcohol in the 21st Century is an electronic textbook that examines the collective response to substance use, abuse and addiction in America and how this has influenced previous and current national policy. Dwight Vick and Elizabeth Rhoades capture the complexity of creating and implementing an effective response to drugs and alcohol by exploring three major policy options: criminalization, legalization and harm reduction. Readers are made aware of the contexts and systems, such as health care and criminal justice, and other factors, including morality, religion and race, that influence policy. Groups that help to develop drug and alcohol policy are highlighted and cleverly named: ‘criminalizers’ for those who support strong prohibitive measures; ‘PHPers’ for public health providers who support education, treatment and prevention; and ‘BleepERS’ for those who recognize the merits of both groups. The text concludes with the authors’ argument that a rational substance abuse policy is needed, taking into consideration demand for some level of intoxication, cost of strict prohibition, relative risk of drug, market systems and the federal system.

From the beginning of the 400-page text, the reader is given a wide-angle lens to view addiction. Thirty chapters begin with a list of goals, more aptly described as a comprehensive and detailed chapter outline, and conclude with a case study. The lists of goals might prove useful to students for study and review purposes. Students reading the text will appreciate the accessible language and narrative writing style. Of particular interest to instructors using the text is Appendix C: Alcohol and Drugs in the Movies. Titles and brief descriptions of more than 100 movies with content about drugs or alcohol are included, making it a useful resource for instructors trying to find relevant movies or clips.

The electronic or digital format of the text, commonly called an electronic book, eBook, eTextbook or eText, has a number of benefits. One advantage is instant access to the text. Readers need not experience common bookstore issues such as used texts, limited copies, backordered texts or waiting in line either to purchase the book or to sell it back at the end of the semester. For $34.95, the text can be purchased (or what might better be described as “rented”) for 180 days, a considerably lower cost than buying most hardback textbooks. Although the text is an eBook, it can be checked out and read offline on a computer for those with limited or intermittent Internet access. Readers are able to highlight and keep notes within the eBook and can print as many as 10 pages of text at a time. The text format may be preferable for younger generations of readers who are increasingly competent and comfortable with technology.

Although the benefits of the electronic format are evident, there are also a number of challenges. Currently, there is no print version of the text available, and the eBook can be purchased from only one source, CourseSmart (coursesmart.com). Four ISBN numbers, including a 10-digit ISBN and a 13-digit ISBN for print versions of the text, are listed on CourseSmart’s website. After seeing this, a reader might logically, yet incorrectly, assume that a print version of the text is available. Readers who prefer a traditional textbook to keep beyond the duration of a course or those who are not as technologically savvy may find themselves disappointed with this eBook.

Instructors should note that resources such as test banks and PowerPoint slides are not provided for this text.

Although this resource is intended for use as a primary text for undergraduate and graduate drug and alcohol policy courses, instructors of various disciplines, including counseling, might find it valuable as a supplemental text.

Reviewed by Rochelle Cade, Assistant Professor, Mississippi College.

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A student’s perspective

As a doctoral student in rehabilitation counseling, my membership in professional counseling organizations offers a number of benefits. It provides a community for educational and professional growth and a network of individuals committed to improving all aspects of counseling. Perhaps the most beneficial aspect of membership for me comes from reading and exploring the professional literature that the American Counseling Association and its divisions publish.

My focus within the rehabilitation counseling field is on the assessment, counseling, career development and career counseling of individuals who face barriers to competitive employment. As such, for this “Spotlight on Journals” column, I am highlighting the most current research articles in ACA-affiliated publications related to these topics and discussing my perspectives as a student.

Counselors-in-training not confident about conducting career counseling

Not a day goes by in which we don’t see a newspaper column or news report on the unemployment rate and the volatile and unpredictable nature of the current U.S. job market. Despite the pressing need, I have been told there is a shortage of well-trained career counselors to help the unemployed and underemployed find jobs.

Why is this? Tracy M. Lara, William B. Kline and Donald Paulson point out possible reasons in “Attitudes Regarding Career Counseling: Perceptions and Experiences of Counselors-in-Training” in the September 2011 issue of The Career Development Quarterly. They used grounded theory methods and analytic procedures in their study. Their goal was to explore the perceptions of master’s-level students in CACREP-accredited counselor education programs related to career counseling. Although participants in the study believed they had learned the importance of career development and the skills and concepts necessary for career counseling, they did not feel competent to conduct career counseling. That is, despite the theoretical knowledge, students who participated in the study were not confident in their abilities to provide competent career counseling services. The authors propose that graduates of counseling programs are unlikely to enter professional arenas — in this case, career counseling — if they feel they do not possess the necessary self-efficacy to do so. Although the small sample size was a limitation in this study, the authors demonstrate the need for well-trained career counselors to combat the current high unemployment rate.

The researchers offer several recommendations to “maintain the legacy of vocational guidance.” For example, they propose making connections between career concepts and other content areas by incorporating examples of career issues throughout the curriculum in courses such as ethics, multicultural counseling, human development and consultation. The authors also recommend that faculty members continue to stress the role and importance of career counseling and convey the crucial nature of the profession to students.

Factors that facilitate successful transitions for immigrants

In the September 2011 issue of the Journal of Employment Counseling, Norman E. Amundson, Thomas Yeung, Iris Sun, Keith Chan and Johnny Cheng discuss what accounts for the successful transition of Chinese immigrants to Canada in their article, “The Transition Experiences of Successful Chinese Immigrants.” The researchers used an exploratory interview-based approach to summarize the success stories of the 20 participants — some of whom were relatively new to the country, while others were well-established — to learn more about what facilitates a successful transition experience.

The authors identified four major success categories on the basis of the participants’ stories: positive attitude and personality, education and work experience, utility of skill and resource development, and community and family support. Ten of the participants had received some form of employment services and cited this as a factor in their successful transition experience. They reported that it was helpful to learn how to write a résumé, learn job search skills and acquire up-to-date labor market information. The respondents were generally very satisfied with the employment services they had received. Other respondents participated in a social service program (S.U.C.C.E.S.S) located in the Canadian province of British Columbia that provides services for English-as-a-second-language training, employment, family counseling, housing and other services.

The researchers concluded that key factors for making a successful transition include being confident, being persistent and maintaining a positive attitude in all situations. These traits were enhanced through education and developing connections and networking in the community. Conversely, the authors noted that certain factors interfered with making a successful transition, such as a
lack of English-language skills, cultural differences, employers’ unwillingness to hire foreign employees, financial pressures and a lack of awareness of service possibilities, among others.

As the researchers point out, this was a preliminary study with only 20 participants. The diversity of the group was also limited, and there was a direct link to only one social service agency. Despite the limitations, the researchers showed that the results warrant further discussion and research into the transition experiences of successful immigrants, perhaps to include a broader range of people and adding the perspective of employers.

**Influences on sexual minority women’s career aspirations**

Lesbian, gay, bisexual and transgender individuals have received increased attention in professional literature in recent years in disciplines such as school psychology and school counseling. Lauren Fisher, George Gushue and Michelle Cerrone note a similar emergence of research focused on career-related issues and the career development of sexual minorities. In their article “The Influences of Career Support and Sexual Identity on Sexual Minority Women’s Career Aspirations” in the September 2011 issue of *The Career Development Quarterly*, the authors examined the relationship between sexual identity, family and friend career support and the career aspirations of 381 sexual minority women.

The researchers used a combination of a demographic questionnaire, the Lesbian, Gay, Bisexual Identity Scale, the Career Aspiration Scale and the Career Support Scale to gather data. Their participants included self-identified lesbian, bisexual and questioning women, most of whom possessed some form of higher education. Fisher, Gushue and Cerrone used social cognitive career theory (SCCT) as a framework to investigate the influence of family and friend career support and sexual identity on the career aspirations of their sample. The researchers expected that higher friend and family career support would correlate with higher career aspirations, while those who experienced more negative beliefs and feelings related to their sexual identity would have lower levels of career aspirations.

Using a multiple linear regression analysis with career aspirations as the dependent variable, the researchers explored the relationship between the variables of interest. By controlling for demographics and background characteristics, the researchers’ results indicated a positive relationship between friend/family career support and career aspirations. They found that sexual minority women in a committed relationship had higher career aspirations than their counterparts who were not in a committed relationship. Unexpectedly, the researchers found that negative beliefs and feelings women have regarding their sexual identity were not significantly related to career aspirations. The researchers noted that the relationship between family career support and career aspiration level seemed to be conditional on the level of negative sexual identity. In other words, for those women with higher levels of negative sexual identity, family career support seemed to be higher. The authors stated this finding reinforces the application of SCCT because the family career support interacted with the sexual identity to predict the career aspirations of the sexual minority women.

The researchers noted a number of implications for research and practice. In terms of research, due to the connection found between women in committed relationships and higher career aspirations, future studies may want to examine the influence of partner career support on sexual minority women’s career aspirations. In terms of practice, the authors explain that career counselors should explore the support systems of sexual minority women and how those systems have facilitated their career development. Career counselors are in a position to help these women identify other sources of career support to positively facilitate career aspirations.

Taken together, these articles illuminate contemporary issues in career counseling, a field that is increasingly important in these difficult economic times. Readers, including graduate students, interested in this field will do well to read these articles in full.

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Inside the DSM-5 - By K. Dayle Jones

APA divisions issue open letter to DSM-5 Task Force

Toward the end of October, three major divisions of the American Psychological Association — the Society for Humanistic Psychology (Division 32), the Society for Community Research and Action-Community Psychology (Division 27) and the Society for Group Psychology and Psychotherapy (Division 49) — expressed several criticisms concerning the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders in an open letter to the DSM-5 Task Force and the American Psychiatric Association. Because of space constraints, I am providing an abridged version of the letter here, but the entire document can be accessed at ipetitions.com/petition/dsm5/.

To the DSM-5 Task Force and the American Psychiatric Association:

Though we admire various efforts of the DSM-5 Task Force, especially efforts to update the manual according to new empirical research, we have substantial reservations about a number of the proposed changes that are presented on www.dsm5.org. As we will detail below, we are concerned about the lowering of diagnostic thresholds for multiple disorder categories, about the introduction of disorders that may lead to inappropriate medical treatment of vulnerable populations, and about specific proposals that appear to lack empirical grounding. In addition, we question proposed changes to the definition(s) of mental disorder that deemphasize sociocultural variation while placing more emphasis on biological theory. In light of the growing empirical evidence that neurobiology does not fully account for the emergence of mental distress, as well as new longitudinal studies revealing long-term hazards of standard neurobiological (psychotropic) treatment, we believe that these changes pose substantial risks to patients/clients, practitioners, and the mental health professions in general.

In more detail, our response to DSM-5 is as follows:

Advances Made by the DSM-5 Task Force

We applaud certain efforts of the DSM-5 Task Force, most notably efforts to resolve the widening gap between the current manual and the growing body of scientific knowledge on psychological distress. In particular, we appreciate the efforts of the Task Force to address limitations to the validity of the current categorical system.

However, we have serious reservations about the proposed means for doing so. Again, we are concerned about the potential consequences of the new manual for patients and consumers; for psychiatrists, psychologists, and other practitioners; and for forensics, health insurance practice, and public policy. Our specific reservations are as follows:

Lowering of Diagnostic Thresholds

The proposal to lower diagnostic thresholds is scientifically premature and holds numerous risks. Diagnostic sensitivity is particularly important given the established limitations and side-effects of popular antipsychotic medications. Increasing the number of people who qualify for a diagnosis may lead to excessive medicalization and stigmatization of transitive, even normative distress. As suggested by the Chair of DSM-IV Task Force Allen Frances (2010), among others, the lowering of diagnostic thresholds poses the epidemiological risk of triggering false-positive epidemics.

We are particularly concerned about:

- The reduction in the number of criteria necessary for the diagnosis of Attention Deficit Disorder, a diagnosis that is already subject to epidemiological inflation.
- The reduction in symptomatic duration and the number of necessary criteria for the diagnosis of Generalized Anxiety Disorder.

Vulnerable Populations

We are also gravely concerned about the introduction of disorder categories that risk misuse in particularly vulnerable populations. For example, Mild Neurocognitive Disorder might be diagnosed in elderly with expected cognitive decline, especially in memory functions. Additionally, children and adolescents will be particularly susceptible to receiving a diagnosis of Disruptive Mood Dysregulation Disorder or Attenuated Psychosis Syndrome. Neither of these newly proposed disorders have a solid basis in the clinical research literature, and both may result in treatment with neuroleptics, which, as growing evidence suggests, have particularly dangerous side-effects (see below) — as well as a history of inappropriate prescriptions to vulnerable populations, such as children and the elderly.

Sociocultural Variation

The DSM-5 has proposed to change the Definition of a Mental Disorder such that DSM-IV’s Feature E: “Neither deviant behavior (e.g., political, religious, or sexual) nor conflicts that are primarily between the individual and society are mental disorders unless the deviance or conflict is a symptom of a dysfunction in the individual,” will instead read “[A mental disorder is a behavioral or psychological syndrome or pattern] [that is not primarily a result of social deviance or conflicts with society].” The latter version fails to explicitly state that deviant behavior and primary conflicts between the individual and society are not mental disorders.
Revisions to Existing Disorder Groupings

Several new proposals with little empirical basis also warrant hesitation:
- Attenuated Psychosis Syndrome and Disruptive Mood Dysregulation Disorder (DMDD) have questionable diagnostic validity, and the research on these purported disorders is relatively recent and sparse.
- The proposed overhaul of the Personality Disorders is perplexing. It appears to be a complex and idiosyncratic combined categorical-dimensional system that is only loosely based on extant scientific research.
- The Conditions Proposed by Outside Sources that are under consideration for DSM-5 contain several unsubstantiated and questionable disorder categories. For example, “Apathy Syndrome,” “Internet Addiction Disorder,” and “Parental Alienation Syndrome” have virtually no basis in the empirical literature.

New Emphasis on Medico-Physiological Theory

Advances in neuroscience, genetics, and psychophysiology have greatly enhanced our understanding of psychological distress. The neurobiological revolution has been incredibly useful in conceptualizing the conditions with which we work. Yet, even after “the decade of the brain,” not one biological marker (“biomarker”) can reliably substantiate a DSM diagnostic category. In addition, empirical studies of etiology are often inconclusive, at best pointing to a diathesis-stress model with multiple (and multifactorial) determinants and correlates. Despite this fact, proposed changes to certain DSM-5 disorder categories and to the general definition of mental disorder subtly accentuate biological theory. In the absence of compelling evidence, we are concerned that these reconceptualizations of mental disorder as primarily medical phenomena may have scientific, socioeconomic, and forensic consequences. New emphasis on biological theory can be found in the following DSM-5 proposals:
- The first of DSM-5’s proposed revisions to the Definition of a Mental Disorder transforms DSM-IV’s versatile Criterion D: “A manifestation of a behavioral, psychological, or biological dysfunction in the individual” into a newly collapsed Criterion B: “A behavioral or psychological syndrome “That reflects an underlying psychobiological dysfunction.” The new definition states that all mental disorders represent underlying biological dysfunction. We believe that there is insufficient empirical evidence for this claim.
- The proposed reclassification of Attention Deficit/Hyperactivity Disorder (ADHD) from Disorders Usually First Diagnosed in Infancy, Childhood, or Adolescence to the new grouping “Neurodevelopmental Disorders” seems to suggest that ADHD has a definitive neurological basis. This change, in combination with the proposal to lower the diagnostic threshold for this category as described above, poses high risk of exacerbating the extant over-medicalization and over-diagnosis of this disorder category.
- A recent publication by the Task Force, The Conceptual Evolution of DSM-5, states that the primary goal of DSM-5 is “to produce diagnostic criteria and disorder categories that keep pace with advances in neuroscience.” We believe that the primary goal of DSM-5 should be to keep pace with advances in all types of empirical knowledge (e.g., psychological, social, cultural, etc.).

Taken together, these proposed changes seem to depart from DSM’s 30-year “atheoretical” stance in favor of a pathophysiological model. ... We thus believe that a move towards biological theory directly contradicts evidence that psychopathology, unlike medical pathology, cannot be reduced to pathognomonic physiological signs or even multiple biomarkers.

Conclusions

In light of the above-listed reservations concerning DSM-5’s proposed changes, we hereby voice agreement with BPS (the British Psychological Society) that:
- “…clients and the general public are negatively affected by the continued and continuous medicalization of their natural and normal responses to their experiences; responses which undoubtedly have distressing consequences which demand helping responses, but which do not reflect illnesses so much as normal individual variation.”
“The putative diagnoses presented in DSM-V are clearly based largely on social norms, with ‘symptoms’ that all rely on subjective judgments, with little confirmatory physical ‘signs’ or evidence of biological causation. The criteria are not value-free, but rather reflect current normative social expectations.”

“… [taxonomic] systems such as this are based on identifying problems as located within individuals. This misses the relational context of problems and the undeniable social causation of many such problems.”

There is a need for "a revision of the way mental distress is thought about, starting with recognition of the overwhelming evidence that it is on a spectrum with ‘normal’ experience” and the fact that strongly evidenced causal factors include “psychosocial factors such as poverty, unemployment and trauma.”

An ideal empirical system for classification would not be based on past theory but rather would “begin from the bottom up — starting with specific experiences, problems or ‘symptoms’ or ‘complaints.’”

The present DSM-5 development period may provide a unique opportunity to address these dilemmas, especially given the Task Force’s willingness to reconceptualize the general architecture of psychiatric taxonomy. However, we believe that the proposals presented on www.dsm5.org are more likely to exacerbate rather than mitigate these longstanding problems.

The Publications Committee of the American Counseling Association (ACA) is seeking applications for editor of the Journal of Counseling & Development (JCD), ACA’s flagship journal. Selection criteria for the position include the following:

- Previous experience as a journal editor
- A publishing record that includes scholarly publications in peer refereed journals
- A history of involvement in and contribution to ACA through its divisions, organizational affiliates, branches, governing bodies, and/or committees
- An understanding of and commitment to the mission of the association
- A belief in the importance of promoting multicultural competence in counseling
- A solid commitment from the applicant’s university/employer for financial and editorial support

The appointment of editor is for a 3-year term beginning July 1, 2013. The successful candidate will begin serving as editor-elect July 1, 2012. There is a possibility for the editor to be reappointed for a second 3-year term. The JCD editor receives a $1,000 monthly honorarium as well as some reimbursement for journal-related expenses.

Applicants must be ACA members and bilingualism is a plus. For an applicant to be considered by the ACA Publications Committee, the following material must be provided:

- A current curriculum vitae
- A complete list of publications and reprints of no more than three of the applicant’s most significant journal articles
- A statement from the applicant discussing his or her intended editorial direction for the Journal of Counseling & Development
- A statement from an administrator of the applicant’s institution/employer describing support for the appointment

All applications must be received no later than December 31, 2011. Late or incomplete applications will not be considered. The Publications Committee will screen all candidates and present its top nominees, in ranked preference, to the Governing Council for approval at the ACA Annual Conference & Exposition in San Francisco, March 21–25, 2012.

Send application material for receipt by December 31, 2011 to

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Letters to the editor:
counseling.org
Two New ACA Podcasts

A Harvard Child Psychiatrist Explores the Mystery of Her Own Mother’s Suicide
Podcast HT027

Nancy Rappaport
Nancy Rappaport, M.D., a graduate of Princeton University and Tufts University School of Medicine, is a board certified child and adolescent psychiatrist. She is assistant professor of psychiatry at Harvard Medical School.

Learn more about:
- What she learned about suicide and how it affects the way she works with patients and families today
- The role of impulsivity in suicide and perceived burden of someone who is suicidal
- Advice for ACA members who are practicing clinicians
Running time: 45:00

Reflecting As If (RAI): Adler and Constructivists Unite
Podcast HT026

Richard E. Watts
Richard E. Watts, Ph.D., LPC-S, a Diplomate in Adlerian Psychology, North American Society for Adlerian Psychology, is the Distinguished Professor and Director of the Center for Research and Doctoral Studies in Counselor Education, Department of Educational Leadership & Counseling at Sam Houston State University.

Learn more about:
- The theoretical foundations of RAI
- The specific steps for using RAI with a client
- How RAI fits within the evidence based climate so common today
Running time: 52:25

Visit www.counseling.org and click on ACA Podcasts on the right.

All podcasts are free to ACA members. Add to your iPod or download to your computer.
I n the world of stereotypes, a counseling session goes something like this: The client lays on the couch, revealing his innermost thoughts to the therapist, who sits in a leather chair, glasses perched low on her nose as she slowly nods and inquires, “And how did that make you feel?”

In reality, though, talk therapy isn’t the only game in town when it comes to helping today’s clients. Active interventions of all kinds are gaining in popularity among counselors and clients alike.

In D.B. Palmer’s corner of the country, counseling sessions consist of everything from Nordic skiing to yoga to “walking sessions,” which are arranged like any other traditional 50-minute counseling session, except they take place along the 300 acres of trails at Alaska Pacific University (APU) in Anchorage, where Palmer serves as director of the school’s Counseling and Wellness Center.

Palmer, also a private practitioner and member of the American Counseling Association, remembers supervising counseling sessions with a client who was progressing well while engaging in cognitive therapy work with her counselor. “She mentioned one day to her counselor that while she felt competent in her thinking, she felt that something was missing and that she woke up each morning feeling anxious,” Palmer says. “She knew that she was overweight, eating poorly, not exercising and missed doing these things well. She just wasn’t committed enough to go do them herself. While I was supervising the counselor, I mentioned that this client would be a great fit for our walking sessions, and things have taken off from there. She’s feeling confident, losing weight, eating better, sleeping better, and her anxiety about these things is almost gone.”

With the Alaskan wilderness in his backyard, outdoor counseling interventions are a natural fit for Palmer’s work. But counselors who don’t live near rugged mountains or flowing streams shouldn’t automatically feel couch-bound either. Engaging clients in active interventions can take place just as easily inside the office.

Christopher Old, who runs a private practice in Truckee, Calif., entered the counseling profession by way of his background in experiential education. Although he harbors aspirations of eventually working with his counseling clients outdoors, for now, due to potential liability risks and logistics, his active interventions occur inside the confines of his office. Even so, Old finds that active interventions open clients to insights they might not otherwise arrive at through traditional talk therapy alone.

Old recently tried out an activity called “Minefield” with a teenage student client who was struggling to stay motivated and focused at school. On the floor of
his office, Old laid out a number of “obstacles” in the minefield that the client had to avoid. Among the ways the client chose to label the obstacles: “showing off for friends,” “not managing time,” “not studying” and “having an angry attitude in class.” Old first asked the client to walk through the minefield with his eyes open and avoid the obstacles. Easy. He then instructed the student to close his eyes and try the process again. Not so easy that time.

When Old asked if the client thought he could walk through the minefield with his eyes closed and still avoid all the obstacles, the boy said no. So, Old said he would give it a try himself. The counselor closed his eyes but then did something the boy hadn’t thought of — asked for help in being guided through the minefield. “It was a total lightbulb moment for ‘Oh, I can ask people for help,’” says Old, a member of ACA. “In past therapy sessions, he had mentioned that idea about asking for help. But it didn’t really register with him until he saw it in action.”

The client took a turn navigating the minefield with his eyes closed while partly relying on Old’s guidance, and he was successful. In subsequent counseling sessions, Old noticed a significant difference in the boy’s behavior and attitude. “He would say, ‘I’ve got this thing I’m trying to figure out. Can you help me?’” Old says.

Active interventions are sometimes criticized for being merely “game playing,” Old says, but as used in counseling, the interventions have intentionality. Counselors who use active interventions also lead clients through processing afterward, assisting them in understanding how to apply what they have learned from the activity to their lives outside the office. To be effective with this approach, Old emphasizes that counselors must choose a particular activity for each client on the basis of the client’s specific needs and situation. “The main idea is that as the therapist, you tailor the activities and the debrief based on what the client is bringing into the session and what the therapeutic goal is for the session,” he says. “It is a very intentional use of activities versus just game playing.”

Seeing behaviors firsthand
As evidenced by Old’s and Palmer’s examples, active interventions can be very effective as part of individual counseling, but they also lend themselves well to group work. The unique benefits of conducting activities with groups are that the clients’ social interactions present themselves and the group members process what is happening and offer feedback, says David Christian, a doctoral student in the counseling program at the University of North Texas.

Christian, an ACA member who has used active interventions with children in a foster home and students at a local high school, says his work falls under the umbrella of adventure-based counseling (ABC), which he describes as the use of active interventions based in experiential learning as typically conducted in groups. “During ABC, the participants exhibit behaviors that are often the reason they are in counseling,” he says. “During the processing time, participants are able to receive feedback from the counselor as well as the group members on how their behavior impacted the group as
Regardless of the age group or the size of the group with which the counselor is working, it is imperative to know about the group members’ needs, Christian says. With groups at the foster home, trust was a big issue with many of the children, so Christian chose activities designed to build trust rather than activities that required a significant level of existing trust to accomplish.

Active interventions allow counselors to experience clients’ behaviors firsthand instead of relying on accounts from parents, family members, teachers or other secondary sources, Christian says. Jeffrey Ashby, a professor in the Georgia State University Department of Counseling and Psychological Services, agrees. For instance, in watching a family interact through the course of an activity, a counselor can quickly see the same processes being reproduced that the family uses outside of the counseling session, Ashby says.

That real-life effect can make activities potentially powerful or destructive, so a counselor must be mindful of that, Ashby says, but at the same time, it’s helpful for the counselor to see the behavior reveal itself in session. “Clients will catch themselves being themselves [during these activities],” says Ashby, coauthor with Terry Kottman and Donald DeGraaf of Active Interventions for Kids and Teens: Adding Adventure and Fun to Counseling!, published by ACA in 2008.

The process surrounding the activity is the most important element to the intervention’s success, according to Old. From the start, he says, counselors must assess where clients are at currently and then, on the basis of that assessment, tailor an activity that will help them get to where they want to be. Before jumping into action, the counselor might choose to “frontload” the activity, Old says, introducing it to clients and describing where the counselor hopes it will lead. “Sometimes the introduction is nothing at all, and I won’t give them anything specific to think about,” he says. “But sometimes, I will. I’ll say something like, ‘Think about ideas surrounding communication when you’re doing this activity.’”
Depending on the intervention, the activity might run start to finish without setting time aside in the middle for reflection, so as not to interrupt the flow of the activity, Old says. In those cases, the counselor and client would debrief afterward. But in other instances, he says, a counselor might jump on an opportunity to shine a spotlight on something during the course of an activity. “Sometimes if [I] see things in the moment — a pattern or a dynamic that has been difficult — I’ll stop them and say, ‘What did you see just happen there? What effect did it have? What were you feeling?’ so that you don’t lose the teaching moment.”

Christian agrees, saying he’s learned not to get so hung up on the activities themselves. If a counselor notices something worth addressing during an activity, he or she should stop the group and talk about it, Christian says. Similarly, if a client has an “aha” moment while engaging in an activity, the counselor should let the client speak up. Debriefing after an activity includes asking clients about what went on and
what they experienced, Old says. “What you focus this discussion on will depend on the goals of the activity — remember the part about intentionality being important — and what happened while doing the activity. So, I will ask the client questions about what doing the activity was like and what was going on for them during the activity. We will talk both about behaviors — ‘What happened?’ — and thoughts — ‘What were you thinking about when you did this?’”

Old will often start the debrief with general questions and then move to more specific ones, especially if he needs to guide the client’s thinking toward the topic at hand. “For example, after doing an activity connected to the theme of reaching life goals, [such as with] the minefield activity, I might ask, ‘How easy or difficult was it to reach your goal in that activity? What made it easier for you or more difficult? What could you have done differently?’ I may also point out specific behaviors I witnessed during the activity and talk about those. For example, if I saw someone give up easily without asking for help, I might ask them about that: ‘What were you thinking about when you decided to give up? Did you consider asking for help at that time?’”

The nature of the debriefing segment might also depend on the counselor’s theoretical orientation, Old says. “For example, a CBT (cognitive behavioral therapy) therapist is more likely to focus on the thoughts going on during the activity. A solution-focused therapist might debrief focused on what worked well during the activity and how to do more of that. A psychoanalytic therapist might ask the client to tie what happened in the activity to what has happened in the past, etc.”

The final part of post-activity debriefing is to generalize the experience, Old says. “In this part of the discussion, I will ask my clients how the ideas learned in the activity can be applied to other situations in their life. For example, if a couple has just done a problem-solving activity successfully and we have discussed what led to that success, I will ask them about other problems in their relationship [to which] they could apply the tools they just learned. We will talk about what that would look like and maybe make a plan to give it a try. This generalizing part of the debrief really deepens the learning from the experience and helps client use what they have learned outside of the office.”

During debriefing, also known as processing or backloading, Christian follows David Kolb’s experiential learning model but adds a “therapeutic twist.” First, Christian discusses with the group what it did and asks the group members to tell him what happened. Next, they explore the “So what?” question. Christian says this question encourages group members to think about why the group did what it did and why things happened the way they did.

Then, Christian asks a final question: Now what? “During this time of the processing, we focus on transferring the new insights, knowledge and understanding to the clients’ everyday lives,” he says. “How is what we learned today relevant to their lives outside of counseling? I rely heavily on my counseling skills of reflection, active listening, summarizing and having established a strong therapeutic relationship with the clients.”

**Counseling in the great outdoors**

In his work at APU, Palmer’s clients at the counseling center include traditional college-age undergraduates, adult undergraduates, rural Alaskan Natives, graduate students, staff and faculty members, and associated family members of those groups. “It’s a wide population that covers our entire community,” he says.

The array of active counseling interventions Palmer offers is as varied as his client base. In addition to participating in Nordic skiing, yoga and walking sessions, Palmer’s clients can go running with him while they’re receiving counseling or take a retreat to the university’s 700-acre organic farm. In the spring, Palmer says the university will also be initiating a community garden where counseling sessions could take place. Palmer also offers workshops for clients on topics such as art therapy, relaxation techniques and stress management.

The university counseling center offers parent-child activity groups, in which students who are parents can bring their kids and engage together in play therapy activities facilitated by counselors in the gym or outdoors. “Students with children are often swamped with work, responsibilities of parenting and finances, and many Alaskan students are far from home networks,” Palmer says. “These sessions allow parents to reconnect, to learn from counselors and to have a safe place to play with their kids.”

Faculty and staff wellness is also prioritized on campus, Palmer says. Faculty and staff members have access to the same services offered to the
students. They also get time off each week to take part in wellness events and programs, including dodgeball, botany walks, snowshoeing, canoeing and more. “APU employees recognize that doing our jobs well means staying fit, and that means mentally as well as physically,” Palmer says. “All staff and faculty are afforded free services through my office, [including] walking, running and skiing sessions.”

Counselors at the university attend and facilitate during university block courses, Palmer says, including a swift-water guiding course, an introduction to wilderness skills and winter leadership skills. In addition, Palmer offers a wilderness therapy retreat series to students and mental health practitioners on topics such as leadership skills, professional counseling skills, and mindfulness and ecopsychology.

All the active interventions Palmer leads through the university are activities he independently offers to his private practice clients as well. In addition, through his private practice, he takes clients on seasonal treks, including sea kayaking, rafting, dogsledding, backpacking and canoeing. Palmer also offers four- to seven-day wilderness/adventure-based counseling treks for individuals, couples, groups and families.

“The range of benefits are very wide,” Palmer says about the treks. “Primarily, we work with a parent and child. However, we are getting more calls for entire families and couples. We work with each family to determine [its] needs and design a custom program. These programs can include options such as dogsled expeditions, rafting or canoeing trips, or backpacking options. Every option is unique, and I pay special attention to the family’s needs and goals in designing each trek.”

An example of a one-session activity Palmer often uses in private practice is adventure hiking. “We don’t plan any particular route, as we’re not running an outfitting business,” says Palmer, whose wife, Greta, is a partner in their practice as a personal fitness counselor and life coach. “We take hikes in our local mountains. Anchorage has lots of mountain trails, and these trails are heavily used by our adventurous residents. We’ll meet up at the trailhead, check our gear, as we’re both responsible for our own gear and safety, and head out for one to two hours of hiking. We can tailor these sessions from mild to extreme difficulty levels, while engaging in our session.”

With most of the activities, including walking, Nordic skiing and trail running, Palmer says the counseling session takes place during the activity. Perhaps surprisingly, Palmer says he hasn’t found the activities to reduce the amount of conversation possible. “In fact, I’ve found that our activities clarify and expand the thinking process and thus, the therapeutic dialogue is greatly enhanced,” he says. “Our active sessions also have the added benefit of adding a construct to our session. With a walking session, the client can breathe the fresh air, reflect on environmental stimuli and notice the interactions that occur around us. For example, if we are walking past a park bench with an elderly couple sitting and talking, the client may reflect on their own parents, grandparents, their marriage, their children and their own hopes for the future.”

Palmer says he merely mentions active interventions as an option for clients rather than having every client engage in them automatically. As more people come to recognize the links between wellness and mental health, clients have also asked him about active options during the intake process or phone screenings.

In addition to his counseling credentials, Christian is a level-one certified challenge course facilitator and has facilitated ABC on ropes courses. Challenge courses can offer therapeutic opportunities for counselors and groups, Christian says, particularly in areas such as life metaphors, goal setting and teamwork. One downside, he says, is that many counselors might not have easy access to nearby challenge courses. Counselors must also complete required training if they want to facilitate on the courses, Christian points out.

Take it inside
Although it can be an advantage to get outside with certain clients, Ashby says that’s not always possible or even necessarily the best strategy in all cases. For instance, in a school setting, he says, going outside is a form of breaking confidentiality. And even in other
Walking the labyrinth

Not surprisingly, the campus of Central Michigan University doesn't feature an ancient outdoor labyrinth. So Michelle Bigard has her clients at the university's counseling center tap into the therapeutic benefits of a 24-foot indoor canvas labyrinth instead.

Bigard, a counselor and associate professor, describes labyrinths as meditative walking paths that feature a circle to represent wholeness and unity, a spiral to represent transformation and change, and a quadrant to represent order. “So you have change and order in a safe setting, which is why we think it’s such a powerful symbol,” she says.

Historically, there are two main labyrinth patterns: medieval and classical. A classical labyrinth has fewer paths than a medieval labyrinth, Bigard says, so a classical labyrinth can be helpful in moving larger groups through more quickly, whereas a medieval labyrinth can lend itself to a slower, more contemplative walk. Both labyrinths styles are useful in either individual or group work, Bigard says, because they assist clients in slowing down and becoming more self-reflective and self-aware.

The idea is to walk toward the center of the labyrinth, reflecting and remaining open to what thoughts and images come to mind, Bigard explains. When people reach the center, they can stand or sit for as long as they want before walking the path back out and exiting.

Bigard encourages clients to remain open to the experience and to the metaphors that often reveal themselves. “If the narrow turns drive you nuts,” she says, “you can reflect metaphorically on that: ‘Where are the tight turns in my life?’” The hope in doing the exercise, Bigard says, is that clients will learn something about themselves and figure out how to apply that knowledge in their lives.

Whether individually or in a group, after clients finish walking the labyrinth, they can process the experience with the counselor. Bigard says counselors who do labyrinth work ask clients processing questions such as “What metaphors showed up for you? What meaning does this have for you? How do you want to apply what you felt or learned [in the labyrinth] in your life? What’s it like to hear someone else had a similar experience in walking the labyrinth?”

Labyrinth work can be relevant for almost any type of client, Bigard says, but she thinks it’s especially helpful in situations of loss, change, transition and trauma. Among trauma survivors, a spiritual wound and a wound of trust often exist, Bigard says. The labyrinth offers clients dealing with trauma a safe and containing place that is enclosing but not engulfing, she says.

But labyrinth work isn’t beneficial only to clients, Bigard says. It can be useful to counselors in their own self-care as well. Counselors can walk a labyrinth to enhance their stress management, self-awareness and personal growth, she says.

Bigard suggests that counselors interested in leading labyrinth work first try it out for themselves and also undergo training. She points to a facilitation process through Veriditas (veriditas.org) as one option for training.

— Lynne Shallcross

settings, he says, it can be problematic to go outside because of the difficulty of anticipating how private an outdoor space might be.

Inside Old’s office, he uses another active intervention called “Linked Together” from time to time with pairs of clients. In the exercise, two ropes, each with a loop on either end, are linked. Each person puts one loop around each wrist, and the object is to get the two ropes disconnected without taking the loops off either person’s wrist.

The exercise works on problem-solving and communication skills, Old says, adding that each person can actually complete the task of disconnecting without help from the other person.

“It’s a great metaphor to looking within ourselves when we have a conflict with someone else or a problem we’re trying to solve,” he says.

Another activity Old uses in his office is the exercise of juggling beanbags. Teens and kids find this challenge especially fun, he says. “I’ll teach them to juggle and connect it to what they’re juggling in their lives,” he says. Old will also ask reflective questions along the way such as how did you learn to juggle those things and how do you react when you drop a ball?

Old is a big believer in learning by doing, and he incorporates team-building-type activities into counseling sessions to bring the ideas he and his clients talk about to life. “For example, if a couple is talking about trust in their relationship, I might have them do forward and backward trust leans in the session and then process what the activity was like for them,” he says. “What did they feel while doing the activity? What effect did communication have on trust? How do they build trust in their relationship? We then use the activity as a metaphor during our work.”

With groups at the local high school, Christian uses an activity known as the “Name Juggle.” Group members pass tennis balls or beanbags to one another while saying each person’s name. With a recent group, Christian told group members the tennis balls would represent things that helped them to be successful in school. The group had to follow a pattern of throwing to each person in the group, and Christian gradually added more balls into the mix.
Partway through the activity, and without warning the group, Christian brought out a rubber chicken and threw it into the pattern. “People get distracted and the balls go flying everywhere,” he says. “So we talk about what are the rubber chickens in their everyday life? What things distract them in school and cause them to drop the ball, so to speak? It creates a reference point, and in future sessions, you can ask what rubber chicken they encountered and how they handled it.”

**Shaking things up**

Although Palmer says he still really enjoys traditional talk-based counseling sessions conducted in an office, he believes the potential benefits of active sessions are immense. “Why [engage in active interventions]? First of all, we sit too much,” Palmer says. “The benefits of exercise are not only based in timeless wisdom but also represent the latest in neuroscience. Just 25 minutes of exercise a day provides a significant dose of natural antidepressant within our bodies, not to mention the physical and overall health benefits.”

Outdoor sessions in particular provide a jump-start to clients’ thinking, while also offering them connection to their surroundings, Palmer says. He also believes that getting active and getting outside does much to improve counselor performance and the counselor-client relationships. “[Counselors] are far more perceptive when we get off the chair,” he says. “When I walk with my clients, I feel more connected to their stories. The power differential is shifted. Clients see me in a new environment, one in which I navigate the world alongside them. We share the weather, the sights and sounds, and we connect on a deeper level. Active sessions shake things up.”

Active interventions, including adventure and wilderness therapies, are shown to be highly effective with a wide range of presenting issues, Palmer says, including depression and mood disorders, anxiety, personality disorders, grief and loss, post-traumatic stress disorder, eating disorders and low self-concept, as well as with clients who have experienced abuse.

The counselors interviewed for this article contend that almost any client can benefit from active interventions. Including an activity adds a dynamic to therapy that children and adolescents typically regard as more fun than just talking, Old says, and as a result, they tend to be more willing to engage. On another point of the age spectrum, active interventions can help entice adults to step out of their comfort zones, he says. Active interventions can also provide counselors with a clearer picture of how
clients act and interact outside of the session, Old says.

Christian, who frequently works with adolescent males, says active interventions are the best approach he has found for getting through to these clients. Boys are more likely to drop their guard, open up and communicate through their actions rather than solely through talking, he says.

Families can also benefit significantly from active interventions, Christian says. “It’s great to watch families have fun together. I love seeing them interact and learn about each other. Processing is always a powerful experience with families. Families also usually start to incorporate more activities outside of session, which is great for communication, cohesion and trust.”

Palmer says another positive is that the stigma clients sometimes attach to counseling is greatly reduced when sessions don’t center on talking inside an office. “I can meet my clients at the trailhead, on the path [or] at the parking lot rather than at my office under the sign that says ‘Counseling Center.’ For all anyone knows, we’re just two peers taking a walk in the park,” Palmer says.

Taking precautions
These experts encourage counselors interested in using active interventions — whether office-based or outdoor-based — to seek proper training before delving in. “Like any other intervention, the counselor should be competent in the activity utilized and the limitations and advantages of the intervention,” Palmer says. “There are logistical and pragmatic concerns like confidentiality — such as, ‘How would you like to introduce me if we come across friends?’ — but these are also concerns discussed in traditional sessions.”

Palmer is a certified wilderness first responder, but he points out that training is far more than the typical counselor needs to simply take a client on a paved walking path for a counseling session. He does recommend, however, that counselors research their options and consider training with an advanced practitioner.

Old mentions the Therapeutic Adventure Professional Group, part of the Association for Experiential Education, as one option where counselors can seek out workshops and conferences. In addition, he says, Naropa University in Boulder, Colo., offers a master’s degree in transpersonal counseling psychology with a concentration in wilderness therapy.

Christian points to Project Adventure, which he says offers introductory courses in ABC. For those counselors interested in ABC, training in group work is also paramount, he says. As for those interested in challenge course work, Christian encourages them to earn certification through an approved Association for Challenge Course Technology vendor.

Ashby cautions that counselors should also be mindful that, depending on how active an intervention is and where it’s taking place, additional informed consent or liability waivers might be necessary. For the APU counseling center’s walking sessions, Palmer and his colleagues primarily depend on the informed consent document as well as information gathered from intake materials, which inquire about clients’ medical conditions and detail restrictions concerning the activities the counselors offer. “We include the standard doctor clause: ‘Be sure to check with your medical provider if you have questions about whether or not active sessions are appropriate for you,’” he says. For adventure-based treks, Palmer acknowledges that the liability waivers are more complex, but he advises counselors against attempting to jump directly into that level of activity.

When using active interventions, these counselors emphasize that clients’ emotional and physical safety is of the utmost importance. Old cautions counselors to know for certain that each client can be trusted to be safe in the activity before doing it. “If you have a teen who you know will drop his dad on his face in a trust lean, then you don’t do a trust lean,” he says. Old says he always talks with clients about safety concerns before an activity, and he always gives each individual client the option of not participating.

Says Palmer, “For counselor safety and accountability, we utilize a unique call-in system to alert each other that we’re beginning and returning from our active sessions, as well as traveling an established and approved route. Personal as well as psychological fitness is essential. This is not something to just decide to do. I have taken very deliberate steps, researched the broader field, consulted with leaders and built upon over a decade of practice and academic research. Like any new specialty, the new counselor must be aware of the implications upon practice.”

Respecting the entire therapeutic process is also key, Old says. If the counselor fails to choose the activity based specifically on where the client is or doesn’t debrief afterward, the intervention will end up being less powerful, he says.

But for counselors who put the work into researching and training with active interventions and then put them to work in their practice, the payoff can be significant, these counselors say. Beyond improving physical health and fitness for clients, Palmer says active interventions enhance the rapport between client and counselor and promote therapeutic advances. “For some clients, this is one of the only ways to break through depression and anxiety,” he says. “Some clients are so entrenched in behavior and thoughts that keep them in the same place. Active sessions are phenomenal in their ability to drive through these barriers.”

Christian’s faith in the effectiveness of active interventions continues to grow stronger. “Although there is not an abundance of research regarding ABC, given what we know about cognitive development, the effect of exercise on the brain and personal antidotes, ABC proves to be an effective form of counseling,” he says. “Also, you don’t have to go to a ropes/challenge course to do active interventions. ABC is adaptable to nearly every setting. I would love more counselors to learn about it and begin to utilize it.”
A golden opportunity awaits you in San Francisco.

ACA Conference & Expo  March 23–25
Pre-conference Learning Institutes  March 21–22

Register by Thursday, December 15 at counseling.org/conference
To register by phone, call 800-347-6647, x222 (M-F, 8am – 6pm ET)

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Rates increase December 16, 2011

Keynote Speaker
Irvin D. Yalom, MD
Friday, March 23, 9:00 am
Don’t miss the keynote presentation by one of the living legends in counseling. ACA attendees will be among the first audiences to get a preview of his next book!

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ACA Pre-conference Learning Institutes (LIs)

Come to San Francisco a day or two early for intensive seminars on specific topics of interest to you.

About the Pre-conference Learning Institutes:
25 Advanced Level, 17 Introductory Level offered over two days—Wednesday, March 21 and Thursday, March 22.
Class sizes are limited for a more personal, interactive experience

Wednesday, March 21, Daytime Sessions
9:00 am – 4:30 pm

12001 Advanced
Motivational Interviewing for Clinical Supervisors
Barbara A. Jordan, MS

12002 Advanced
Cybercounseling: Legal and Ethical Issues in Social Networking
Donna M. Ford, MS, Marlene M. Maheu, PhD

12003 Advanced
Critical Incidents in Military Systems: Systemic Case Analysis
Christian J. Dean, PhD, Catherine Stower, PhD, Neil Duchac, PhD

12004 Introductory
Social Media and Counselors: The Hows, the Whys, the Shoulds, and the Whatfors
Marty Jencius, PhD, Debra London, MEd, Diana Van Winkle, MEd

12005 Introductory
The Many Facets of Grief
David Capuzzi, PhD, Mark David Stauffer, PhD

12006 Introductory
Uncomfortable, Unthinkable, and Untouchable! Confronting Counselors’ Personal Histories in the Clinical Hour
Tamara G. Suttle, MEd

12007 Advanced
Essential Skills for Disaster Mental Health and Crisis Counseling
Jane M. Webber, PhD, Karin Jordan, PhD, J. Barry Mascari, EdD, Michael Dubi, EdD, Gerard Lawson, PhD, Fred Bemak, EdD

12008 Introductory
CPR Therapy: Choice Processing and Resolution Bringing Abortion After-Care Into the 21st Century
Trudy M. Johnson, MA

12009 Advanced
Counseling Challenging Teenagers
John Sommers-Flanagan, PhD

12010 Advanced
What Great Group Leaders Do Better Than Everyone Else: Using Theories, Exercises, and Engagement Skills
Ed E. Jacobs, PhD, Chris Schimmel, EdD

CCA-Sponsored Session

12011 Introductory
Design for Dying: Preparing for End-of-Life
Thomas Nickel, PhD

Wednesday, March 21, Evening Sessions
5:30 pm – 8:45 pm

12012 Advanced
School Counselor Anti-Racist Competencies for Combating Racism
Shannon D. Smith, PhD, Jesse Brinson, EdD

12013 Introductory
Yoga and Breathwork: Helping Clients Integrate Mind, Body, and Spirit for Optimal Wellbeing
Suzanne Degges-White, PhD, Cora Hopkins, PhD

12014 Advanced
Advanced Adlerian Techniques for Use With Body Image Issues and Eating Disorders
Susan Belangee, PhD

12015 Introductory
Psychopharmacology: All You Ever Wanted To Know but Didn’t Know Who To Ask
Graham B. Lee, MA

12016 Advanced
The Season for Self-Care
Virginia A. Magnus, PhD, Wanda P. Briggs, PhD, Susan Furr, PhD, Kathryn Hunsucker, MA

12017 Introductory
Developing Cultural Competence With LGBTQ Clients
Pamela S. Lassiter, PhD, Kristina Acosta, MA, Adrienne Erby, MA, Robert Kitzinger, MA

12018 Advanced
Barry G. Ginsberg, PhD

12019 Advanced
Addressing Diversity Through Child-Centered Play Therapy: Focusing on the Skills
Angela I. Sheely-Moore, PhD, Peggy Ceballos, PhD, Phyllis Post, PhD

12020 Introductory
Chasing the American Dream: An Experiential and Practical Journey Toward Understanding Social Class in Counseling
Debbie C. Sturm, PhD, Kathy Biles, PhD, A. Renee Staton, PhD, Donna M. Gibson, PhD

12021 Advanced
Expressive Arts in Clinical Supervision: Using Mandalas To Enhance the Supervisory Working Alliance
Kelly A. Dunbar, PhD, Daniel B. Kissinger, PhD

CCA-Sponsored Session

12022 Introductory
Identifying and Intervening in Bullying Behaviors in the School Setting
Dianne L. Logan-Parr, MA

Thursday, March 22, Daytime Sessions
9:00 am – 4:30 pm

12023 Introductory
Counseling Theory in Practice
Gerald Corey, EdD, Jamie Bludworth, PhD
**12024 Introductory**
The Many Faces of Cyberbullying: An Educational Guide for School Counselors
Shenika J. Jones, MEd, Eli Branscome, MA

**12025 Advanced**
Treating Perpetrators of Intimate Partner Abuse and Child Abuse With a Comprehensive Intervention Program
Kerin Groves, MS

**12026 Introductory**
Thriving in Private Practice: Philosophy and Strategies for Building a Counseling Business
Anthony J. Centore, PhD

**12027 Advanced**
Brief Solution-Focused Counseling (BSFC) in Schools: Advanced Skills and Techniques
John J. Murphy, PhD

**12028 Advanced**
When the Going Gets Tough: Today’s Challenges and Triumphs for Administrative Supervisors in Counseling
Patricia Henderson, EdD, Richard Ponton, PhD, Elias Zambrano, PhD, Alan Cavaiola, PhD, Suzanne D. Mudge, PhD

**12029 Introductory**
Allies for All: Skills for Working With LGBTQ Individuals Throughout the Life Span
Patricia E. Robertson, EdD, Janna Scarborough, PhD, Rebekah Byrd, PhD

**12030 Advanced**
Culturally-Responsive Play Therapy With Young Traumatized Children
Sue Bratton, PhD

**12031 Advanced**
Sexual Healing: Learning To Be Confident in Providing Sexuality Counseling
Donna Gibson, PhD, Wenndy Dupkoski, MS

**2012 LI Rates**

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**12032 Advanced**
Neurotherapy and Neurofeedback: Essential Counseling Interventions for Psychological and Behavioral Problems
Lori Russell-Chapin, PhD, Theodore Chapin, PhD

**Thursday, March 22, Evening Sessions**
5:30 pm – 8:45 pm

**12033 Advanced**
Neurology and Psychopharmacology: Current Medications, How They Work, and the Counselor’s Supportive Role
Elisabeth D. Bennett, PhD, William Bennett, MD

**12034 Introductory**
A Survey of Military Veteran’s Concerns and Counseling Intervention Strategies
Kanamur V. Chandras, PhD, Sunil V. Chandras, HT(ASCP)

**12035 Advanced**
Implementing Latino Counseling Competencies in Clinical Supervision: Culturally Responsive Practices in Action
Maritza Gallardo-Cooper, PhD, G. Miguel Arciniega, PhD, Zoila Tovar-Blank, PhD, Diane Estrada, PhD, Adelaida Santana-Pelllicer, PhD

**12036 Introductory**
Counseling Immigrant Clients: Research, Practice, and Advocacy
Angela Coker, PhD, Richard W. Williams, PhD, Stacey Reicherzer, PhD, Lisa Schulz, PhD, Selma D. Yznaga, PhD, Rhonda Bryant, PhD, Joan Williams, PhD, Patricia Keller, MA

**12037 Advanced**
Parents and Child-Centered Play Therapy: Strategies for Building Partnerships To Help Children Heal
Phyllis Post, PhD, Emily J. Donald, MA, Peggy Ceballos, PhD

**12038 Advanced**
The Power of Sand Tray Therapy: Creative Techniques for Therapeutic Disclosure, Mastery, and Healing
J. Barry Mascari, EdD, Jane M. Webber, PhD

**12039 Introductory**
Advancing Your Suicide Prevention, Assessment, and Intervention Skills: Practical Information for Counselors
Darcy Haag Granello, PhD, Paul E. Granello, PhD

**12040 Advanced**
Adlerian Brief Counseling Techniques: Advanced Procedures for Working With Individuals and Families
Richard E. Watts, PhD, Amanda C. Healey, PhD

**12041 Advanced**
Understanding Issues Confronting African American Male College Student-Athletes
Henry L. Harris, PhD

**12042 Advanced**
How Does That Make You Feel? An Introduction To Affect Regulation in Counseling
Joseph B. Cooper, PhD, Dixie Meyer, PhD

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View full description online at counseling.org/conference
A Golden Opportunity to Explore the Wonders of SAN FRANCISCO!

City & The Bay
Thursday, March 22 and Saturday, March 24
1:00 pm – 5:00 pm
The sights that make San Francisco one of the most picturesque cities in the world can be enjoyed not only from land but also from the San Francisco Bay. The one-hour Bay Cruise offers incomparable views of “The City” as well as Alcatraz and Angel Island, the famous bridges and many other Bay sights from all decks of the vessels.

Price: $47.00 per person
Cost includes round-trip transportation via deluxe motor coach, narration by professional guide, and one-hour Bay Cruise.

Magical Marin
Thursday, March 22 • 9:00 am – 1:30 pm
Sunday, March 25 • 9:00 am – 1:30 pm
Today you’ll cross the Golden Gate Bridge into magnificent Marin County with its astonishingly varied land and seascapes. Stopping at Muir Woods National Monument with its towering redwood forest, you will have time to stroll among these ancient giant sequoias whose biological ancestry dates back well over a million years. You will also visit Sausalito, a sparkling Riviera-like bayside village with its winding, wooded streets, houseboat havens and unique boutiques and galleries. There will be ample time to explore the shops and galleries, or just walk about the waterfront and view the San Francisco skyline and Bay.

Price: $54.00 per person
Cost includes round-trip transportation via deluxe mini-coach, narration by professional guide, admission fee to Muir Woods, time to stroll in Sausalito.

Alcatraz: “The Rock”
Thursday, March 22 • 10:00 am – 2:00 pm
Saturday, March 24 • 10:00 am – 2:00 pm
Sunday, March 25 • 8:30 am – 12:30 pm
Today you will be sentenced to a short term on the notorious Alcatraz Island federal penitentiary. From the San Francisco waterfront, you will take a short ferry ride across the chill waters of the Bay to “the Rock.” Here you will visit the cells once occupied by the nation’s infamous and incorrigible criminals. On this austere wind and fog ridden island, it is easy to see why few attempts were made to escape into the treacherous bay with its undertows and turbulent waters. An expertly created audio tour contains interviews with former prisoners and guards from “the Rock,” providing you with a fascinating insight into life here.

Price: $65.00 per person
Cost includes round-trip transportation via deluxe motor coach, narration by professional uniformed guide, ticket to Alcatraz Island, National Park fee at Alcatraz and Alcatraz audio tour. You may want to bring a snack on this tour.
Chinatown Discovery: A walking excursion
Thursday, March 22 • 10:00 am – 1:00 pm
Sunday, March 25 • 10:00 am – 1:00 pm
In downtown San Francisco, the present has been built over the remnants of the past. This is especially true of Chinatown. From the towering steel and concrete of San Francisco’s Financial District, you will pass the historic Lion Gates and be transported into the “city-within-the-city,” which recalls the days of early Chinese immigration. The first Chinese settled these streets during the Gold Rush and were swiftly followed by thousands of others. Today, San Francisco’s Chinese population is one of the largest outside of Asia. Today you will enjoy a walking tour down the narrow streets and alleys of this historic neighborhood with a knowledgeable tour guide.
Price: $21.00 per person
Cost includes narration by professional guides for small groups of 10-12 people, donation and admission to Buddhist Temple and Fortune Cookie Factory. This tour assumes walking from the Hilton.

Sonoma: History & California Winemaking
Thursday, March 22 and Saturday, March 24
10:00 am – 5:00 pm
Heading north across the majestic Golden Gate Bridge and through Marin County brings you to the pastoral Sonoma Valley. Grapes and wine have been an integral part of the history of Sonoma since the beginning. The town of Sonoma sprang up around the last of the Franciscan missions in the 1830s. These missionaries planted the first California vineyards for their ecclesiastical wines. Visit one of the renowned wineries, where you will enjoy a tour of the wine-making facilities, followed by a sensory evaluation of the winery’s premium varietals. A stop at historic Sonoma Plaza, site of Mission San Francisco de Solano founded in 1823 will be the next highlight. General Gualupe Mariano Vallejo laid out the Plaza in 1834—which at eight acres is still the largest in California. You will have time to enjoy lunch on your own and explore the landmarks as well as the unique boutiques.
Price: $83.00 per person
Cost includes round-trip transportation via deluxe motor coach, narration by professional guide, tour and tasting at one winery, and admission to the historic sites on Sonoma Plaza, taxes and gratuity.

Reserve Your Tour Online Today at Special ACA Prices!
For more information visit: counseling.org/conference/tours
Note: All proposed tours are subject to availability

Photos courtesy of San Francisco Travel Association.
**HOTEL INFORMATION**

**Reserve by February 28, 2012**

**IMPORTANT:** All ACA Conference hotel reservations must be made using the ACA Housing Bureau. The ACA Housing Bureau will accept reservations made online, by phone, fax, or mail. All of the ACA conference hotels are within walking distance of the Moscone West Convention Center or a short ride on the complimentary ACA shuttle bus. The deadline for receiving the discounted housing rate is February 28, 2012. Be sure to submit your housing request to the ACA Housing Bureau on or before that date to take advantage of the special conference rates.

**ACA Headquarters Hotel**
**Hilton San Francisco Union Square**
333 O’Farrell Street
San Francisco, CA 94102
**Internet:** Complimentary in-room internet  
**Parking:** Self - $52 per day, Valet - $57 per day  
**Single:** $199 or Deluxe Tower view, $229  
**Double:** $219 or Double Deluxe Tower view, $249  
**Triple:** $239 or Triple Deluxe Tower view, $269  
**Quad:** $259 or Quad Deluxe Tower view, $289  
*Located 0.6 miles from Moscone West Convention Center*

**ACA Co-headquarters Hotel**
**Parc 55 Wyndham Hotel**
55 Cyril Magnin Street
San Francisco, CA 94102
**Complimentary 24-hour fitness center access**  
**Parking:** Valet only, starting at $48 per day  
**Single/Double:** $179  
*Located 0.5 miles from Moscone West Convention Center*

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**View all the programs and events in the Advance Registration Brochure at counseling.org/conference!**

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*** Notice to All Conference Attendees ***

We kindly ask that you make your hotel reservations at one of the two contracted hotels above. ACA is committed to these contractual obligations in order to bring the room rates down from regular pricing. If you stay at a hotel other than the Hilton or the Parc 55, we may fall short of our housing obligations and will be responsible for paying lost income to our hotels. This could mean higher registration fees and fewer benefits for participants. Thank you for your consideration.
Reducing excessive anger in adolescents through a martial arts intervention

Picture the following scenario. You are a counselor with less than one year of experience. Recently, an employment opportunity opened up at a school to work with adolescents who have a variety of behavioral issues, including excessive anger. An interview is scheduled, a job offer extended. You eagerly accept.

The first day on the job, you are excited and full of energy, which seems to be a necessary characteristic for a counselor at this school because the clients are extremely energetic. Some are yelling, others are play fighting with one another, while several are running. In fact, one client stands out because he is running toward you. He gets closer, and just before he runs you over, he transforms his momentum into a cartwheel and does a backflip, narrowly missing you. He continues to run after he lands, laughing as he says, “I freaked the new counselor out.”

Once you catch your breath, you continue to be amazed by the energy these clients exhibit. Then it crosses your mind just how energetic you were when you were growing up. As you imagine how difficult it must be for energetic clients to sit through an hour of traditional talk therapy, you begin to wonder: “What can I do to help this kind of client?”

In my role as a counselor, I have worked with highly energetic, excessively angry clients. Therefore, it was commonplace for me to encounter the scenario I just described. Through the years, I learned the importance of creativity in counseling and drawing on the strengths of clients. Many counselors struggle with clients who do not respond well to traditional counseling methods. In turn, these counselors may begin to doubt their abilities. They might feel they are doing their very best, but they are baffled by how to reach these clients. To work effectively with this population, counselors need to create a pro-social environment. A pro-social environment is one that promotes clients’ strengths, wellness, empathetic confrontation and positive role modeling. Counselors must form this environment to communicate to clients what their strengths are in a caring, innovative and engaging way.

In addition to identifying these clients’ strong points, counselors must introduce an intervention that is capable of grabbing — and retaining — the clients’ attention. Traditionally, highly energetic and/or overly angry adolescents do not respond well to canon therapeutic methods. Through experience and research, I have developed a therapeutic martial arts model that allocates to counselors a strength-based modality for engaging these clients. The rationale is simple. With these clients, counselors want to employ a system demanding a high level of physical energy and integrate it with therapeutic principles. The hope is to produce a therapeutic pro-social environment that cultivates change in challenging clients.

Target population: The target population for this intervention is adolescent males or females ranging in age from 11 to 18 who are showing signs or symptoms of engaging in overly angry behaviors, including fighting or bullying.

Description of the intervention: The intervention I use is Capoeira, which is both a unique martial art and an effective form of creative self-expression that originated in Brazil. As described by the group Capoeira Brazil, Capoeira promotes diversity and tolerance, teaches discipline and respect, and assists in developing amazing fitness. Beyond being a form of martial arts, Capoeira is also a pro-social event filled with rich tradition and history.

In Capoeira, there is what is called the jogo, or game. The jogo begins with the students and/or Capoeira instructors playing music on instruments. Several instruments may be present, but the most prominent are the berimbau and...
drums. The berimbau, a musical bow, sets the tone, with the music and lyrics playing an intricate role in how the jogo will be conducted. For instance, different rhythms call for a different speed and type of game. Because of this, practitioners of Capoeira must stay alert to other factors besides their own limitations and experiences. They must be conscious of what kind of music is being played and how that music will dictate their performance in the jogo with others. Behaving in this way allows for a less ego-centered perspective and one geared toward more altruistic behavior and decentralized mannerisms. Simply stated, to do well in Capoeira, participants must take into consideration the perspectives of others.

The lyrics (sung in Brazilian Portuguese) dictate game characteristics, such as whether the jogo will be collaborative, friendly, competitive or instructional in nature. The songs tell of the art’s history and its legendary mestres (instructors), and also include playful anecdotes. While the songs are playing, everyone is encouraged to participate fully, even if not competing inside the roda or human circle. Regardless of whether they are playing an instrument, students can cheer, yell, sing and clap with the beat and enjoy the time together, adding camaraderie to Capoeira. This positive socialization allows adolescents opportunities for meaningful participation.

The roda can range from 7 feet to 30 feet in diameter, depending on the number of people. The Capoeira practitioners normally enter the roda with a cartwheel or some other type of acrobatic move. Once inside the roda, the players move and interact/react in various combinations of moves. Evasive movements and dodging are fundamental, as practitioners learn not to hit each other. Once practitioners are fully engaged in the jogo, they undertake a series of agile, acrobatic and martial arts movements that create a unique corporal conversation. A story between the two players unfolds, with the music and lyrics dictating the theme and the practitioners developing the narrative.

Capoeira is challenging, but its practitioners can use it as a life tool to grow both physically and mentally. The Capoeira philosophy embodies not hurting the other player while in the jogo, participating fully, encouraging others in positive ways and attempting new alter- 
atives. Learning new ways of behaving while in the jogo and developing perseverance to improve ability are especially encouraged.

Empirical studies have indicated the qualities that interventions must possess to be effective with angry adolescents, and Capoeira’s characteristics align with these qualities. First, a pro-social environment must exist that promotes nonviolence (that is, not hurting the other player). Second, there must be a sense that positive risk-taking behaviors or attempts at new alternatives to normal behavioral patterns are encouraged. Third, there must be consistency and repetition in practicing new behaviors that truly lead to change.

Social cognitive theory (SCT) is the primary theory on which my therapeutic martial arts model is based. Empirical evidence documents the effect of modeling on the behavior of children, adolescents and adults, and modeling plays a large part in this intervention. For example, instructors, assistants and other personnel assume a large responsibility in their roles as leaders, teachers and role models. In addition, a bidirectional effect exists, with the environment affecting the clients (interpersonally and behaviorally) and the clients affecting the environment. The thinking of the participants slowly changes, and as it does, their emotions and behaviors soon follow suit. Research has shown that SCT can effectively change problematic, overly angry behaviors into something more positive.

Managing and delivering the intervention: Adapting a model from Stuart Twemlow and Frank Sacco, a clinical supervisor trained in clinical mental health counseling should provide all clinical oversight. An individual who
is highly trained in Capoeira would provide the bulk of the intervention, including daily instruction and delivery of the intervention. For optimal functioning, however, clinical oversight is essential because the clinician provides additional follow-up and outreach to clients. The clinical supervisor needs to maintain ongoing involvement with the instructors, including providing consultation and supervision. Further duties entail the clinical supervisor understanding how to apply the intervention to adolescents (evaluation and counseling). One of the clinician’s primary goals is to ensure that the intervention stays on track. This is not to say, however, that the clinician’s role is limited simply to clinical oversight. One of the benefits of Capoeira is that it may help clients respond better to traditional therapeutic measures. Thus, therapy can conduct simultaneously with Capoeira or afterward, once the client is ready. By remaining heavily involved in the implementation of Capoeira, the clinician retains an idea of the clients’ progression and can recommend or implement additional measures as needed.

**Necessary resources:** The resources needed for this intervention are very economical. Wide-open areas, including gyms, rec centers or church floors, are examples of locations that could house the intervention. Auxiliary components include crash mats and possibly a small trampoline. Of primary importance are monetary resources allocated to the purchase of berimbau, drums, tambourines and chimes. Transportation costs are also a consideration. A salary for the Capoeira instructor, including a small stipend for any junior instructors deemed necessary for the project, may need to be established. In some instances, however, instructors may provide their services for free. Helping those less fortunate is a primary tenet of Capoeira. Many instructors adhere to these ideals and provide pro bono services to at-risk youth. Junior instructors may also work pro bono because they need to acquire a certain number of hours of teaching experience.

**Necessary training:** Instructors in therapeutic martial arts programs have multiple roles as semi-therapists, instructors and disciplinarians. The instructors must be firm while remaining aware of the inevitable lapses and/or shortcomings of adolescents. Training in basic mental health procedures should be provided to the instructors so they do not personalize comments made by the adolescents. Moreover, training assists instructors in not transposing their problems to issues faced by the adolescents. Instructors must be knowledgeable about transference and understand not to take reactions and behaviors of the adolescents personally. Instructors should also understand that these adolescents might sometimes treat them as objects on which to take out their frustrations. Finally, instructors must model behavior that assists in decreasing the adolescents’ mistrust of adults and reducing their excessive anger. The clinical supervisor, who should be proficient in behavioral dynamics and clinical mental health counseling, provides administration of instructor training. As stated previously, a clinical supervisor is imperative to the operation of a therapeutic martial arts model.

**Time frame:** This intervention is designed to take place twice a week for a duration of two hours at each meeting (for a maximum of 16 hours per month and 192 hours per year). As for follow-up, maintain an open-door policy, encouraging parents, caregivers and participants alike to report back to the clinical supervisor and instructors. Reporting allows the clinical supervisor to see what clinical advantages the program provided and where improvements might need to be implemented. Additionally, reporting helps former clients maintain a connection to the program, and some of these clients may want to give back to the program by providing some form of human resources.

Martial arts can provide energetic, overly angry clients with an exciting, strength-based intervention to promote positive growth. Counselors may be able to utilize the intervention in this article either as an alternative or as an addendum to traditional counseling. With people who do not respond well to standard client-sitting-in-the-chair counseling, martial arts may represent a paradigm switch in how counselors conduct therapy.

“Knowledge Share” articles are based on sessions presented at past ACA Annual Conferences.

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Letters to the editor: ct@counseling.org
It’s not about sex
Counselors help sexual addiction clients face the behavior, name its impact and examine the underlying causes

By Stacy Notaras Murphy

Q: Sexual addiction is a result of:
A) Overactive libido
B) My partner’s disinterest
C) Cultural permissiveness
D) None of the above

The answer may be obvious to those familiar with the multiple choice trope: D) None of the above. But the point remains true: There are many common misconceptions surrounding sexual addiction. Counselors, with their confidentiality policies and empathic personas, may be the only people to ever hear the true extent of a client’s interior struggle with an addiction to pornography or sexual compulsivity. Positioned on the front lines for educating clients, families and colleagues about this pervasive problem — a problem the Society for the Advancement of Sexual Health conservatively estimates affects 3 to 5 percent of the U.S. population — counselors must know how to identify sexual addiction and formulate appropriate treatment plans and referrals.

But this tremendous responsibility demands one thing that many counselors find difficult: We have to actually talk about sex.

“Professional counselors under-recognize sex addiction,” says Barbara Steffens, an American Counseling Association member and certified clinical sexual addiction specialist in West Chester, Ohio. “Sexual addiction exists in secret and often does not come to the surface until there is a crisis or several negative consequences. Few clinicians are prepared to ask about sexual history or sexually compulsive behaviors when this is rarely the presenting problem in treatment.

“I specialize and work primarily with partners [and] spouses of sex addicts, and they tell me of participating in years of marital therapy where either the issue was not asked about or it was minimized. Partners most often have little to no awareness of the extent of the sexual acting out and so do not know to bring it up in treatment. Often the partner may initiate counseling in response to knowledge of one affair, while additional sexual behaviors remain secret.”

After making the therapeutic space safe to talk about sex, counselors might find that the treatment quickly returns to traditional topics of family history and thought patterns. “Sexual addiction is not about sex,” says Todd Frye, an ACA member and clinical sexual addiction specialist in Olathe, Kan. “Some clinicians assume that sexual addictions are driven by an overly active libido that simply has an abnormal level of craving for sexual images and acts. The bulk of those who present with sexual addiction really have more of an intimacy disorder than a sex disorder.” He explains that sexual addicts might use sexual gratification as a way of creating “metaphoric connections” to serve unmet intimacy needs, while others may use sex to deal with feelings of disconnection and the inability to create relationships with others.

The number of people struggling with sexual addictions is growing daily due to the online availability of sexual material, Frye says, noting that counselors with specified training on the topic are in high demand. “We now have access to a worldwide sexual smörgåsbord,” he says, adding, “I receive referrals often by very competent counselors who feel ill-equipped to work with this addiction.” Although the larger counseling community is more familiar with a generalized approach to addictions treatment, Frye has found that specialized training for sexual addictions is needed to help clients truly achieve recovery.

Jodi Conway, a certified sex addiction therapist and ACA member in private practice with offices in New Jersey and Massachusetts, believes education is necessary to get counselors past preconceived notions about sexual addiction. “There are many [counselors who] don’t believe this is an addiction or think that viewing porn is normal male behavior,” she says. “I think with the increase in high-profile people getting caught in sex scandals and talked about in the media, there is much more awareness that sex addiction exists, but few know what types of treatment options there are or how to find qualified therapists.”

Frye agrees: “Though there is overlap in all addictions work, there are some things that are unique to sexual addiction treatment that are important for the counselor to know in order to work more effectively with the sexual addict.” He points out that traditional addictions treatment focuses on the ingestion of chemicals — taking in alcohol, drugs or food — while sexual addictions are internally based, resulting in chemicals produced inside the body, often through a thought or the sight of an image.

Counselors have many options for obtaining specialized sexual addictions training. The best-known program may be the C-SAT certification program designed by sexual addictions treatment expert Patrick Carnes and administered by the International Institute for Trauma and Addiction Professionals (IITAP). There are also other, faith-based training programs for professionals and laypeople, including a new Sexual Addictions Treatment Provider (SATP) certification at MidAmerica Nazarene University in Olathe, Kan., which, with Frye as co-chair, is set to launch in January.

“Most counselors did not receive specific training in the treatment of sexual addictions in their grad programs or found a one-day seminar to be insufficient to meet their clinical needs in this area,” Frye says. “We wanted to offer them a training opportunity that would equip them to feel adequate in effectively working with the sexual addict and their family. In addition, there has been
provides immediate gratification without the underlying disturbance. As with food addiction, controlled access to the “risky behavior” is part of human nature and must be considered in the treatment plan.

“The important thing to remember is that the sexually addictive behaviors are a part of the symptom and not the underlying disturbance,” notes Todd Bowman, a counselor and professor who, with Frye, is cochairing MidAmerica Nazarene University’s SATP certification program. Bowman explains that trauma, deficit, conflict and characterological dysfunction are the primary underlying disturbances with most diagnoses. “Without fail, in the lives of individuals struggling with sexually addictive behaviors, I have come to uncover one, if not multiple, of these underlying disturbances that is the drive for their sexual acting out. In addition, it is important to explore the relational dynamics created by the sexual acting out,” he says.

Frye has found that treatment usually starts with working on sobriety from acting-out behaviors such as spending time on pornographic websites. Once some level of sobriety has been achieved, the counselor assists the client in determining the primary function that the acting out behavior played and the relational experiences that helped create the addictive behavior as a coping strategy.

For example, sexual compulsivity provides immediate gratification without risking the vulnerability of having to connect within a true relationship. Sex addicts may be compensating for low self-esteem resulting from an abusive childhood, seeking to avoid unpleasant feelings such as work anxiety, or circumventing the process of having to relate to others in order to have their sexual needs met. Much like addictions to alcohol or food, the compulsivity distracts sex addicts from a reality that feels too difficult to navigate. Counselors can help those struggling with sex addiction to recognize these underlying motivations and stop self-destructive patterns of behavior.

Conway urges counselors never to shame or judge these clients or even to assume a thing about their experiences of sexual addiction. “Most clients have a history of trauma that is underlying their addiction. It is important to explore their acting out behaviors — what are the behaviors, what is their arousal template, what kind of porn are they viewing? The addiction is not to sex, it is to lust, to intensity,” she notes. “Recovery from sexual addiction is about letting go of the fantasies, obsessions, acting out or bottom-line behaviors that were self-defeating and [instead] beginning to have healthy relationships with themselves and others.”

Working with the 12-step model

Many treatment modalities are aimed at sexual addiction, ranging from individual counseling to couples work, anonymous organizations to therapist-led groups. Because the general public is well acquainted with the 12-step model for addiction recovery, the first stop for many individuals struggling with sexual addiction might be a group such as Sex and Love Addicts Anonymous (SLAA) or Sexaholics Anonymous (SA). Counselors often suggest that clients consider these groups because they offer structured accountability and support for new members. However, counselors must be careful when making such referrals because each group (and often each separate meeting) comes with its own norms and expectations. Some groups are not accepting of homosexual relationships. Some groups subscribe to a very strict version of sexual sobriety (for example, no masturbation), while others allow members to define their own abstinence plans that make room for certain behaviors.

“I think the 12-step groups are a great supplement to counseling,” Frye says. “The accountability and support that is included in these groups is fantastic and necessary, particularly toward the beginning of recovery. Getting the sexual addict sober is necessary early on for the counseling to be effective. Groups really assist with this. … Sexual addiction is so complex and powerful that we as counselors need to come with ‘all guns blazing’ and use any resource available to assist in the work we do.”

Bowman describes 12-step groups as “necessary but ultimately insufficient in and of themselves” when it comes to sexual addiction recovery. “Many folks who just go to recovery groups end up white-knuckling it through their addiction,” he says. “Individual counseling is imperative in examining the deeper psychosocial implications and precursors to the addiction … which must be intentionally identified and processed through for freedom to exist at its greatest degree.”

Conway adds that it also can be challenging to get a client to attend regular meetings. “Many are reluctant for obvious reasons, but also because they may have social challenges, or are full of shame, [have a] fear of being recognized or believe that everyone there is ‘bad,’” she says.
Supporting partners of sex addicts

For too long, partners of sex addicts have been asked to support the addict’s recovery without having attention paid to their own experience of trauma. In some cases, these partners are even asked to label themselves as “coaddicts” to help frame the addiction within the couple’s relationship. Barbara Steffens is an American Counseling Association member and certified clinical sexual addiction specialist in West Chester, Ohio. She argues that treatment professionals must develop more effective and respectful treatment protocols for partners of sex addicts. To that end, she makes the following recommendations for counselors (Steffens refers generically here to the partner being female, but that is not always the case):

1) Ask her what she needs. Partners have a wealth of wisdom and strength, as well as experience. We need to learn from them.

2) Assess her needs and history. What is unique about this partner, her experience, the relationship, her history?

What are her current symptoms? Why is she acting the way she is? Is it safety-seeking behavior that is often viewed as symptomatic of her own disease?

3) Conduct research. We need a more complete understanding of the experiences and needs of those in relationship with sex addicts.

4) See her as a primary patient, a client in her own right, not just as a member of the family who needs information on addiction. She has her own mental health needs as a victim of another person’s infidelity, deception and betrayal.

5) Think safety first. How would you respond to a victim of sexual assault or domestic violence? Help her establish a sense of empowerment. How else can we assist her in finding safety?

6) Join with other treatment providers who specialize in working with partners. There is a growing group of clinicians and sex addiction specialists who are seeking to improve treatment for partners.

7) Consider specializing in helping partners. There are growing numbers of trained specialists in treating sex addiction; we need an array of providers who are educated, experienced and passionate about helping partners recover from betrayal and trauma, and gaining a sense of empowerment.

Steffens adds that partners of sex addicts are struggling with many messages as they seek to heal from their wounding. “In the midst of what most say is the most painful time of their lives, they must attend to their pain, accept the reality of the state of their relationship with the one they love, manage their safety needs [and] consider the needs of family/children, while being told they need to wait and see what recovery looks like before they make any major decisions about severing the relationship/marriage,” she explains. “A counselor can be a lifeline for someone navigating this most difficult time.”

— Stacy Notaras Murphy

Partner preparation

Sexual addiction obviously has an impact on the addict’s family, and on the partner or spouse in particular. Frequently, the client comes to treatment directly because the partner has discovered the behavior. The 12-step approach to family additions has been applied to this circumstance as well, with S-Anon and COSA (Codependents of Sex Addicts) groups providing support and psychoeducation for the partners of the identified addicts.

But that sort of support might not be enough, and in certain circumstances, may prove even more harmful to the relationship, according to Steffens, coauthor of Your Sexually Addicted Spouse: How Partners Can Cope and Heal.

“The partner or spouse of the person with the addiction is often ignored in treatment or becomes involved only as a support to the treatment of the addict, neglecting the severe stress and trauma experienced by the partner in response to ongoing betrayal, deceit, infidelity and potential abuse in the relationship,” she explains.

Operating from a non-codependency approach, Steffens has developed a “partner trauma model” for working with the partners of sex addicts. “At the time treatment is initiated, most partners are in crisis and in need of their own support and counseling,” she explains. “They are likely displaying traumatic stress symptoms due to the significant deceit, betrayal and threat they experienced.” She adds that in seeking recovery, the partner is assaulted with the reality of repeated infidelity, betrayal, years of deceit, often loss of financial resources, possible infection with sexually transmitted disease and fear for her own safety.”

(Read from: Steffens sometimes uses “she” and “her” when referring to partners of sexual addicts; she is not insinuating, however, that only men are susceptible to sex addiction or that only women need help recovering from the discovery of a partner’s sex addiction.)

“To ask them to come in to support the person with the addiction is asking a lot early in recovery,” Steffens says. “For many partners, being asked to join sessions to support the addict’s treatment is like being asked to do so for someone who has just assaulted them. The person they love the most has now become the person who has hurt them the worst.”

She adds that early in the process, “many partners are reeling with the sudden disclosure of years of sexual acting out and infidelity and are often traumatized by this information.”

In 2006, Steffens performed a study of women whose partners were sexual addicts and found that nearly 70 percent of these women showed symptoms that were akin to those for post-traumatic stress disorder. “For someone with post-traumatic stress, they experienced something that resulted in a sense of horror and helplessness. For many partners of sex addicts, this describes their experience,” she says.

“So, rather than say that a partner of a sexual addict has their own disease or addiction — coaddiction or codependency — I acknowledge and respond to the post-traumatic stress found in those who have had their lives and hopes shattered by the sexual betrayal/infidelity that occurs when the addiction is sex.”

Steffens recommends that these partners first find their own support systems and individual counselors, while using couples therapy for crisis management and psychoeducation. “When both individuals have stabilized, more traditional marital work is in order,” she says, while also emphasizing the
importance of finding a counselor with specific understanding of sexual addictions.

“I am hearing stories from partners who have gone into … intensive treatment settings only to be told they are ‘just as sick’ as their husbands,” Steffens says. “These partners experience this as retraumatizing and being treated as an appendage of the person with the addiction rather than as an individual with their own mental health needs as a result of the traumatic events they’ve experienced.”

Real recovery

In terms of sexual addiction, the definition of sobriety can vary greatly depending on a client’s specific circumstances and choice of treatment. For some, sobriety is about abstaining from any online content of a sexual nature. For others, it is about limiting sexual contact to a single partner within a committed relationship. Still, one regular theme in recovery is the challenge of finding healthy ways to be in connection with those around them.

“Throughout sexual addiction recovery work, treatment continues to include some element of the counselor assisting the client to engage in current relationships,” Frye says. “Helping the client find healthy, intimate ways of connecting both sexually and nonsexually are put in place to supply the intimacy that most sexual addicts have longed for their entire lives.”

Frye also stresses that counselors must partner with clients to create a sobriety plan or structure that can provide support when the client relapses or feels anxious about relapsing. “A comprehensive plan is necessary so the client can feel equipped to maintain the progress achieved in counseling,” he says.

Conway adds that in recovery, spouses or partners should witness the addicted individual’s defenses going down. “They will have access to their partners’ cell phones, computers, emails, etc.,” she says. “There will be accountability and remorse. Therapists will begin to see the same accountability, vulnerability and willingness to do whatever is required to maintain abstinence. A client's defenses will lower, and he will get in touch with his feelings.”

Further, real recovery often includes the couple’s relationship changing, not just the addicted person refraining from engaging in acting out behavior. “The person in recovery will be accountable to others in his behaviors and transparent with his partner regarding his life,” Steffens explains. “He actively participates in a treatment program or process. He works to demonstrate consistency. He acknowledges that trust has been violated and begins repair attempts. As the partner is supported in their own restoration following betrayal, they come to watch for and appreciate these signs of deeper change. Recovery is not just behavior cessation or management; recovery becomes an opportunity for holistic change.”

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MidAmerica Nazarene University
A Decision without details

He had made his Decision. My family and I were halfway to London when our train made one of its usual stops at a station. Normally, the doors would close again in about 30 seconds, and we would be on our way. But this time, we waited for five minutes. It was a late Monday morning filled with sunshine.

“Attention, passengers,” came a voice across the public address system. “My apologies for the delay. There’s been an accident at [one of the towns ahead of us]. Police have been called. I’m afraid that we’re going to have to turn back to our previous stop. Passengers can take the train to Reading, then change there for London Paddington Station.”

“What’s wrong?” my 8-year-old daughter asked.

“I’m not sure. Maybe there’s been a car accident on the train tracks,” I replied.

At that moment, I knew nothing of the Decision that had been completed a mere eight miles ahead of us.

All trains headed to London on this route were halted. Upon returning to our previous stop, confusion ensued. From which platform was the Reading train leaving? Platform 4. No, Platform 5. Was it the 12:03 or the 12:22? Hundreds of people moved back and forth, waiting on the edge of the railways.

His Decision involved one more step.

Job interviews were dashed. Heathrow flights were missed. Lunch meetings were canceled. Dinner plans were rearranged. And somewhere, his family members and friends were forced to cope with what might have been the unimaginable.

A cramped train to Reading found passengers searching for seats in vain, forced to stand in the aisles and entries to the coaches. A small dog panted in discomfort on the floor.

All of this because of his Decision, an action, I suspect, that seemed to be the best — perhaps the only — alternative in his mind.

A group of six older Britons sat across from us. “Excuse me,” I piped up. “I’ve been so impressed with the rail system here. Everything’s been so smooth and right on time. Does something like this happen often?”

A woman turned to me. With a gleam in her eye, she deadpanned, “Oh, they must have seen you coming.”

I laughed aloud, still unaware that joy was the furthest of emotions to be felt at the scene a few miles away. His Decision was final, and I was about to be affected in a way I couldn’t have imagined when our journey began.

A few moments later, I overheard the same passengers talking quietly about the delay. I thought I caught mention of the fatal word.

“Excuse me,” I interjected again.

“What’s the reason for the delay?”

A man with soft eyes sitting diagonally across from me mumbled one word: “Suicide.”

I didn’t think I had heard him properly.

“Pardon me?”

The man put his index finger to his throat and made a motion across it.

“I was, to use British slang, ‘gutted.’ Utterly devastated. My heart sank. It hadn’t crossed my mind that this might be The Decision disrupting our journey home.

“Did you hear that?” I whispered to my partner out of our children’s earshot.

“Yeah,” she replied disappointedly.

“Probably no accident that it’s a Monday morning.”

I think most if not all of the other passengers likely knew of his Decision by now. Yet no one talked about it. The train was simply quiet.

Arriving in London about 90 minutes later, I called a friend making a similar journey to the city that evening and warmed him of the delay. I used the word “accident” in my voice mail, perhaps out of hope that I had been misinformed. Perhaps out of denial.

I searched the Internet that evening, but to no avail. No news of a railway accident outside of London. Maybe, I thought, it was just a rumor. A false one.

My friend emailed me the next morning with the news I didn’t want to hear. “Sorry to hear about the protracted journey home. It sounds as though someone threw themselves under a train, so I suppose that puts the inconvenience into context.”

My heart sank again. I returned to the Internet, finding, sadly, the lead headline on a newspaper website covering the town where the suicide had been completed: “Fatal accident at station causes major delays.”

An unnamed man had indeed been struck by a train and was pronounced dead at the scene. Officers were “not treating the incident as suspicious.” Of the 312 words used to describe his Decision, “suicide” was not among them. A file was being prepared for the coroner.

I visited the same website the following day seeking a follow-up story. Nothing else had been written. The initial story was changed, however, relating that the man was 49 years old. I felt a sudden connection to him. We were the same age and had both experienced the Beatles, the end of the Cold War, the dawn of the Internet, Sept. 11 and economic recession.

Sadly, he must have perceived his future as painfully bleak. At 10:53 a.m., his hopelessness won out on the edge of the train tracks.

He likely was not alone that day in making such a Decision. According to the Office for National Statistics, approximately 5,675 people in the United Kingdom completed suicide in 2009, amounting to an average of almost 16 such Decisions per day.

My mind went to him, lying on the tracks. Who was this person? What led to his Decision? Did anyone try to intervene? What had happened in his life the weekend preceding his Decision? What overwhelming stressors did he face? Did he have a family? Close friends? A counselor? How was the train engineer? Most important, how could he have arrived at a different decision and not The Decision?

To me, the question became one of warning signs, both overt and subtle, that were surely present in the months leading up to the event. According to
the American Foundation for Suicide Prevention, nine out of every 10 people completing suicide have one or more psychiatric disorders, with depression being most common. The American Association of Suicidology offers the mnemonic device “IS PATH WARM” to recall warning signs. I wondered how many of the 10 factors were present with this person.

- How long was his Ideation present?
- Was there Substance abuse involved?
- Was there a Purposelessness related to his work, family relationships or life direction?
- How was his Anxiety manifested?
- In what ways did he perceive being Trapped?
- At what point did he become Hopeless about his future?
- To what extent did he Withdraw from others?
- How did Anger influence his decision?
- Were his behaviors Reckless?
- Did he experience Mood changes?

The grim fact is that this man will not be alone in completing suicide on the train tracks this year. About 200 railway suicides take place annually in England, and nearly 70 percent of the individuals are males.

How can such events be prevented? Timing may offer one element. An investigation on people falling or jumping in front of trains on the London Underground — most of which were suicides or suicide attempts — from 1940 to 1989 found that the peak times for such incidents were between 11 a.m. and noon and again between 3 and 4 p.m. Sunday experienced the fewest number of incidents, while slightly more weekday incidents occurred on Mondays. Springtime (March to May) was the period of highest frequency, and significantly higher incident rates were found at stations in close proximity to psychiatric facilities.

In the United Kingdom, Network Rail has teamed with Samaritans, an organization that helps people in distress or despair, including those who are suicidal, on a £5 million (about $8.3 million) program to address the problem. The program is highlighted by educating railway workers on how to detect and talk with individuals who may be contemplating suicide.

The man whose life — and tragic death — indirectly intertwined with mine that spring morning might have been out of a job. Maybe he faced significant money issues, medical problems or relationship difficulties. Perhaps severe losses simply mounted in his life.

I’ll never know.

The one thing of which I am certain, however, is this: I wish that His Story had a much different ending.

John McCarthy, a professor in the Department of Counseling at Indiana University of Pennsylvania, wrote this article while on sabbatical as an Academic Visitor in the Faculty of Education at the University of Cambridge. He is also a member of the Westmoreland County (Pa.) Suicide Awareness and Prevention Task Force. Contact him at jmccarth@iup.edu.

Letters to the editor:
counseling.org
**Editor’s note:** The following information is presented as submitted by the candidates. It has not been edited.

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ACES, AMCD, ALGBITC, ASGW, CSJ, Hawaii Counselors Association

**Awards and honors**

March 2011 – The Professional Development Award presented by the Association for Multicultural Counseling and Development at the annual meeting of the American Counseling Association; April 2007 - The Counseling Vision and Innovation Award presented by the Association for Counselor Education and Supervision at the annual meeting of the American Counseling Association. Detroit, Michigan; August 2006 - The Presidential Award presented by the Asian 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 demonstrated by both. Presented at the annual meeting of the Asian American Psychological Association. New Orleans, LA; August 2006 - Fellow status awarded by Division 17, The Society for Counseling Psychology, the American Psychological Association (APA) for significant contributions in psychological research, teaching, and service (New Orleans, LA); April 2004 - The National O’hana Award presented by the Counselors for Social Justice Division of the American Counseling Association (Kansas City,

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**ACA’s online voting for 2012 elections**

Last year’s online election for ACA officers was a huge success. We saved trees and saved money, and more members voted. In fact, it was our highest voter turnout in five years.

To enhance the online voting experience this year, ACA will post a voting link in the members-only section of the ACA website at counseling.org. When you sign into the ACA members-only site and click the voting link, you will be automatically redirected to the Votenet site to enter your confidential votes. You will not need to enter any additional user IDs or passwords.

Online voting for all ACA elections will begin on Friday, Dec. 2, at 12:01 a.m., and will close Monday, Jan. 31, at 11:59 p.m. ET. Only members in good standing as of Nov. 1, 2011, will be eligible to vote. If you are unable to vote online or would prefer a paper ballot, please call ACA’s Member Services at 800.347.6647 ext. 222. If you choose to complete a paper ballot, the deadline to receive your ballot at Votenet headquarters is the same as it is for online voting: Monday, Jan. 31, 2012.

Watch for additional announcements and reminders about voting in ACAeNews. In addition, all members for whom we have an email address will receive email reminders.

**Election information**

ACA's online voting for 2012 elections

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**Association experience**


**ACA/Division/Branch experience**

ACES, AMCD, ALGBITC, ASGW, CSJ, Hawaii Counselors Association

**Awards and honors**

March 2011 – The Professional Development Award presented by the Association for Multicultural Counseling and Development at the annual meeting of the American Counseling Association; April 2007 - The Counseling Vision and Innovation Award presented by the Association for Counselor Education and Supervision at the annual meeting of the American Counseling Association. Detroit, Michigan; August 2006 - The Presidential Award presented by the Asian 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 demonstrated by both. Presented at the annual meeting of the Asian American Psychological Association. New Orleans, LA; August 2006 - Fellow status awarded by Division 17, The Society for Counseling Psychology, the American Psychological Association (APA) for significant contributions in psychological research, teaching, and service (New Orleans, LA); April 2004 - The National O’hana Award presented by the Counselors for Social Justice Division of the American Counseling Association (Kansas City,
MO); August 2003 - Fellow status awarded by Division 45 of the American Psychological Association (APA) (The Society for the Psychological Study of Ethnic Minority Issues) for significant contributions in psychological research, teaching, and service (Toronto, Canada); May 2003 - Senior Fellow awarded by the National Center for Health Behavioral Change at Morgan State University (Baltimore, MD); March 2003 - Arthur A. Hitchcock Distinguished Professional Service Award, the American Counseling Association (Anaheim, CA); January 2001 - Dalmas A. Taylor Award, Multicultural Conference and Summit, (Santa Barbara, CA); March 2000 - Outstanding Leadership Award, the International Association of Marriage and Family Counseling, American Counseling Association (Washington, DC); April 1996 - Association for Multicultural Counseling and Development (AMCD) Research Award, the American Counseling Association (Pittsburg, PA); October 1994 - Nominated for the College of Education Excellence in Teaching Award; University of Hawaii at Manoa; April 1992 - Association for Multicultural Counseling and Development: Special President’s Citation for Research.

**Publications**

Over 200 professional publications: 9 books, 28 book chapters, 51 referred journal articles, 151 other scholarly works and publications.

**Presentations**

262 professional workshops and presentations made at state, regional, national, and international counseling conferences and conventions.

**Community service**

2010 – 2011 Coordinator of the Multicultural/Social Justice Leadership Development Academy Coordinated the National Giving Back to the Community Project held at the annual meeting of the American Counseling Association in Charlotte, NC. 2007 - 2008 Coordinator of the Giving Back to the Community Project Coordinated the National Giving Back to the Community Project held at the annual meeting of the American Counseling Association in Charlotte, NC. 2005 - 2006 Coordinator of the Giving Back to the Community Project Coordinated the National Giving Back to the Community Project held at the annual meeting of the American Counseling Association in Detroit, Michigan. 2004 - 2005 Coordinator of the Giving Back to the Community Project Coordinated the National Giving Back to the Community Project held at the annual meeting of the American Counseling Association in Atlanta, Georgia.

**Qualifications and reasons for seeking office**

As a lifetime member of the ACA, I have had the honor of working with thousands of leaders, members, and students in the counseling profession. During the 30+ years I have been a member of ACA, I have demonstrated competence in numerous leadership positions. This includes serving as the president of the Hawaii Counselors Association, President of Counselors for Social Justice, Western Regional Representative from Hawaii, serving as the Executive Director of an allied professional organization (The National Institute for Multicultural Competence), and acting as one of the founders and coordinators of the annual Giving Back to the Community and Leadership Development Projects that have been implemented over the past 7 years at the annual ACA conferences.

As a member of the ACA family, I have been able to effectively partner with many other leaders in ACA and staff persons at our national headquarters as well as working with counselor educators, practitioners, researchers and graduate students on numerous leadership and organizational development projects. These experiences have enabled me to develop a clearer understanding of ACA’s governance policies and procedures.

They have also helped me learn how our association can realize much of its untapped organizational potential to increase the impact ACA can have in our national and international health-care systems as well as being more responsive to the needs of our members.

If elected as the next ACA President, I would help to develop a new organizational initiative that is aimed at formulating and implementing a vision of ways that counselors and other allied professionals can work together to promote the health and well-being of larger numbers of persons from diverse groups than has been done in the past. In developing this initiative I would direct particular attention to involving students in all aspects of this endeavor.

**Candidate questions**

ACA is becoming an increasingly diverse organization, both among our members and the specialty areas and practice settings that they represent. Additionally, over 50 percent of ACA's members do not belong to a division. Under your leadership as ACA president, what would the association do to meet the specific and varying needs of these members and at the same time meet the needs of all members?

Two of the ways that organizations can more effectively meet the specific and varying needs of its members is by: [a] increasing their level of transparency and [b] implementing concrete strategies to ensure democratic participation by its members.

Organizational transparency includes making information easily available to members about the issues that governing bodies address in their decision-making meetings. This includes sharing information about the ways that governance bodies plan to better address the specific and varying needs of its constituents.

The primary decision-making body in ACA is the Governing Council. Although the written minutes of Governing Council are made available on the ACA website, I would make sure that monthly podcasts are made available to all the members of ACA that discuss decisions that have been made by the Governing Council as well as issues to be discussed.
social media is changing the landscape of how people communicate and share information. How do you think ACA should utilize social media such as Facebook, Twitter, and LinkedIn?

As ACA President, I would make various forms of technology (including but not limited to Facebook, Twitter, and LinkedIn) central to my efforts to promote democratic participation and free professional/organizational development training initiatives. To accomplish these goals I would:

[a] host monthly electronic town hall meetings in which all ACA members would be invited to discuss how ACA could build on its strengths to better meet the specific and varying needs of its members;

[b] convene a special Social Media Task Force during my president-elect year at the 2013 ACA Conference that would begin the planning of a state-of-the-art social media action plan to be implemented at the beginning of my presidential year and serve as a model for other professional mental health organizations, and

[c] use electronic town hall meetings and other forms of technology recommended by the new Social Media Task force to increase the voice and connections among all ACA members as well as encouraging other counselor educators, practitioners, and students to join the ACA family as new members in our association.

As the economy has worsened, jobs for counselors are becoming harder to find. Yet institutions of higher education continue to graduate an increasing number of students. As president, what do you see as ACA’s role in working with prospective counselors and graduate programs?

Researchers have estimated that over 40 million persons in our nation are in need of some sort of counseling each year. However, all of the mental health professionals in this country (e.g., professional counselors, psychologists, social workers, and psychiatrists) can only provide services to 7 million persons annually.

Recognizing the importance of addressing the disparity that exists between the large number of persons in need of counseling services and the actual number of persons receiving these services each year, I would implement three action strategies during my president-elect, presidential, and immediate past president years.

First, I would make a call for interested ACA members to participate in a national electronic town hall planning meeting to discuss how ACA could develop innovative community-based interventions to promote the mental health of targeted groups in several identified communities across the United States.

Second, I would convene a task force comprised of persons with expertise in securing funding for mental health-care interventions that would seek fiscal resources to support the above noted community-based interventions.

Third, I would formulate an Oversight Committee that would evaluate and work to ensure continued funding for the on-going implementation of additional community counseling and development projects in the future.

Graduate students are the future of our profession and our association. Under your leadership as president, what would you do to help more students transition into professional membership and continue their involvement with the association?

Understanding that our graduate students represent the future of the profession, I would implement the following strategies to increase student membership and empowerment in ACA.

First, I would convene 1 National Student-Leadership Development and 1 International Student-Leadership Development conference using cost-effective computer-based technology during my president-elect year. These conferences would be designed to develop a broad-based mechanism for connecting counseling students nationally and internationally for the purpose of sharing ideas about their future involvement in ACA.

Second, I would convene a Student Planning Committee to address tasks necessary to institutionalize a new student association in ACA that guarantees full voting rights on the Governing Council. This would be done late in my president-elect year.

Third, I would work with student leaders to present a formal proposal for a new ACA Student Association to the Governing Counsel for ratification before the end of my presidential year.

Kelly Duncan

Education
PhD Counselor Education MA Counseling BS Business Education

Certification and licensure
LPC NCC Certified School Counselor

Current position
Associate Professor of Counseling - University of South Dakota; Director of the USD Counseling and Psychological Services Center

Professional experience
Associate Professor of Counseling - University of South Dakota (2006-present); Assistant Professor of Counseling - Northern State University (2003-2006); Executive Director - SD Counseling Association (1993-2008); School Counselor - South Dakota (1988-1993)

Association experience
ACA Governing Council - Midwest Region representative (2007-present); ACA Audit Committee (2010-present); ACA Financial Affairs Committee (2008-2010); ACA Task Force on Branch
Development (2002-2007); ACA Bylaws Committee (2003-2006); ACA Midwest Region Chair (2002-2003); NCACES Secretary (2005-2006); SDSCA Treasurer (2010-present)

**ACA/Division/Branch experience**

American Counseling Association, ACESA, ASCA, CSJ, North Central ACES, South Dakota Counseling Association, SDACES, SDSCA, SD Indian Counselors Association

**Awards and honors**

ACA Hitchcock Distinguished Professional Service Award (2011); ACA Delegation Leader - People to People Ambassadors Program - leading counselors delegations to Egypt (2007), Russia (2006), and China (2005); SDCA Poling Administrators and Supervisors Award (2007); SDSCA Schmieding Award for Outstanding Contributions to the Field of School Counseling (2005); NCACES Graduate Student of the Year (2003)

**Publications**


**Presentations**


**Keynote**

**Community service**

SD Board of Education (appointed by Governor in 1996 and have received 3 additional 4 year appointments; president of the board 2008-2011); Provided a free professional development series for school counselors in SD for the past 4 years; Work with the SD College Access Challenge and SD GEAR UP Programs; Mentor to first year students at USD; Chapter advisor for the Psi Chapter of Alpha Phi at USD

**Qualifications and reasons for seeking office**

I can clearly remember attending my first state branch conference almost 25 years ago. I was a first-year K-12 school counselor serving in a small, rural community. As I filled out my conference evaluation, there was a check box to indicate if you would be interested in becoming more involved. I thought doing so might be a good way for me to get connected and meet more professionals. Checking that box significantly changed my life both professionally and personally.

I started as the branch recording secretary and as a branch chapter officer. There were people who mentored and encouraged me along the way and it helped me to develop a sense of confidence that has had a tremendous impact upon my life. It has always been extremely important to me to seek out others who might be interested in being involved and to mentor them just as I was and continue to be mentored.

I have had the opportunity to serve in a variety of leadership roles over the past 20 years at the local, branch, region, and national level. All of those experiences have allowed me to build my knowledge base related to the profession of counseling and I feel like I am now in a position to be able to put my skills and abilities to work as ACA President.

The various roles in which I have served have enhanced my ability to be aware of the needs of members and consumers alike while balancing the realities of what can be done to meet those needs. I am a collaborative leader and I strive to find consensus amongst ideas shared. I want to continue to find ways to serve the association and to assist others in their journey to do so as well.

**Candidate questions**

ACA is becoming an increasingly diverse organization, both among our members and the specialty areas and practice settings that they represent. Additionally, over 50 percent of ACA's members do not belong to a division. Under your leadership as ACA president, what would the association do to meet the specific and varying needs of these members and at the same time meet the needs of all members?

First and foremost, I believe it is important for us to remember that we are all counselors. Our core training and philosophy is our common bond and it is what distinguishes us in many ways from our colleagues in other helping professions. While we may choose to focus our expertise and talents in a variety of work settings, we recognize ourselves as counselors.

I would strive for us to look to our current members to ascertain what they want from their membership organization and to respond to those needs. Additionally, I would want to investigate those counselors who do not belong to ACA to find out what deters them from joining. Are there needs we can meet that might encourage more to belong and to become active?

I would also want to focus upon what ACA needs to do to meet the needs of the consumers that counselors serve. ACA needs to be the primary voice for counselors in the legislative and other public arenas. ACA can be the driving force behind recognition by the public about what it is that counselors do and...
how to assist those with whom we work to enhance their lives.

Social media is changing the landscape of how people communicate and share information. How do you think ACA should utilize social media such as Facebook, Twitter and LinkedIn?

ACA staff and leadership have done a great job of listening to member feedback about what resources they most desire and how they want to access information. I have appreciated the blogs, podcasts, webinars, use of Facebook and the continuing education options ACA has made available and I would support the continued use of these technologies. The networking and educational outreach social media provides can prove very meaningful for many of our members in rural areas.

Social media also allows us to market the profession of counseling in new ways. I would encourage investigating how we may be able to utilize these avenues more as an association. I think our student members and our members who have really embraced technology can provide us with some ideas about how we might continue to best meet the needs of members in terms of their need for information and how we might also provide consumers appropriate and accurate information about the role that counselors can serve in their lives. ACA’s move to hire a staff person whose primary role will be to focus on use of social media shows commitment to being on the cutting edge of meeting member and consumer needs.

As the economy has worsened, jobs for counselors are becoming harder to find. Yet institutions of higher education continue to graduate an increasing number of students. As president, what do you see as ACA’s role in working with prospective counselors and graduate programs?

As a counselor educator, I have had to field this question from individuals involved in higher education policy and legislation. I believe that at times it might be more accurate to say that there is an impact on counselors having difficulty finding jobs based on geography. For example, there is a high need for counselors in many areas of my state but those areas may seem less attractive to individuals based on their rural nature. Even though many of these areas may provide an avenue for loan reimbursement for counselors, this is not widely advertised.

Counselor education programs get a lot of pressure from their universities to maintain high numbers of students as that is the business of higher education. However, counselor educators also have an ethical obligation to gatekeep and to be upfront with students about future professional prospects. Maintaining high standards allows counseling programs to have a process in place which helps to ensure high quality training.

I want to see ACA continue to lobby for the inclusion of counselors whether it be as providers or recipients of reimbursement. We need all of our members to do what they can to advocate for our profession at all levels.

Graduate students are the future of our profession and our association. Under your leadership as president, what would you do to help more students transition into professional membership and continue their involvement with the association?

Mentoring of new professionals and especially students is something that has been very important to me. If I were to serve as ACA President, it would allow me to do this work on an even larger scale.

I have been part of a mentoring program in my own branch matching new professionals with professionals in the field. I would enjoy the opportunity to work to create a similar system on a wider scale. Professionals in the field often find it as meaningful to be a mentor as the mentees.

I believe there are many members who may be interested in serving in leadership but at times aren’t sure about how to begin their initial involvement. I would promote new professionals involvement at their branch level as a viable first step. We need new, energetic leaders to assist in our branches—especially in those branches who are currently struggling. There is tremendous opportunity for interested members to make huge impacts in their “own backyard”.

I would seek through self nomination or recommendation individuals to serve and to help members match their talents and time availability to where ACA might best be able to utilize them.

Gerald A. Juhnke

Education
Ed.D. Counselor Education and Supervision, Western Michigan University; MA Counseling, Central Michigan University; BA Psychology, Michigan State University

Certification and licensure
LPC, NCC, MAC, ACS, LCAS

Current position
Professor, University of Texas-San Antonio

Professional experience
Professor, UTSA 2004-Present (Doctoral Program Director 2004-2011); Professor & Clinic Director, University of North Carolina-Greensboro (1992-2004); Counselor, Barry County Mental Health (1990-1992); Counselor, Independent Practice (1986 to 1990)

Association experience
Past President International Association for Addictions & Offender Counselors, Past President Association for Assessment in Counseling & Education

Awards and honors
ACA Fellow Award, IAAOC Addictions Educator Excellence Award, JAOC Research Award, ACA Ralph Berdie Research Award

Publications
Books:
Selected Refered Journal Articles:
Community service
Selected Community Service: Jerry serves the UTSA Police Department and university community via his participation in simulated hostage – shooter response scenarios. He provides pro bono services to local school districts, and agencies.
Qualifications and reasons for seeking office
I am unabashedly a professional counselor who believes ACA provides THE largest, united voice for ALL professional counselors. I became an ACA member in 1985 and a Licensed Professional Counselor in 1990. I have successfully served ACA, and its divisions and branches via numerous elected and appointed national and state leadership positions. Minimally, this service has included two ACA Division presidencies, three state branch ACA division presidencies, Co-Chairing ACA’s Council of Journal Editors, serving as IAAOC’s Journal of Addictions & Offender Counseling’s Editor-In-Chief, and currently serving multiple, ACA division editorial review boards including Counselor Education & Supervision, the Journal of Creativity in Mental Health, and the Journal of Addictions & Offender Counseling. As a Licensed Professional Counselor I have effectively counseled in agencies, managed my own successful independent practices, supervised counselors, directed a counseling clinic, helped establish and direct a nationally visible doctoral counselor education and supervision program, and taught exceptional master’s and doctoral students in three separate states. Additionally, I have joined other ACA leaders and met with senators on Capitol Hill to seek counselor inclusion in important health care and educational legislation. These combined experiences have made me a knowledgeable and effective counseling leader who has the necessary qualifications to serve as ACA president. I seek the ACA presidency to continue my service to ACA, its members, divisions, branches, and regions, the counseling profession, and those we tirelessly serve. Via the presidency, I wish to address morphing national and state mental health care and education legislation that threatens professional counselors’ inclusion and practice. One of multiple ways I wish to address such legislation is to promote research endeavors conducted by our membership that investigate professional counselors’ unique and positive influences on clients and students, as well as the efficacy of evidenced based practices counselors commonly utilize.
Candidate questions
ACA is becoming an increasingly diverse organization, both among our members and the specialty areas and practice settings that they represent. Additionally, over 50 percent of ACA’s members do not belong to a division. Under your leadership as ACA president, what would the association do to meet the specific and varying needs of these members and at the same time meet the needs of all members?
Especially as a former president of two ACA divisions and three state, branch divisions, I believe vibrant division, branch, and regional memberships are essential to ACA’s overall health. I view these interactive and intertwined relationships as symbiotic and mutually helpful to one another. Thus, I will work with division, branch, and region leaders to do whatever reasonably possible to strengthen ACA’s relationships with members in an effort to gain increased political, social, and economic strength, promote a unified professional counseling voice, and encourage interactive support. This is best for ACA and the divisions, branches, and regions, as well as professional counseling as a whole. Specifically, I would work with divisions, branches, and regions to encourage joint memberships that will benefit our members, strengthen our connections, and seek ways to reduce potential costs while increasing joint membership services.
Social media is changing the landscape of how people communicate and share information. How do you think ACA should utilize social media such as Facebook, Twitter and LinkedIn?
I believe social media has significant December 2011 | Counseling Today | 57
potential to engage, empower, and inform ACA members as well as the public. I like the idea of utilizing social media to provide information on topics of current interest such as “Bullying”. Psychology Today’s website does something similar to this and utilizes volunteer experts who write blogs on specific topics of interest. Knowing the expertise of our ACA membership, we could create something even better. Concomitantly, we could use social media sites such as Facebook and Twitter to inform ACA members of pressing issues ranging from legislative alerts to the need for ACA counseling professional volunteers to help survivors of natural disasters like the Oklahoma twisters. Although I utilize social media, I am not an expert. During my division presidencies, I learned ACA has many creative and ingenious members, who know far more than I do. Thus, I would seek members with social media expertise, establish an ACA Social Media Committee, ask them to devise a practical, ACA friendly Social Media Strategy Plan, and encourage implementation of same. Then, I would marvel at their incredible accomplishments, and applaud them for helping ACA create the very best social media for our membership.

As the economy has worsened, jobs for counselors are becoming harder to find. Yet institutions of higher education continue to graduate an increasing number of students. As president, what do you see as ACA’s role in working with prospective counselors and graduate programs?

My heart goes out to students who have invested themselves in counseling studies and find themselves unable to secure counseling positions. As a counselor educator, I know that counseling graduates are well trained and have many important listening, critical thinking, and interpersonal skills. These skills make them marketable both within and outside professional counseling. However, sometimes it takes time to find a counseling position. As ACA president, I would seek to work in unison with interested counseling graduate programs and faculty, state labor departments, and ACA divisions to create a clearinghouse for graduating ACA student members seeking counseling positions. This clearinghouse would also be available to ACA members who lost their previous counseling positions due to the economic downturn. Additionally, I would create an educational conference program at an upcoming ACA Conference that would specifically address topics of significance for recent graduates and displaced counselors, provide potential resources, and possibly mentoring opportunities. After all, each of us was a counseling graduate at one time or another. Although ACA certainly is not responsible for finding members jobs, we clearly should be a place of support and affirmation to our newest and most recently displaced fellow professionals.

Graduate students are the future of our profession and our association. Under your leadership as president, what would you do to help more students transition into professional membership and continue their involvement with the association?

Do you remember the late 1980’s situational comedy, Cheers? When I think of Cheers the first thing that pops into mind is the Cheers’ theme song, “Where Everybody Knows Your Name”. The sit-com and its theme song highlighted acceptance, friendships, and a sense of place—experienced as a sense of “belonging”. As a counselor educator, I quickly learned my adult learners want their classroom atmospheres to include acceptance, safety and comfort, professional friendships, and a sense of belonging. Clearly, I am not suggesting that ACA become bar-like or “friendship central”. However, I believe ACA needs to more actively engage graduate students and newly entering professionals in a manner that demonstrates THEY ARE GREATLY VALUED AND APPRECIATED. When I speak to ACA student members three reoccurring themes often emerge—a sense of “disconnect” between student and professional members, uncertainty regarding what divisions student members “should” belong, and puzzlement on how to become engaged with such a large association. As ACA president, I would work in conjunction with divisions, branches, and region leadership to insure students experience a sense of professional belonging and identify ways students can have more opportunities to engage with ACA, our professional members, and divisions.

Michael M. Kocet

Education
Bachelor of Liberal Studies, BGSU; MA in Counseling, Bowling Green State University; Ph.D. in Counselor Education, University of Arkansas; Graduate Certificate in Dispute Resolution, University Massachusetts, Boston.

Certification and licensure
Licensed Mental Health Counselor (Massachusetts); National Certified Counselor

Current position
Associate Professor and Student Affairs Program Director, Department of Counselor Education, Bridgewater State University

Professional experience
Associate Professor, Department of Counselor Education, Bridgewater State University (Massachusetts) 2002-Present. Group therapist, Arbour Fuller Hospital 2002-2009 (S. Attleboro, MA); Clinical Therapist, Pride Institute, Dallas, Texas 2001-02; Counselor-in-Residence, University of Arkansas, 1997-2001; Counselor, Sydney-Borum Health Center, Boston, MA 1998; Residence Hall Director, University at Buffalo 1994-1996

Association experience
ACA Ethics Committee 2001-2007; ACA Ethics Committee Chair 2003-04; Chair, ACA Code of Ethics Revision Task Force 2002-2005; President, Association for LGBT Issues in Counseling 2009-2010; Board Trustee, Association for LGBT Issues in Counseling 2005-08; ACA Taskforce on Sexual Minority Youth in the Schools 2003-06; ACA...
Convention Proposal Reviewer 2008, 2009

**ACA/Division/Branch experience**
ALGBTIC, ACES, ASERVIC

**Publications**


**Presentations**


**Community service**
Therapist and Clinical Supervisor (Pro-bono service) Gay Men's Domestic Violence Project, Boston, Massachusetts 2009-Present; Healer Circle Leader (pro-bono group therapist), Comfort Zone Camp, national bereavement camp for kids ages 7-17, 2010-Present; Diversity Council, Bridgewater State University 2002-Present; Advisor, AWARE (LGBT campus group), BSU 2007-Present

**Qualifications and reasons for seeking office**

Giving back to the association which has given me so much and helped shape my professional identity has been very important to me. Through my service in ACA I have been able to use my counseling training and skills in order to serve others. I have been privileged to serve ACA in a variety of capacities, such as board trustee member and president of the Association for LGBT Issues in Counseling. I also had the opportunity to serve two terms on the ACA Ethics Committee, including as chair, which involved adjudicating ethics cases of ACA members. As chair of the ACA ethics committee, I helped institute the Graduate Student Ethics Case Study Competition which is still going strong today. One of the highlights of my service to ACA was when I chaired the task force that created the 2005 ACA Code of Ethics. I got to work with leading multicultural and ethics experts in our field to create ethical standards that dealt with a range of issues, such as counselors receiving gifts, end-of-life care, multiculturalism, potentially beneficial relationships, and technology. Being chair of the code of ethics revision process enabled me to grow both personally and professionally and helped me hone my ethical sensitivity and inquisitiveness, which I try to instill in my graduate students. My service to ACA has been through two areas I am most passionate about - counseling ethics and diversity issues (especially the LGBTQ population). I believe that the professional relationships I have built over the years with counselors, supervisors, counselor educators, and the staff within ACA have shown that I am someone who leads by collaboration. I believe in the importance of appreciating the unique gifts and talents that each person brings to help our association grow and thrive in the 21st century.

**Candidate questions**
ACA is becoming an increasingly diverse organization, both among our members and the specialty areas and practice settings that they represent. Additionally, over 50 percent of ACA’s members do not belong to a division. Under your leadership as ACA president, what would the association do to meet the specific and varying needs of these members and at the same time meet the needs of all members?

By utilizing the experiences and worldviews of the culturally diverse membership in ACA, we can discover innovative solutions to problems and uncover possibilities that help the profession grow. While I strongly support
having specialty areas and divisions within ACA, I sometimes become concerned that we have become too splintered and fractured. Even the title ‘Divisions’ used within ACA places an emphasis on separateness. Regardless of our different specializations or practice settings, we need to focus more on the common characteristics we all share as counselors, rather than how we are different. As ACA President, I would foster more collaboration among divisions and encourage members who are not part of any division to play a more active role on committees, task forces, and other leadership roles. As President I would propose a “Practitioner’s One Day Pass” at the annual ACA Conference. For members unable to attend a full convention, members would have the ability to attend the convention on one single day and pay a reduced rate for the day they attend. Some counselors do not receive professional development funds and therefore pay for conferences from their personal budget. Our goal should be to increase member attendance at national conferences.

Social media is changing the landscape of how people communicate and share information. How do you think ACA should utilize social media such as Facebook, Twitter and LinkedIn?

I believe ACA can use social media in a number of capacities. Given that many newer professionals and graduate students use Facebook, Twitter, and LinkedIn on a daily basis, we should recognize that these technology vehicles have numerous possibilities to foster community, communication, and information about the association. As President I would hold Twitter virtual town hall meetings throughout the year, open to any ACA member interested in sharing an idea, offering a suggestion, or raising a concern. I also think social media is an important way to talk about key issues impacting the counseling profession, such as ethics, multiculturalism, and counselor self-care, just to name a few. It is also critical for ACA to offer workshops and virtual discussions on how counselors can utilize social media in an ethical and professional manner. For example, ACA leaders could pose a question for members to debate on Facebook. Social media could also be used as a clearinghouse for resources such as websites, books, articles, and other tools for counselors to use with clients. Because technology changes and grows at lightning speed, it is important for ACA to provide current leadership on the benefits and challenges that social media presents.

As the economy has worsened, jobs for counselors are becoming harder to find. Yet institutions of higher education continue to graduate an increasing number of students. As president, what do you see as ACA’s role in working with prospective counselors and graduate programs?

One thing that I would do to help address this challenge is to speak with counselor educators from around the country in order to get a pulse on the job market in various regions in the country and beyond. Counseling professionals have a strong skill set which can be transferred to a variety of jobs and positions. As a profession, we need to provide more information to our graduate students and new professionals on how to be stronger advocates for their training and expertise. For example, when job postings advertise for LICSW applicants, counseling graduate students can apply and state why they believe they are just as equally qualified as candidates from other disciplines. As President I would also meet with graduate students to hear their concerns and how the association can best support their career development. Another step I would take would be to offer educational sessions for graduate students at the ACA annual convention on how to organize a job search process and what to look for in employment opportunities. Given the ever-changing economic market, counselors need to be flexible and open to the possibility of working in areas where clients are traditionally underserved.

Graduate students are the future of our profession and our association. Under your leadership as president, what would you do to help more students transition into professional membership and continue their involvement with the association?

In order to foster greater involvement by graduate students within ACA, I would encourage division and state branch presidents, region leaders, and others within ACA to have graduate student representation in as many roles as possible. We have a professional responsibility to provide graduate students with regular mentoring opportunities and help them create a strong professional identity. I have noticed at times that certain committees and task forces within ACA and its divisions lack a strong presence of graduate students. We need to be more purposeful at hearing students’ voices. As a counselor educator I get to witness the excitement and energy from graduate students as they learn new theories, ideas, skills, and competencies. This incredible passion needs to be harnessed and utilized at every level of ACA in order for our association to become the best it can be. Another thing I would do to foster students’ transition into professional membership is to extend the New Professional dues to two years. Given the economic challenges we face today, I would make ACA membership as affordable as possible. I support the efforts being discussed to offer all members more choices regarding member status and benefits.

E. Christine Moll

Education
PhD Counselor Education and Supervision, and Leadership: Barry University, Miami, Fla.; MS Counselor Education: Canisius College, Buffalo, NY

Certification and licensure
NY-LMHC, NCC

Current position
Department Chairperson – Counseling & Human Services at Canisius College
Professional experience

Association experience
2005 Code of Ethics Taskforce; AADA leadership roles including president and representative to 20/20 committee; Governing Council Region Representative and Executive Committee Member; NYCA Leadership roles including president and branch representation to NAR

ACA/Division/Branch experience
ACA, AADA, ACES, ASERVIC, CSJ

Awards and honors
Canisius School of Education Dean’s Distinguished Faculty Award for Teaching; AADA Presidential Mentor Award; Alpha Sigma Nu - invited induction; I. Joan Lorch Faculty Award for Women’s Studies

Publications

Presentations
Keynote Addresses:

Community service
Ride for Roswell Park Hospital: Annual Extra Mile Club Member (earning $1000. +) multiple events over a year for cancer research); Multiple ministries within my church community and on campus; ACA 2011 Day of Service in New Orleans

Qualifications and reasons for seeking office
The ACA president primarily serves the organization’s membership, and represents our organization to the public. It is a calling from the membership to step to the front of the organization to lead and advocate for the counseling profession, the membership and our constituencies.

My leadership abilities developed over twenty-five years in emerging roles within the New York Counseling Association, the North Atlantic Region, the ACA Governing Counsel and then the Association for Adult Development and Aging. It was, and remains my honor to serve the profession. My service on the taskforce to revise and write the 2005 Code of Ethics remains a career privilege. Simultaneous to my leadership roles in ACA, my administrative responsibilities at Canisius College expanded over 25 years on campus (as noted in “professional experience”). I now serve as the chairperson of that department, writing a proposal for a doctoral program grounded in the Ignatian social justice principles of creating men and woman for and with others in an ever-changing global environment.

Those who nominated me as a candidate recognize my skills, my commitment to the counseling profession and to serving the day-to-day counselor. I will aim to create innovative agendas for Governing Council meetings designed to serve membership well. I will ask the members of Governing Council, and other leaders to support, refine and enhance ideas born from the agenda, and implement them to better serve the ACA membership, our constituencies, and the profession overall.

Candidate questions
ACA is becoming an increasingly diverse organization, both among our members and the specialty areas and practice settings that they represent. Additionally, over 50 percent of ACA’s members do not belong to a division. Under your leadership as ACA president, what would the association do to meet the specific and varying needs of these members and at the same time meet the needs of all members?

As I consider the history of ACA, attempts to meet diverse specialty areas and practice settings resulted in the creation of our divisions and interest groups. Review of recent Governing Counsel minutes suggest that this continues with the creation of the Association for Child & Adolescent Counseling (ACAC) as an Organizational Affiliate of ACA.

ACA members who choose to belong to ACA may do so for a variety of reasons. It is possible those members who belong to ACA only do so because they see no need to spend the money to join a division.

Member needs do vary across geographic regions. There is no “one size fits all” solution. However, as ACA President I intend to:

- Offer bi-monthly teleconferences available to all ACA members;
- Personally communicate with Branches, Divisions, and students to invite
  - Submission of agenda items for Governing Council meetings,
  - Input for Counseling Today, electronic newsletters, and presidential messages, and
  - Needs for leadership development meetings (COPARC and Regionally);
- Advance “partnership” agreements with institutions (agencies, universities etc.) to collaborate professional development opportunities that might save money for all, increase media attention, promote the profession and the training program.

Social media is changing the landscape of how people communicate and share information. How do you think ACA should utilize social media such as Facebook, Twitter and LinkedIn?

“Social media” can suggest that one is an alternative to the other, and one consistent management strategy can apply. Facebook, Twitter and LinkedIn are different educational platforms with different goals: one as private space to connect with friends/family, another is a micro blogging platform to promote NEWS, and the last is for professional networking.

Therefore, each of these initiatives needs to be well branded and connected. ACA members need to easily find ACA on all three platforms, and each need to link back to the ACA website.
Their three platforms are technological “gifts” for all members to advocate for and within ACA.
In addition:

- Facebook can educate “friends” to market events/webinars etc.
- Twitter can educate, retweet (spread) similar ideas, among ACA members, legislative, corporate, and media members, and
- LinkedIn can educate, network with potential advocates of the profession (congressional members, media links, etc.) as well as provide a career network for members.

Various computer programs can create automated ACA generated posts, thus eliminating management time. However, a consistent message across these and other social media venues is essential.

As the economy has worsened, jobs for counselors are becoming harder to find. Yet institutions of higher education continue to graduate an increasing number of students. As president, what do you see as ACA’s role in working with prospective counselors and graduate programs?

ACA, Divisions and Branches continually search for new ways to attract and retain counselors-in-training and new professionals. The success of potential resources created by ACA, and partners is dependent upon the willingness of counselor educators to utilize the resources available to them and their students.

As ACA president, and an advocate for the grass-root professional counselor, I will reach out to where professional counselors and students live and work. Collaborating with the ACES president, I will

- Be available to colleges/universities (personally or via teleconference) for bridge building to perhaps
  - Offer “campus/town meetings” open to local employers (agencies, school districts, hospitals etc.) to discuss “local” economic/employment concerns and ways to address those concerns.
- Promote the dissemination of post-graduate employment data by counselor education programs to current graduate candidates, and to the community via the department’s website;
- Help counselor education programs identify local “counseling related” jobs (full/part time) in concert with the university’s career center that support skill development;
- Encourage entrepreneurship and private practice;
- Foster networking skills with graduate students to reach out to related professionals (physicians, nurse practitioners, religious leaders, etc.) for mutual referrals.

Graduate students are the future of our profession and our association. Under your leadership as president, what would you do to help more students transition into professional membership and continue their involvement with the association?

“I feel the earth move under my feet, I see the sky tumbling down” is not only a Carol King lyric, but sometimes a mantra for new counseling professionals overwhelmed by professional expectations (by self and others)!

Local students recently discussed a need for ACA to expand career search options, advertisement of available positions and create other assistance for Masters and Doctoral graduates. When I inquired “what” ACA currently offers, few could give me definitive answers. Perhaps we need to

- Expand promotion of what ACA currently does well, and
- Encourage counselor educators to make current ACA assistance easily available via a department website link.

Let us invite student members to our “table” and provide reasons to remain around our “table.” My ideas include:

- Using social media as a source of support;
- Webinars regarding roadblocks one might anticipate in one’s early career;
- Working with counselor educators to
  - Encourage graduate students to not only attend local, regional, and national conferences, but to co-present research/workshops at conferences, and
  - Actively nominate graduate students for ACA, Division and Branch committee membership.

- Invite ACA leaders, authors, etc. to do “guest” lectures/visits to graduate classes via teleconferencing media (ex. Skype)

Circie West-Olatunji

Education
My doctoral and master’s degrees in counselor education were received from the University of New Orleans (UNO). Prior to my studies at UNO, I was enrolled in the counseling psychology program at Teachers College of Columbia University with a specialization in multicultural counseling. I received my bachelor’s degree from Dartmouth College (NH).

Certification and licensure
After graduating from my masters program, I became a nationally certified counselor, a licensed professional counselor (LPC), and a licensed marriage & family counselor. I am a registered Red Cross and SAMHSA Disaster Mental Health Services provider. In Louisiana, I am listed as a licensed supervisor and licensed test administrator.

Current position
Currently, I serve as Associate Professor and Mental Health track coordinator in the Counselor Education program at the University of Florida.

Professional experience
My professional experience includes over 12 years as a counselor educator, including 4 years at Xavier University of Louisiana. Additionally, I ran a private practice for approximately 7 years. Prior to my counselor education training, I worked in student services in higher education at Einstein College of Medicine and Worcester Polytechnic Institute.

Association experience
I currently serve on the ACA Governing Council and was elected by
my peers to the Executive Committee (2010-2011). I am a past-president of AMCD and previously served as VP of AMCD African American Concerns. I have also served on the ACA International Committee, the ACES conference Coordinating Committee, and as LAMCD newsletter editor.

ACA/Division/Branch experience

My ACA memberships include: AMCD, ACES, CSJ, Florida Counseling Association (FCA), and Florida AMCD. Additionally, while living in Louisiana I was active in my state branch (LCA & LAMCD).

Awards and honors

To date, I have received the FCA Pete Fisher Humanitarian Award (2009), AMCD Sam Johnson Lifetime Achievement award (2009), UF International Educator award (2009), UF College of Education Scholarship of Engagement award (2009), CSJ 'Ohana award (2008), Association of Black Psychologists Community Service award (2007), UNO Marcus B. Christian Community Service Award (2000), and was honored by the New Orleans YWCA as one of two Women Who Make a Difference (1997).

Publications

I have published over 30 articles in peer-reviewed journals (including JCD, JMCD, JHCEAD, & JMHC), 13 book chapters, and three co-authored books.

Presentations

Internationally, I have presented keynote addresses and research papers in Botswana, China, Ghana, Jamaica, Malaysia, the Philippines, Romania, Singapore, South Africa, and Thailand. Additionally, I have disseminated my work at ACA, ACES, AMHCA, ASGW, & SACES conferences as well as at the annual conventions of the American Educational Research Association, National Black Child Development Institute, and Association of Black Psychologists. Locally, I present at FCA, regional agencies, and educational programs.

Community service

My community service has primarily focused on disaster counseling and school-based services. I have led disaster outreach trips to Botswana, South Africa, post-Katrina New Orleans, Haiti, and Cedar Key, FL. I have spent a year as faculty-in-residence at a k-12 lab school and currently serve as Associate Editor of the Florida Journal of Educational Administration & Policy. I was recently selected to serve on the editorial board of the Korean Journal of Counseling Psychology.

Qualifications and reasons for seeking office

I believe that my core qualifications for the position of ACA president-elect are my experiences as a counselor educator, practicing clinician, and involvement in ACA leadership. As a counselor educator, I have the opportunity to contribute to the profession by: (a) training students to prepare them to effectively meet the needs of diverse clients and (b) conducting research that identifies new solutions to problems that plague individuals and compromise their growth and development. My experiences as a practicing clinician, maintain my focus and humility about the advancement of counseling as a profession. Working in community settings, schools, and private practice provides an on-the-ground view of counseling that reflects the complexities of service provision. I am convinced that research, teaching, and policy development need to be seen from this perspective. My involvement in ACA leadership has afforded me the opportunity to work with individuals in the various divisions as well as collaborate with leaders across the divisions. I have seen how difficult and fulfilling it is to reach consensus around issues that affect ACA as a whole. My ACA leadership experiences can aid in honoring the goals of the various divisions, branches, and interest groups in ACA while advancing the mission of our organization.

I seek the office of ACA president-elect in order to: (a) advocate for the profession within the larger community of mental health professionals and beyond, (b) amplify the voice of practitioners and students in order to increase their involvement in ACA, and (c) move ACA forward as a unified force of capable, effective, and innovative professionals in the mental health arena.

Candidate questions

ACA is becoming an increasingly diverse organization, both among our members and the specialty areas and practice settings that they represent. Additionally, over 50 percent of ACA’s members do not belong to a division. Under your leadership as ACA president, what would the association do to meet the specific and varying needs of these members and at the same time meet the needs of all members?

In order to meet the needs of ACA members within specific interest areas as well as the members as a whole, I would: (a) customize member benefits, (b) augment the use of technology to allow for networking within interest groups, (c) provide discounts for multiple division memberships, and (d) make resources more accessible for special interest areas. By bundling member benefits, individual members can have greater flexibility and selection of services that meet their individual needs thus avoiding the “one size fits all” approach. By increasing the use of technology, ACA can enhance the delivery of services to members for more dynamic, fluid communication via blogs, eNews, webinars, social networking (i.e., Facebook & Twitter), and podcasts. Given the current economic climate, providing discounts for multiple division memberships would minimize the financial burden for member involvement and participation. Finally, ACA resources need to be available to special interest areas to facilitate members’ communication and exchange of information.

Social media is changing the landscape of how people communicate and share information. How do you think ACA should utilize social media such as Facebook, Twitter and LinkedIn?

For ACA members, the use of Facebook, Twitter, and LinkIn, for example, can serve to create more dynamic interactions among members as well as between members and ACA leaders. The use of social media can be used to share information immediately after critical incidents that occur. Finally, social media can be used for job placement networking. ACA needs to more effectively utilize social networking tools to facilitate communica-
tion within the membership to allow for exchange of ideas and resources. Further, many members are not sufficiently familiar with ACA leaders and initiatives within the organization. Additionally, the use of social networking tools can make ACA initiatives more transparent and encourage dialogue between ACA leaders and members. Secondly, recent natural and human-made disasters have increased on the local, national, and international fronts. Counselors have been both affected and solicited to serve as responders. ACA needs to utilize social media tools to facilitate rapid response to the most needed areas. Thirdly, as counselors navigate the workforce arena, they need to have access to information about available positions and opportunities nationwide. Use of social media tools can assist recent graduates as well as seasoned professionals in their job searches.

As the economy has worsened, jobs for counselors are becoming harder to find. Yet institutions of higher education continue to graduate an increasing number of students. As president, what do you see as ACA’s role in working with prospective counselors and graduate programs?

There are several ways in which ACA can augment their support of student members in their search for counseling jobs. First, ACA can create a career center on the ACA web site that provides job announcements for graduating students and early career professionals. Additionally, such a career center could provide tips on resume development, interviewing skills, and how to conduct a job search. Second, ACA could develop a job clearinghouse on Facebook. This venue would allow for more communication and dialogue between members about the positions available and the job search process. Use of Facebook as a social networking tool would allow members to share more informal, nuanced information about jobs, agencies, and the job application experience. Third, ACA can develop podcasts for graduating students that would help them to prepare for their career searches. For example, information on innovative careers in counseling would be helpful. As a relatively new discipline, applications of counseling are still being discovered. Students can benefit from hearing seasoned counseling professionals talk about the myriad of placement opportunities that are available to our graduates.

Graduate students are the future of our profession and our association. Under your leadership as president, what would you do to help more students transition into professional membership and continue their involvement with the association?

Graduate students can benefit from mentoring and support through provision of: (a) services and information for practitioner and counselor educator positions, (b) opportunities to network, and (c) mentors. For beginning practitioners, it is important that they receive information about preparing for licensure, continuing professional development opportunities, training about conducting action research and needs assessments to better serve their clients, and advanced training on outcome and process evaluation to increase clinical effectiveness. For new counselor educators, information on: (a) publishing in peer-reviewed journals, (b) effective teaching tools, (c) appropriate service activities, and balancing their personal and professional lives is needed. Graduating students also need opportunities to network with experienced counselors and counselor educators in both the face-to-face and virtual arenas. Many early career counselors/counselor educators need to acquire more realistic conceptualizations of the expectations within the world of work. Having opportunities to hear about the day-to-day work demands is of value. Finally, much has been written about the value of mentoring experiences for graduating students. Mentoring has been shown to increase satisfaction among early career counselors in their professional lives. Moreover, mentors can also help new professionals to engage in useful professional development activities.

ASSOCIATION FOR ASSESSMENT IN COUNSELING AND EDUCATION

President-Elect

Casey A. Barrio Minton

Professional background and experience

Title: Associate Professor and Counseling Program Coordinator, University of North Texas
Education: PhD, Counseling & Counselor Education, University of North Carolina at Greensboro; Certificate, Women's & Gender Studies; MS, Counseling (Community)
Certification: NCC
Memberships: ACA, AACE, ACES, CSI, SACES, TCA, TACES
Leadership: AACE Secretary, (2010-2012); AACE National Conference, Chair (2011); CSI International, President (2010-2011); ACA Research & Knowledge Committee, Member (2007-2010); Counseling Outcome Research & Evaluation, Editorial Board (2009-2012); Journal of Professional Counseling, Editorial Board (2009-2012); Counselor Education & Supervision, Reviewer (2008-current)
Honors: ACA Best Practice Research Award (2011); ACES Outstanding Publication in Counselor Education (2010)

Qualifications and reasons for seeking office

I am honored for the opportunity to continue serving the Association for Assessment in Counseling & Education as president. As AACE Secretary, editorial board member for Counseling Outcome Research & Evaluation, and chair of the 2011 National Assessment and Research Conference, it has been my privilege to work beside a dedicated group of leaders.
who are determined to strengthen our profession through AACE’s mission. If elected to serve as your president, I will support AACE’s mission through three primary goals.

1. Implementing strategic planning initiatives - AACE’s leadership has implemented a strategic planning process to affirm those aspects of AACE that are working and to identify opportunities for enhancing our functioning and impact. I understand recommendations may or may not align with my hopes for AACE. As a servant leader, I will work wholeheartedly to implement and support all initiatives recommended by the SPC and endorsed by the executive council.

2. Mentoring graduate students and new professionals – The need for high-quality research and evidence-based practice is stronger than ever. Whether through educational product, instructional resources, or direct services, I will help AACE continue to find unique ways to support the development of practitioners, educators, and researchers.

3. Leading the leaders - As the division focused on assessment and diagnosis in counseling, AACE offers expertise in research and evaluation that has the potential to meet critical needs for evidence-based practice and professional advocacy. I would like to explore opportunities for collaborative endeavors with other divisions and affiliates who are working to enhance research and evaluation within their specialty areas.

I have been encouraged and inspired during my time with AACE. I hope to continue serving AACE in such a way that helps all members and leaders find themselves empowered, encouraged, and at home within our division.

Governing Council Representative

Richard S. Balkin

Professional background and experience

I received my doctorate in Counselor Education from the University of Arkansas in 2003 and serve as a Counselor Educator for the Department of Counseling and Educational Psychology at Texas A&M University-Corpus Christi. I practiced in psychiatric hospitals, outpatient clinics, and community mental health centers since 1993, and hold a professional license in Texas with a specialization in supervision, in addition to being a Nationally Certified Counselor. My primary research interests include counseling adolescents and young adults, religious and spiritual issues in counseling and counselor training, research methods, and counseling outcomes. I am active in ACA through the following divisions: AACE, ACES, and ASERVIC. I am a past president of the Association for Assessment in Counseling and Education (AACE) and currently serve as Editor for the following journals: Measurement and Evaluation in Counseling and Development (for AACE) and Counseling and Values (for ASERVIC). Additional responsibilities include co-chairing the Jewish Interest Network of ACA and serving on the ACA Research Committee.

Qualifications and reasons for seeking office

I feel honored to be nominated for AACE Governing Council representative for AACE. I am aware of the responsibilities related to governance and service to members of ACA and AACE. My approach to decisions and responsibilities will be to evaluate how ACA can best meet the needs and obligations toward the membership. “How can we service our members better?” should be the guiding question for those responsible for governance. As we engage in an economically turbulent time, ACA will continue to be challenged in making decisions related to services, products, and resources. I will remain open to the comments and concerns expressed by the membership and leadership of AACE and welcome your input.

Joshua C. Watson

Professional background and experience

I am an Associate Professor of counselor education on the Mississippi State University Meridian campus and have over 10 years of clinical assessment experience working in a variety of community mental health and private practice settings. In my career I have authored over 45 publications and have presented at several state, national, and international professional counseling conferences. In recognition of my scholarship, I have received several awards, including the Ralph F. Berdie Memorial Research Award, Herb Handley Research Award, American College Counseling Association’s Outstanding Research Award, Mississippi Counseling Association’s Distinguished Research Award, and the Richard C. Adkerson Faculty Award presented by the Mississippi State University College of Education. An active member of the American Counseling Association (ACA), I have held numerous leadership and service roles in several of its divisions. As a member of the Association for Assessment in Counseling and Education (AACE) I have served as a committee chair, newsletter editor, webpage developer, Member-at-Large for Awards, and most recently division President (2010-2011). In addition, I also currently serve as the editor for the Journal of College Counseling, the flagship publication of the American College Counseling Association (ACCA), and as Chair of the ACA Council of Journal Editors.

Qualifications and reasons for seeking office

For the past 12 years, AACE has been my professional home. As a doctoral student I was encouraged to join the division and have found that to be some of the best advice I have received. My experiences with the division and its members have strengthened my passion for the counseling profession and helped me grow immeasurably as a clinician and counselor educator. Since joining the division I have volunteered to get involved and serve the division membership to the best of my abilities in any context in which my services were needed. This record of involvement eventually led to my being elected president of the division in 2010. Serving in this role was a tremendous personal and professional experience for me. I had an opportunity to gain firsthand experience as to how ACA, and its divisions, work to promote and protect the professional services we as counselors offer. As such, I believe I am familiar with the strengths and challenges within ACA and have the leadership skills necessary to enact positive change within the organization. As AACE Governing
Council representative, I would be committed to working toward the following goals:

- Work collaboratively with all ACA divisions, regions, and affiliates to ensure that the counseling profession is represented by a unified voice to the members of ACA, the clients they serve, federal and state legislators, and the general public.
- Continue to refine and support the needs of the ACA membership by identifying new opportunities for service, educational and professional development, and increased practice prospects.
- Provide a voice for AACE and its membership by promoting professional development which enhances competence in assessment, evaluation, measurement, and research for counselors, counselor educators, and other professionals to ensure that consumers of our services receive the quality care which they deserve.

Secretary
Mary M. Deacon

Professional background and experience
Presently, I am an adjunct professor of counseling at Liberty University. In May 2011, I received my Ph.D. in counselor education and supervision (Curry School of Education, University of Virginia). I hold an M.A. in professional counseling, clinical track (Liberty University) and a B.S. in chemistry (Central Michigan University). I am a nationally certified counselor (NCC) and am license eligible in Virginia. During my doctoral program, I was the AACE graduate student representative under Dr. Marie Shoffner (2009-2010), served as treasurer of the Rho Beta Chapter of Chi Sigma Iota (2009-2011), named the CSI Outstanding Doctoral Student (2010-2011), and awarded the Curry Trustees Fellowship in Counselor Education (2009-2010). During the past year at UVa, I worked closely with the CACREP liaison in writing our CACREP self-study and preparing for our subsequent site visit. My teaching and research interests include: girls’ and women’s career development, gender equity, and multicultural competency. I have presented at national and local conferences on career counseling-related topics and co-authored a chapter in a career counseling textbook with Dr. Shoffner. My counseling experience includes providing career, mental health, and substance abuse counseling in university and community mental health settings.

Qualifications and reasons for seeking office
It is an honor to be nominated for the office of secretary for AACE. This opportunity to give back to the profession is important to me. In my time as the AACE graduate student representative, I worked closely with the president of AACE. In this role, I created the electronic binders containing the agenda and all committee reports for the Executive Council meetings. At the fall Executive Council meeting, I was also responsible for taking and submitting the minutes. This not only gave me an insider’s view of the workings of the division, but also allowed me to interact with some of the many talented and supportive professionals that are part of AACE. As secretary, I would have an even greater opportunity to advance the purpose of the division. I will bring into the role my strong organizational skills and ability work collaboratively with other members of the Executive Council. I will work hard to establish an effective working relationship with members of the Executive Council and Executive Committees, which will allow me to assist the Executive Council in supporting the mission of AACE. I will carry out all responsibilities of the office and adhere to the duties of secretary as outlined by the AACE bylaws, including the effective management for all records of the current activities of the division, the Executive Council, and Executive Committee. I am prepared to spend the time and energy needed to perform these duties as well as any other tasks deemed necessary to support the President, other members of the Executive Council, and the membership of AACE.

Eric Jett

Professional background and experience
I completed my Masters in Mental Health Counseling in March of 2010, and since then have been working towards completing the needed licensure supervision hours required for LPC licensure in the state of Oklahoma. Currently my area of focus is working with children and adolescents who have experienced trauma, with my training being in trauma focused cognitive behavioral approaches and play therapy. Continuing my academic studies I am also a full time doctoral student at Walden University, in the Counseling Education and Supervision program. I was the PhD member at large for the Omega Zeta CSI chapter at Walden University, and am now the President-Elect. I remain active in professional associations such as the ACA and the Play Therapy Association, with special interest in divisions such as AACE. For 2010-2011 I was fortunate to be the graduate student representative for AACE.

Qualifications and reasons for seeking office
Joining AACE I knew that I wanted to grow in the area of assessment and research that backed assessment, but I was not sure what to expect from the division. What I found were experienced professionals who were willing to not only support the ACA mission but also encourage new professionals to grow in a variety of educational ways. I had the opportunity to work with the 2010-2011 AACE executive committee as the graduate student representative which was a huge step in developing my professional identity. Since then I have had the opportunity to grow professionally in other ways, such as serving as president-elect to the Omega Zeta CSI chapter at Walden University. These opportunities have strengthened my leadership skills and fueled my passion for the new developments that are being seen daily in the counseling profession. I see AACE making great strides in developing top class journal publications and encouraging graduate student participation in conferences and events. These are reasons why I wanted to be in this profession, to see social change and I believe AACE has the means and does create change in many ways. My goal is to continue working with the AACE division in any manner that I will be allowed to; so that I can help encourage the development and growth
of new professionals the way the division has done for me. My qualifications to be in the role of the secretary include strong organizational skills but also the willingness and ability to seek clarification to make sure what is needed to be written for the record is accurately done. I look forward to the opportunity, in this position or another, to remain active in AACE for many years to come.

Carrie Wachter Morris

Professional background and experience

Title: Assistant Professor, School Counseling Program, Purdue University
Education: PhD, Counseling & Counselor Education, University of North Carolina at Greensboro; MS, School Counseling, University of North Carolina at Greensboro
Certification: NCC, ACS, ASCA, CSI, ISCA
Memberships: ACA, AACE, ACES, ASCA, CSI, ISCA

Selected Honors: Outstanding Counselor Educator Award, Indiana School Counselor Association, 2010; Early Career Award, School of Education, University of North Carolina at Greensboro, 2010

Member-at-Large: Awards

Lori Ellison

Professional background and experience

Dr. Ellison has been a professional counselor for over 20 years. Working in clinical mental health and college counseling settings, Dr. Ellison has gained ample experience as a practitioner serving a variety of clients. Dr. Ellison holds an LPC in the states of Texas (inactive) and West Virginia where she now resides. In 2007, Dr. Ellison completed her PhD at Texas A&M University-Commerce. In 2009 she moved to West Virginia to take an academic position at Marshall University. Dr. Ellison has been active in professional organizations for the duration of her professional career. She was active at the state level in the Texas Counseling Association and a number of its divisions including service as President for the Texas College Counseling Association in 2007-2008. She is now active in her state organizations in WV and serves on the West Virginia Board of Examiners in Counseling. Dr. Ellison has been an active member of ACA and a number of its divisions since 2002. Currently she holds memberships in AACE, ACES, ACCA, and ASERVIC. She has served as committee member for several organizations including, most recently, the Standards Committee for AACE, and was recently appointed AACE/FACT representative.

Qualifications and reasons for seeking office

First of all, I am very honored to be nominated for the position of the Association for Assessment in Counseling and Education. If elected to serve AACE, I pledge to help further assessment and advocacy in the counseling profession. Through this position, I hope to help AACE, its members, and counselors throughout the country use assessment to benefit their clients, their practice, and the counseling profession.

My qualifications for the position include active leadership in evaluation and service at the state and national levels. Over the past few years, I have been privileged to work with the Indiana School Counselor Association (ISCA) toward increasing advocacy firmly based in research and best practices. As the Vice President for Post-Secondary Education of ISCA, I led a statewide research initiative that demonstrated a predictive relationship between high school counselor to student-ratio and student outcomes. This research and the recommendations based on the findings have influenced state policy and have been incorporated into education bills in the legislature, contributing to the creation of a newly-adopted uniform job description for Indiana school counselors. As an outgrowth of this initiative, I co-created a school counselor evaluation tool that was recently piloted and accepted for use by the state.

In my work with Indiana school counseling, research has been central, and I have seen the direct benefits it has had for school counselors. I hope to have the opportunity to serve AACE and its membership, and look forward to bringing my passion for advocacy and assessment to the secretary position.
Amanda C. Healey

Professional background and experience

Assistant Professor of Counseling, Sam Houston State University, Huntsville, 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 & TX, National Certified Counselor.

Recent Professional Experience:
Assistant Professor of Counselor Education at Sam Houston State (2010-Present) currently teaching group, theories, and research methods, SACES Newsletter co-editor (’08-Present), CSI Awards committee chair.

ACA Branch, Division and Affiliate Memberships and Other Related Memberships: ACA, AACE, CSI, CSJ, ACES, ASGW, AMCD, SACES, AWP, NASP.

Association Experience: AACE NewsNotes editor (’09-Present), ACA Publications committee (’09-Present), CORE and CES journal editorial board member, associated editor for Counseling and Values.

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: Ten 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.

Qualifications and reasons for seeking office

I am excited to have this opportunity to earn your support as candidate for AACE Member-at-Large for Awards. Over the last few years, I have served in leadership and service roles in several ACA divisions. In service to AACE, I have worked closely with two past-presidents as well as the membership to produce the AACE newsletter, NewsNotes. As Member-At-Large for Awards, I will continue to ensure that AACE honors the significant work of its student and professional members in a way congruent with our divisional values.

ASSOCIATION FOR ADULT DEVELOPMENT AND AGING

President-Elect

Suzanne Degges-White

Professional background and experience

Dr. Suzanne Degges-White earned her PhD in Counseling and Counselor Education from The University of North Carolina at Greensboro in 2003. She also holds professional counseling licensure in North Carolina and Indiana. She recently began a new position this Fall as Associate Professor of Counseling at The University of Mississippi after having been a member of the faculty at Purdue University Calumet for eight years.

Her leadership experience in professional organizations includes past service as Chair of the ACA Research and Knowledge Committee (2006-2007) and President of the Association for Gay, Lesbian, and Bisexual Issues in Counseling of North Carolina (2000-2001). She also served as Faculty Advisor for the Purdue University Calumet chapter of Chi Sigma Iota for six year. She has been the recipient of the AADA Research Award twice (2003 and 2010). She has published 15 journal articles including articles addressing issues related to specific developmental concerns over the course of the lifespan. She has given numerous presentations at the local, state, regional, and national level. She has published two books; one a co-edited collection of creative counseling interventions and the second a co-authored book addressing the development of female friendships over the lifespan.

Qualifications and reasons for seeking office

I feel qualified to take on this office based on the leadership roles I have held in other organizations as well as based on the leadership role I played in organizing and overseeing the initial charter of the state-level AGLBIC chapter in North Carolina. Through observing what currently exists, listening to the needs and desires of others in a community/group/program, and creating a plan that reflects the most genuine and urgent priorities, great change can be actualized. My professional interests and experiences all have deepened my knowledge of the lived experience of individuals today -- as a counselor educator and private practitioner and researcher, I have a multi-layered perspective and appreciation for the population AADA serves and believe that I could successfully lead the organization into a stronger and more visible level of activity and perception.

Robert Dobmeier

Professional background and experience

I have practiced as a mental health counselor, clinical supervisor, and agency director in urban and rural settings of western New York prior to taking a position as Assistant Professor in the Counselor Education Department at the College at Brockport in 2007. I have worked with adults of all ages and
from diverse backgrounds, especially African Americans, Native Americans, Hispanic and LGBT individuals. An area of specialty has been counseling adults with mental illness, including many with co-existing substance abuse. As the Coordinator of Mental Health Counseling at Brockport, I have advocated in the New York Mental Health Counseling Association and in state government to include diagnosis in the scope of practice for licensed counselors.

I have published and am involved in current research on spirituality as a resource for counselors and clients throughout the life cycle, for adults facing substance abuse relapse and recovery, and individuals dealing with LGBT identity issues. For the past three years, I have taught a course on spirituality in counseling and have been a member of the AADA leadership team as chair of Professional Development, when we developed the Life Series brochures, and as secretary.

Qualifications and reasons for seeking office

I have a strong belief in the counseling field and in its need to be unified for the future. Therefore, I am a strong advocate for unity within AADA and for AADA working closely with ACA, other divisions and state branches, and with other professions, where this makes sense, to enhance the well-being of adults of all ages in the U.S. Unity can be pursued within AADA by clear communication and building a shared vision for AADAs being a source of knowledge and personal growth for its members and for the communities they serve.

Young adults face stiff challenges in our society, many taking on heavy student loans, and struggling with unemployment and underemployment. Counselors need to be well-informed about the challenges of young adults and creative in expanding knowledge and resources to help them find solutions for viable employment.

We live in an increasingly diverse society, wherein different groups will benefit from learning about and from each other, for example, LGBT and straight folks, and people from African-, Native-, Hispanic-, Asian-, and European-backgrounds. AADA can foster learning among these groups by modeling effective communication, welcoming, and respect on its website, among its members, new and old, and by reaching out to work with AMCD, ALGBTIC, ASERVIC, and other organizations also seeking unity among peoples.

Most counseling professionals face extremely challenging time demands and have a serious need to be efficient in their use of time and money. Therefore, as an organization we need to have ways to communicate efficiently so that members benefit from participating in AADA for reasonable costs and with minimal demand on their time. Strategic use of an attractive and informative website, videoconferencing, and other efficient means of communicating help us to be connected while respecting that none of us have limitless resources.

Secretary

Andrew Daire

Professional background and experience

Andrew P. Daire, Ph.D., Associate Professor in the Counselor Education program in the Department of Educational and Human Sciences at the University of Central Florida. He is also Co-founder and Executive Director for the UCF Marriage and Family Research Institute (MFRI), an organization that conducts research on marriage and couple interventions and serves as a training site for counselors interested in working with couples and families. Dr. Daire received his Ph.D. from Florida State University in Counseling Psychology with a specialization in Rehabilitation Counseling. He is Licensed Mental Health Counselors (LMHC) in Florida, a Nationally Certified Counselor (NCC), a Florida Supreme Court Certified Family Mediator (CFM), and a Qualified Clinical Supervisor in Florida. His research interests are marital and couple stressors and interventions, and human sexuality and relationships. In addition to directing the efforts at the UCF MFRI, Dr. Daire teaches graduate level courses in human sexuality and relationships, counseling techniques, family counseling, practicum in counseling, and advanced career development.

Wendy Killam

Professional background and experience

Education: BA, Journalism, Baylor University; MS, Community Counseling, Texas A-M Commerce; MBA, Health Care Administration, University of Phoenix; Ph.D., Counselor Education, University of Arkansas

Certification and Licensure: NCC, CRC, LPC (TX), LCPC (KS)

Recent Professional Experience: Associate Professor and Director Clinical Mental Health Counseling Program, Stephen F. Austin State University

ACA Branch, Division and Affiliate Membership and Other Related Memberships: ACA, AADA, ACES, ACC, AMCD, CSJ, TACES, TCSJ, TAADA

Association Experiences: AADA President (2005-2006); AADA Treasurer (2003-2005); Adultspan Journal Editorial Board Member (2009-present); AADA Strategic Planning Committee Co-Chair (2010-present)

Publications/Presentations: Over 10 year of presentations and publications at
the national/regional and state level Community Service: Kiwanis Club Board of Directors, Nacogdoches TX; Independence Manor Board of Directors Secretary, Nacogdoches, TX

**Qualifications and reasons for seeking office**

It would be a privilege and pleasure to serve as secretary for AADA during this critical time in the organization's history. I hope to bring enthusiasm and expertise to the position. AADA is facing many challenges but I believe the organization can meet those challenges. I am excited about the future of AADA and the ability of the organization to have a tremendous impact on the profession with regards to adult development. AADA has always had strong publications and conferences which need to continue. These efforts have made AADA a leader in providing training in adult development and mentoring new members of the profession. My goals for the organization include the following:

1. **Membership** – The strength of an organization depends on its members. I will work with other board members to find ways to reach out to current members and attract new members to the AADA family. We need to find ways to continue to involve and retain our current members while at the same time attracting new ones.

2. **Mentorship** – AADA has always had an informal structure for membership whereby new members are nurtured and cherished. The wisdom and experience of long-term members are invaluable. I will work with the board to find ways to expand and formalize the mentorship process using online technology.

3. **Financial Fidelity** – With current issues facing most divisions, finances are extremely tight. I will work with the board to find ways to generate revenue in order to continue to provide the highest quality of services to members.

**Member-at-Large: Membership**

**Patricia Stevens**

**Professional background and experience**

I am a Counselor Educator currently in private practice in Louisville, CO. Though retired from higher education, I continue to stay involved with ACA and AADA. Consulting with programs to assist in accreditation and counselor training program development helps me to stay connected to the profession. Through the years I have presented at the local, state, regional, national and international level in the areas of substance abuse, gender implications in counseling, challenges of aging (especially for women), and ethical and legal issues in counseling. I have published multiple articles, chapters, and books in the counseling field. Service to the profession has involved committees and offices for ACA, AADA, CACREP, and IAMFC in a variety of positions; university and community committees; and participation in various professional projects and taskforces. I have had the privilege of being a Fulbright Scholar and working with the Red Cross as a Mental Health Disaster Relief volunteer. It has also been a pleasure to be honored by my professional organizations and my university for teaching, scholarship, service as well as, most importantly, mentoring students and staff. (to view full CV, go to awarenessdynamics.com)

**Qualifications and reasons for seeking office**

My involvement in AADA began when I was a graduate student many years ago and attended a conference in New Orleans for the division. The information I gained from the conference was eye opening. As I learned more about the mission and goals of the organization, it was apparent that they were important to me as a professional and to the profession in general. Understanding lifespan development is an essential part of being an effective counselor whatever your clients' stage of life. I have been privileged to work with AADA for many years in a variety of positions and served on many committees related to membership, ethics, standards for training, etc. As member-at-large, it will be my responsibility to maintain membership quality. Further, I will endeavor to develop and implement activities, publications, and web resources that will attract new members and assist our current members in being effective in their practice. Your input into this process will be the underpinnings of my program development. Again, it is an honor to continue to be of service to the members of AADA and I look forward to working with each and every one of you.

**Amy Zavadil**

**Professional background and experience**

Education: Ph.D. student, Counselor Education; M.A., Counseling and Student Development Certification: NCC Professional Membership: ACA and AADA member since 2007; AADA active membership, initially serving as editorial assistant for the ADULTSPAN Journal. I have served as newsletter editor since 2009 and Member at Large - membership, since March 2011. In 2011, I was awarded the AADA Presidential Outstanding Service Award; Chi Sigma Iota, International member since 2008; Served as Chapter secretary, president elect, and president; Committee member, CSI Counselor Community Engagement Committee, CSI Leadership Fellow.

Publications and presentations: Hook up culture, high risk sexual behavior, bullying, emergency response, community engagement.

Community Service: Coordinated and participated in campus Day of Service involving more than 100 student volunteers serving more than a dozen agencies (2009, 2010); participation in local Habitat for Humanity builds; United Way Pantry Partner initiatives supporting area food pantry programs.

**Qualifications and reasons for seeking office**

I would be honored to continue to serve AADA, and support and encourage the ongoing success of the division. My interest in and commitment to AADA has been demonstrated through my service to the division. AADA as a division provides members opportunities for service, presentations, and a scholarly journal devoted the issues of adult development across the lifespan. If afforded the opportunity to continue in the membership role, I would like to continue to encourage members to recognize the benefits of division membership as well as welcome and encourage new members.
President-Elect

Elsa Soto Leggett

Professional background and experience

I received my doctorates and masters from Texas A&M University-Corpus Christi. My doctorates is in Counselor Education and my masters degree is in Counseling/School Counseling. I am a licensed professional counselor and a board approved supervisor as well as a certified school counselor in the state of Texas. I have been in higher education as a counselor educator for eight years. I have been with the University of Houston-Victoria in Sugar Land for four years and previously I taught at Texas Southern University. Within UHV, along with my teaching, I have held the position of Interim Program Coordinator and am currently the Program Coordinator for Counseling and Chair of the Education Leadership & Counseling Dept. My other experiences in the counseling field have been in supervision of LPC-Interns and as a professional school counselor at an elementary school. I am a member of eleven counseling organizations including Association of Child & Adolescent Counseling (ACAC). Through these organizations I have held a few positions; Vice President of Fort Bend Counseling Association, Emerging Leader & Senator for Texas Association of Counselor Educators & Supervisors (TACES). Currently I am the President-Elect for TACES and a Trustee for ACAC.

Qualifications and reasons for seeking office

In the past four years eight of my publications and more than half of my presentations & workshops deal directly with working with children and adolescents. Counselors and therapist are always eager to receive current trends and best practices for working with children and adolescents. Working with children and adolescents presents special challenges that ACAC hopes to address. That is why ACAC is an important organization. Other counseling organizations offer bits and pieces to working with children & adolescents but ACAC will bring all of the pieces together. ACAC has developed a webpage. It will be designed to allow members to network, share thoughts, questions, & experiences. In addition, in the near future this site will include access to an professional online journal which will richly add to the resources of the ACAC membership. Additional benefits will follow as the organization grows. ACAC will seek to offering workshops and presentations which will provide knowledge & experiential learning for members and other interested persons. One of the key elements of ACAC will be to actively listen to the members to determine what directions this new division should take in addressing the needs of children and adolescents.

Trustee

Nikki Freeburg

Professional background and experience

Education: Ph.D. in Counselor Education from Idaho State University, MA in Marriage and Family Therapy from Northwest Nazarene University
Certification and Licensure: Licensed Professional Counselor (LPC), CACEP review team member
Recent Professional Experience: Assistant Professor, Department of Counselor Education, Bridgewater State University, MA
Professional Membership: Phi Kappa Phi, ACA, ACES, NARACES, RIMA-AC, NARACA, AACE, Chi Sigma Iota, ACC
Association Experience: Co-faculty advisor for Chi Sigma Iota chapter, Secretary of MARIACES, Co-editor of the ACC Newsletter, NFIN
Massachusetts representative, Editor of Idaho State Counseling Association Newsletter
Awards and Honors: ACES Research grant, Award of Excellence ACA Vistas, Chi Sigma Iota Leadership Essay Contest (second place)
Publications and Presentations: Publications on HIPAA, hyper sexuality, and creativity in assessments. Over twenty presentations (local, state, and national level), research grant acquisitions, and provides supervision training for site supervisors

Qualifications and reasons for seeking office

It is an honor to be nominated for ACC Trustee. As an active member of ACA since the launch of my master's level studies in counseling I was mentored and encouraged to take an active role in the national, regional, and state level organizations. I discovered immediately that the act of service was rewarding and professionally necessary for my own personal job satisfaction. As I grew developmentally and my experiences broadened I realized that the specialty interest of creativity in counseling was my personal passion and niche. Creativity allows for spontaneous and meaningful connections to ordinarily ignored events, thoughts, and emotions. As I began to be more intentional in observing interactions with creativity I realized the powerful influence it played in self awareness and wellness. Ultimately, this realization led me to join ACC.

Having been instilled with the notion that service to my organization enhances my own ethical behavior, intentional practice, and professional identity. I sought a position in which I could contribute to ACC. For the past two years I have acted as lead editor and then co-editor of the newsletter. The positive responses to the publication have been overwhelmingly positive, the member contributions are outstanding, and my interactions with the members have been delightful.

After meeting members at the last national conference in Portland Oregon I was inspired by the collective creativity and the overall spirit of the members. You, as my fellow members, solidified my desire to further serve our organization. If nominated Trustee I will work collaboratively with the ACC leaders to achieve the missions of the organization and with members to support their endeavors into ACC leadership and promotion. I have the dedication, passion, energy, and creativity to fulfill the needs of this position and would be honored to serve.
Sondra Smith-Adcock

Professional background and experience

Sondra Smith-Adcock, Associate Professor of Counselor Education at the University of Florida, has worked as a counselor educator for 15 years, specializing in Mental Health and School counseling. She has a masters’ in school counseling from Clemson and a doctorate in counseling and counselor education from The University of North Carolina at Greensboro. Her clinical background is in child and adolescent mental health and she works part-time in private practice. Dr. Smith-Adcock has focused on creativity in counseling throughout her career. She has published numerous book chapters and journal articles on use of creativity in counseling and counselor education. Her research interests include play therapy and expressive arts in pedagogy/supervision, prevention of delinquency and bullying, and relational models in school counseling. Using applied, participatory research, she works in schools and community organizations with her graduate students, offering play and relational counseling interventions to children, teachers, and parents. She is a member of the Association for Creativity in Counseling, Association for Humanistic Counseling, and Counselor Education and Supervision. Her national service includes serving as co-chair of the ACC Interest Network Chair for the Use of Play in Counseling and as editorial board member for the Journal of Humanistic Counseling.

Qualifications and reasons for seeking office

The goals of the Association for Creativity in Counseling (ACC), promoting creativity, diversity, and relational development in the counseling profession, are closely aligned with my passion in teaching, research, and service. From early in my career, I observed the power of experiential approaches to counseling and teaching. I noticed when children drew or played, their social and emotional lives opened up before my eyes. When I became a counselor educator, I avidly pursued ways to bring the experiential into teaching and clinical supervision. When they were fully involved in the experiential process, I also noticed reflection and growth in counselors in preparation. A cornerstone of my scholarly works, therefore, is related to creativity in counseling and counselor education. I have publications in Professional School Counseling, Journal of Humanistic Counseling, Education, and Development (now Journal of Humanistic Counseling), and Journal of Creativity in Mental Health as well as a recent book chapter on expressive arts in supervision. More recently, I have become a proponent of Relational Cultural Theory and promoted the use of applying relational approaches with children and families, using play-based counseling interventions. As part of my ongoing scholarship, I enjoy working in the community, bringing the use of play and expressive arts in counseling to schools and community agencies. Creativity in counseling is my passion thus I am eager to take on an active role in ACC leadership. As an ACC member, I have worked to develop the Interest Networks and currently serve as co-chair of the Play in Counseling Interest Network. Because of my strong affiliation with the goals and mission of ACC, I hope to move into broader leadership roles. Working to help ACC meet its strategic goals for the next few years would be an honor and a privilege.

Michelle Stevens

Professional background and experience

I am a graduate of Kent State University with a PhD in Counselor Education. I was licensed as a clinical counselor with a supervisor credential in the state of Ohio for three years, until I began my teacher career at Middle Tennessee State University as an Assistant Professor in the Professional Counseling program. I am a member of American Counseling Association, Association for Creativity in Counseling, Tennessee Counseling Association, and president elect of Tennessee Association for Counselor Education and Supervision. My research includes the experiences and needs of African American graduate students at Predominantly White Universities, and most recently the counseling needs of immigrant college students and the family role changes as a result of acculturation.

Qualifications and reasons for seeking office

Qualifications such as having a fresh outlook in the counseling field as a newer professional coupled with years of teaching and counseling experience make me a viable candidate for the trustee position of the Association for Creativity in Counseling. My desire to explore, research, and teach innovative and creative teaching and counseling methods also enhances my candidacy. My teaching style and philosophy is centered upon preparing students to serve their clients with the utmost respect for their clients’ individuality and worldviews. Falling in line with this concept is the necessity to train students to interact creatively with clients in ways that cater to their individuality and respective worldviews. I strive to help my students think critically about various aspects of culture as well as implementing creative and innovative techniques and awareness in a clinical setting. Through the use of innovative teaching tools such as experiential learning, service learning projects, journaling, role playing, speakers, interviews, discussions and online teaching tools, students are afforded the opportunity to effectively and sensitively serve clients of diverse populations. As such, I am honored to be nominated to serve on the board of trustees of the Association for Creativity in Counseling and look forward to being involved in the exploration of creative methods in counseling.

Jacqueline Swank

Professional background and experience

Assistant Professor-University of Florida; Education: PhD in Education-Counselor Education and Supervision, University of Central Florida; Licenses and Certifications: Licensed Mental Health Counselor (FL), Licensed Professional Counselor (AL), Licensed Clinical Social Worker (FL), Registered Play Therapist-Supervisor; Clinical Experience: Counseling children and adolescents and their families in residential, inpatient, day treatment, and outpatient settings utilizing creative modalities including play therapy, nature, and adventure based counseling; Association Membership:
Catherine Tucker

Professional background and experience

Dr. Tucker holds a PhD in Counselor Education from the University of Florida and an M.Ed in School Counseling from UNC Greensboro. She teaches in the counseling area programs at Indiana State University and is the coordinator of the Clinical Mental Health Counseling program. She holds school counseling licenses in the states of North Carolina and Indiana, is a Licensed Professional Counselor in North Carolina, and a Licensed Mental Health Counselor in Indiana. She is an active member of ACA, ASCA, ACES, and ACC as well as multiple state and regional groups. She has over ten years of direct clinical counseling experience and has authored multiple journal articles and book chapters on counseling related issues.

Qualifications and reasons for seeking office

I have long been involved in using creative methods in counseling. I have used play therapy extensively, along with visual art media in counseling and supervision. I am also involved with Relational-Cultural theory, which is an area of interest for ACC. I joined ACC last year and attended their conference in Portland. I am very impressed with the energy and enthusiasm of the membership of ACC and am very interested in its continued growth and development. I am willing and eager to help ACC to grow in any way I can.

AMERICAN COLLEGE COUNSELING ASSOCIATION

President-Elect

Josh Gunn

Professional background and experience

My passion and professional identity are solidly rooted in college counseling. Through training and professional experiences, I have spent over 7 years developing my clinical and leadership skills in college counseling centers. I currently serve Kennesaw State University, a large public university in the suburbs of Atlanta, in the dual roles of Director of Behavioral Response Programs and Assistant Director of Counseling and Psychological Services. I have developed our behavioral response program, which focuses on early identification, supporting students, and protecting the campus community; I also lead the campus-wide, multidisciplinary behavioral intervention team. In addition, I participate in the leadership of the counseling center and am a very active clinician whose duties include coordinating graduate student training and group counseling services, providing clinical supervision, and providing direct clinical and outreach services. I received my PhD in Counseling Psychology from Purdue University and I am a licensed psychologist in Indiana. I earned a master’s degree in Clinical Psychology from Western Kentucky University, a bachelor’s degree from Asbury University, and have published articles on counseling center clientele and clinical supervision. I strongly believe in the role and purpose of professional organizations and am a member of ACCA, GCCA, and APA.

Qualifications and reasons for seeking office

College counseling centers are not campus luxuries; they are essential mechanisms that empower large numbers of students to develop not only into better students, but better humans. College counseling is one of the most diverse, difficult, and rewarding specialties in the mental health field. To be most effective, counseling centers need both the support and resources allocated to other essential offices within the college and university community. To remain relevant, we have to continually improve our ability to serve increasingly diverse student bodies, be politically and socially active, and serve as allies and agents of change in the lives of underrepresented groups. Students do not view supportive and academic services as disparate, and we should work towards removing that mindset from the university environment. If elected, I will carry these messages throughout the professions represented by ACCA and work to strengthen ACCA’s voice both within and outside the walls of higher education. I will stand on the shoulders of those who have preceded me in continuing to make ACCA the primary professional organization for college counseling pro-
fessionals and the source of information on best practices in college counseling. Regardless of institutional size, affiliation, or creed, I would work to make membership in ACCA an essential and rewarding opportunity for all college counseling personnel. As our organization matures and begins to hold an annual conference, our opportunities to interact, collaborate, and share our expertise will be greatly increased. If elected president, I will work to make the annual ACCA conference the most enriching professional experience that college counseling personnel can attend on a yearly basis. Ultimately, my mission boils down to helping counseling center professionals become more connected to one another, to their respective campus environments, and to the larger society that places so much of its hope in higher education.

Secretary

Joyce R. Thomas

Professional background and experience

MS Ed, Counseling; LPC (Missouri #CS002338); Certified Post-Secondary Vocational Teacher (Missouri #0225918); Certified Mental Health First Aid Instructor

Association Membership: ACA, ACCA, NACADA, MCCA (MO Community College Association), NaBITA

Director of Counseling Services, Ozarks Technical Community College; Counselor in Higher Education for eighteen years; Presenter and instructor of mental health and college success programs at the local, state, and national levels; Coordinator of college and community conferences

Previous Association Leadership: Past-President, Wyoming Counseling Association, 1994-1997; Member-At-Large, ACCA, 2000-2003; Membership Chair, ACCA, 2003-2004; Secretary, ACCA, 2004-2006 and 2006-2008; On-Site Coordinator, ACCA 2010 Conference

Awards Include: Outstanding Service Award, Wyoming Counseling Association, 1995; Meritorious Service Awards, ACCA, 1998, 2002, and 2010; Professional Leadership Award, ACCA, 2005

Qualifications and reasons for seeking office

It is an honor to be considered for the position of Secretary of the American College Counseling Association. Serving the ACCA in the past as both a volunteer and elected member gave me the opportunity to experience first-hand just how important the endeavors of the ACCA are to furthering the mission of college counseling. The ACCA is truly "an organization created by college counselors for college counselors." I have been so impressed that the ACCA has continued to put its members first; constantly making available cutting-edge resources and supportive services for the college counseling professional. Being a part of the ACCA has been one of the proudest highlights of my professional experiences and returning to this organization as a member of its leadership is something I have been looking forward since I completed my term as Secretary in 2008. I look forward to using my skills to take minutes and keep our records organized (two things I love to do!). More importantly, I look forward to returning to the ACCA leadership team so that I can do my part toward contributing to the continued development of resources and services for our college counseling professionals. My sincere thanks to our members for considering me for this position.

Member-at-Large

Taffey Cunnien

Professional background and experience

Recent Professional Experience: Director, Counseling and Student Support Services, SCAD-Atlanta; Adjunct Professor, Argosy University; Authorized Trainer: Sources of Strength, Suicide Prevention Program

Education: Ed.S in Education: Guidance and Counseling, May 2008, University of West Georgia, Carrollton, GA; M.A. in Mental Health Counseling and Expressive Therapies, May 2004, Lesley University, Cambridge, MA; B.A. in Fine Arts, Painting, May 2000, University of New Hampshire, Durham, NH

Certification/Licenses: Licensed Professional Counselor: LPC005223; National Certified Counselor: 244546;

Distance Credentialed Counselor: DCC852

Association Memberships: Georgia College Counseling Association (GCCA), American College Counseling Association (ACCA), American Counseling Association (ACA)

Leadership Roles: President-Elect, President, Past-President, GCCA, 2009-2011; Savannah Regional Representative, GCCA, 2008-2009; Rome Regional Representative, GCCA, 2006-2008; Conference Exhibitor Chair, ACCA, October 2007-present

Honors and Awards: Counseling Center Director of the Year Recipient, GCCA, 2011; Meritorious Service Award Recipient, ACCA, 2010; Clinical Program of the Year Recipient, GCCA, 2008; Meritorious Service Award Recipient, ACCA, 2008

Recent Presentations: Promoting Healthy Adjustment to College: An Ecological Approach to Minimizing the Risk of Mental Health Crisis, SCCCP, October 2010; “Gatekeeper Training: What is it? How is it done?”, Public Health Approach to Preventing Suicide Colleges and Universities in Georgia, April 2010

Qualifications and reasons for seeking office

To me, ACCA represents a collection of college counseling professionals from diverse backgrounds, locations, and institutional affiliations coming together for development, education, and networking. This association represents a way for our collective professional voice to be heard and provides an avenue for political advocacy within our profession. Most importantly, ACCA brings together professionals that understand the unique joys and challenges of being a counselor in a college setting. ACCA has been a professional home for me. For all of these reasons, I would like to take on a greater role within ACCA as Member-at-Large.

Currently, I am the Director of Counseling and Student Support Services at a small private university. This position allows me to continually develop my leadership, advocacy, clinical, and administrative skills. My experience, however, is diverse. I have been part of mid-size public and private universities, and I am acutely aware of the strengths and challenges of each environment.
Chris Leeth

Professional background and experience

I am a doctoral candidate in Counselor Education and Supervision at The University of Texas at San Antonio. My clinical background has primarily involved working with college students with a focus on health and wellness. I have provided individual and group counseling as well as HIV testing and counseling to UTSA students. I am a trained BASICS (Brief Alcohol Screening Inventory for College Students) practitioner. Additionally, I serve as a mentor for UTSA students who are being adjudicated through Student Judicial Affairs.

Other experiences include working as a Health Education Coordinator at UTSA. In this position I worked with college students on making healthy decisions pertaining to drinking, sex, and relationships. I have served as chair of the student section for the American College Health Association in addition to serving on the board of directors.

My research focus has been on masculinity and traditional male gender roles. Currently, I am completing my dissertation, which examines the relationship between the traditional male gender role and body image concerns in college men.

Qualifications and reasons for seeking office

I am seeking to be a Member-at-Large for ACCA so that I may continue to grow my professional identity, to assist in the development of ACCA, and to add to the growing field of college counseling. I feel that ACCA is a wonderful organization with much to offer and much to teach. I am looking forward to working with ACCA and learning as much as I can from other members and officers, while sharing my own thoughts and ideas.

I feel that, while still a new counselor, I am able to serve this position in a productive manner. In addition to having experience providing counseling to college students, I also have experience being an administrator for a university. I am aware of the issues that college counseling centers, as well as campuses as a whole, often face. I believe that my experiences as a college counselor and an administrator will make me a capable member of this organization.

ASSOCIATION FOR COUNSELORS AND EDUCATORS IN GOVERNMENT

President-Elect

Seth Hayden

Professional background and experience

I am currently a Research Associate/Lecturer and Post-doctoral Fellow in Counselor Education in the Sheila Johnson Center for Human Services at the University of Virginia. I received my masters in counseling from the University of Memphis and my doctorate in counselor education from the University of Virginia. During my time in the Sheila Johnson Center, I have provided counseling to active duty military and veterans both at UVA and in the community. I have also worked closely with the Defense and Veterans Brain Injury Center – Charlottesville providing personal and career counseling to active duty military and veterans being treated for traumatic brain injury.

I have researched the collaboration between civilian and military family service providers to examine the benefits, barriers, and ways in which to expand collaboration amongst service providers working with military families during deployment. I have presented at several professional conferences on military issues and the specific means of providing a high quality of care to our military population. I have also advocated for student veterans at UVA by creating Military Veterans @ UVa, a student organization for veterans to connect with each other in an educational environment consisting primarily of traditional-age college students.

Qualifications and reasons for seeking office

I am honored to be nominated for the position of President Elect for the Association for Counselors and Educators in Government (ACEG). I am currently a Director for ACEG and have been working with the executive board to enhance our members’ provision of services to governmental populations such as our military. I have extensive experience in leading professional organizations, which will be an asset to ACEG.

I have served in leadership roles in professional organizations such as Chi Sigma Iota and ACEG. I assisted in the connecting of Chi Sigma Iota chapters to facilitate a networking and procedural sharing event at the 2007 TCA conference. I also facilitated improving the organizational focus by creating tangible operational goals and markers of achievement. I have continually worked to ensure each organization’s executive boards are responsive to their membership emphasizing collaboration and communication.

I believe I am qualified to serve as President Elect for ACEG due to my professional and scholarly work focused on our military population and my previous organizational leadership experience. I see tremendous potential to grow the membership of ACEG and support members in their provision of services. I will utilize modern technology and social networking to create connections within the organization enhancing information and resource sharing between members. I am also committed to establishing a refereed professional journal allowing for the dissemination of ideas and research relevant to our work. My hope is ACEG will be known as “The” organization for governmental educators and counselors who assist military members and their families. I will work closely with the executive council to achieve these goals.
and believe I am well-suited to serve ACEG in a leadership capacity in the upcoming years.

Secretary

Marilyn Haight

Professional background and experience

I am currently employed as a counselor educator with a large online mental health counseling program that serves students across America and also a number of international students. This provides me with a unique opportunity to be at least peripherally involved with all 50 state licensure boards and to be an advocate for students working with their respective state board of counseling as it applies to achieving their educational goals in professional counseling.

I currently live in Virginia Beach, Virginia which is central to several large military bases on the East coast. More importantly, I am the mom of a Marine Corps officer and mother-in-law of a Naval Flight Officer; both of whom were deployed as enlisted servicemen during Operation Iraqi Freedom and Operation Enduring Freedom (Afghanistan) prior to moving forward in their respective military officer careers. While the other work that I do as a counselor educator, community based mental health provider, and as a military family life consultant is important; the basis for WHY this work resonates with me stems from the very personal long-term involvement that our family has with the military; both from an active duty reservist perspective and from the enlisted/office perspective.

Qualifications and reasons for seeking office

My number one goal is to educate military personnel and their families on the good, the bad, and the ugly about higher learning institutions. Working with the military for many years has opened my eyes to the institutions that prey on the military for government funding for degrees that are worthless or the member could have achieved at a much lesser cost.

Since the introduction of the Post 9/11 GI Bill, this piranha like mentality has exploded to a realm I have never seen in the past. Unexpected Airmen have had their VA benefits taken by institutes of higher learning, in exchange of an empty promise of a degree valued by civilian companies, franchises, etc.

We need to educate not only the military, but anyone who is investing their money on the difference of regional, national, distance learning, and many other types of accreditation and what that means for the future of that degree. Military personnel can only use tuition assistance for one degree at each level, associate, bachelor, and master degrees. This choice of colleges or universities needs to be a wise choice and not a lesson learned after the fact.

My personal objective is to educate as many people as possible on this matter, so they can further their education if they wish. I want them to be proud of the education goal they have achieved; this is something they can carry with them for the rest of their lives.

Board of Directors

Terri Bedford

Professional background and experience

Doctorate of Higher Education from Nova Southeastern University, Fort Lauderdale, FL 2007. Completed Squadron Officer School by DL 2009. Honorable Discharged USAF 1992. Sixteen years aggregated experience in the military voluntary off duty education system to include: Guidance Counselor; Education Services Specialist; Test Control Officer; Test Proctor; and Education Advisor.

Specialties include: Post 9/11 GI Bill; Air Force Commissioning Programs; Community College of the Air Force; Professional Military Education; Myers-Briggs Type Indicator; and Discover Program.

Places of employment: Griffiss AFB, NY; Vandenberg AFB, CA; RAF Mildenhall, UK; Sembach AB and Kapaun AB, Germany; Hill AFB, UT; Andrews AFB, MD; 6th Army Battalion, Las Vegas, NV; and Nellis AFB, NV.

Judith Mathewson

No information received

Ben Noah

Professional background and experience

Dr. Ben Noah is Core Faculty at Capella University. He is a National Certified Counselor, National Certified Career Counselor, Approved Clinical
He hopes to start an e-journal for ACEG to provide a platform for current research in military counseling issues. Ben would also like to see counselors who work with military members outside of a government setting, such as TRICARE providers, become ACEG members. Reaching outside of government agencies and into the “civilian” and student world will help ACEG grow its numbers while maintaining its focus on military issues.

Monica Ross Reider

Professional background and experience

I am a Licensed Professional Counselor, National Certified Counselor, and Certified Rehabilitation Counselor with 18 years of experience in the public and private sectors. I am currently a Doctoral Candidate at Argosy University in the school of Counseling Psychology and hold a Master of Science in Counseling from Indiana University and a Bachelor of Arts in Psychology from Purdue University.

The core of my experience has been in rehabilitation services with an emphasis in co-occurring disabilities. My professional experiences include: post-traumatic stress disorder; mental health counseling; substance abuse; and vocational rehabilitation. Treatment approaches include: Cognitive Behavioral and Cognitive Processing Therapy; Acceptance & Commitment Therapy (ACT); Solution Focused Therapy; and Motivational Therapy. In my work as a Vocational Rehabilitation Counselor, I have experience in case management and reviewing disability claims through my work with the State and Federal Vocational Rehabilitation Programs.

Professional Membership Affiliations:
American Counseling Association (ACA), American Mental Health Association (AMHCA), Ohio Counseling Association (OCA), Ohio Mental Health Counselor Association (OMHCA), Association for Counselors and Educators in Government (ACEG).

Qualifications and reasons for seeking office

As a Readjustment Counseling Therapist working within the VA, I am very aware of the challenges of breaking through the glass ceiling to achieve professional equality with Social Workers with in the VA system. There are many challenges that counselor’s face working within the VA. Those counselors who are currently employed within the VA are either working beneath their professional licensure status as Rehab Techs or they are working within the scope of their professional licensure without being recognized as a licensed independent practitioner. When PUBLIC LAW 109–461 was signed into law it was to equate counselors and social workers. Unfortunately, this has not happened in practice and has only been reflected in law.

There are many challenges to face in reaching the goal of equality among professional counselors and social workers working within the VA (i.e., refusal by VAs to post the newly created LPMHC positions while continuing to post for SW positions; refusal to add a grandfather clause for those LPCC’s currently working within the system whose MS programs received CACREP after their graduation dates; and the refusal to board/privilege current state licensed LPCC’s currently working within the VA system as Licensed Independent Practitioners). My goal would be to advocate for the hiring and professional boarding of LPCC’s to become licensed independent practitioners within the VA. Although this will be a difficult system change to achieve, I believe that it can be attainable.

ASSOCIATION FOR COUNSELOR EDUCATION AND SUPERVISION

President-Elect

Robin Wilbourn Lee

Professional background and experience

Associate Professor, Professional Counseling Program, Middle Tennessee State University
Ph.D. Counselor Education and Supervision (Mississippi State University), M.Ed. Community Counseling, BS Psychology (Delta State University)
Licensed Professional Counselor – Mental Health Service Provider (TN), Approved Clinical Supervisor; Associate...
independence is a momentous goal, one effectively. Although moving toward attempting to serve our members more are establishing more independence and ACES is entering early adulthood. We president, and past-president. years of service as ACES president-elect, part of shaping this process with three for ACES. I would be honored to be a important yet challenging new venture hiring an executive director. This is an leadership voted to begin the process of we enter new territory. At last summer’s feel prepared to serve ACES members as many levels. Because of this experience, I understand the governing process on capacities, which has allowed me to find a home so many years possibility of serving the organization nominated for ACES president-elect. The reasons for seeking office - 2008 President's Outstanding Service Counselor Educator of the Year; SACES - 2009-2010 Dr. Charles Thompson State University, College of Education White Leadership Award, 2009-2010 (2009-2010); TCA Journal, Co-editor. TLPCA - 2011 Dr. Susan Hammonds-White Leadership Award, 2009-2010 President’s Service Award, 2007-2009 Counselor Educator of the Year; Delta State University, College of Education - 2009 Outstanding Alumni; TACES - 2009-2010 Dr. Charles Thompson Counselor Educator of the Year; SACES - 2008 President’s Outstanding Service Award. Qualifications and reasons for seeking office It is a tremendous honor to be nominated for ACES president-elect. The possibility of serving the organization that I found a home so many years ago is exciting and rewarding. I have been fortunate to serve ACES and its regional and state organizations in several capacities, which has allowed me to understand the governing process on many levels. Because of this experience, I feel prepared to serve ACES members as we enter new territory. At last summer’s Executive Council meeting, ACES leadership voted to begin the process of hiring an executive director. This is an important yet challenging new venture for ACES. I would be honored to be a part of shaping this process with three years of service as ACES president-elect, president, and past-president. From a developmental prospective, ACES is entering early adulthood. We are establishing more independence and attempting to serve our members more effectively. Although moving toward independence is a momentous goal, one important position to maintain is our support of the counseling profession and thus the professional organizations that represent all counseling professionals. Our continued connection to our parent organization ACA and our accrediting body CACREP is critical, due to our long history of demonstrating leadership in the formation of both vital groups. I hope to be able to serve ACES as we continue to maintain our position as visionaries. I always strive to be a leader who works hard for every organization I serve. I feel my strongest assets are organizational skills and initiative. If elected, my plan is to give 110% to every task presented to ACES leadership. Being trusted by ACES members to serve in such an important leadership role would be one of the greatest honors of my professional career and I appreciate being considered for this opportunity.

Rachelle Pérusse Professional background and experience Dr. Rachelle Pérusse is an Associate Professor in the Counseling Program at the University of Connecticut, and received her Ph.D. in Counselor Education from Virginia Tech. She is a National Certified Counselor and a National Certified School Counselor. She has chaired committees for the Connecticut Counseling Association, the Connecticut School Counselor Association, and NARACES. She has served as Secretary of ACES (2005-2006), President (2007-2008), and Secretary (2000-2002) of NARACES, as an editorial board member for CES (2007-1010), an appointed member of ACA’s School Counseling Taskforce (2010-2011), and is currently President of the Connecticut School Counselor Association (CSCA). She represents CSCA on the State of Connecticut’s P-20 Council for Career and College Readiness, and serves on the Connecticut Department of Higher Education’s College Readiness Project. She received the NOSCA National Advocacy Award for leadership in creating a college going culture at the master’s level school counselor preparation level. Dr. Pérusse has several articles published about national trends in counselor education, and has co-edited two books.

Qualifications and reasons for seeking office I am thrilled and honored to have been nominated to run for President of ACES. I have been a member of ACES and NARACES since beginning my professional career as a counselor educator in 1997, and want to thank all of you for the wonderful support and fantastic growth experiences at both the regional and national conferences! Having served on the ACES Board for three years as both Secretary of ACES and President of NARACES, I see the role of the ACES President, not as a one-person leadership role, but rather as a team player. Further, I have recently been exposed to the concept of Policy Governance, which holds as an essential tenant the idea that a president is only a president for a short while in the history of the association. Therefore, it is essential to establish long term “End Goals” for the association, and have each subsequent president and board work towards those end goals. With the recent unanimous vote to hire a part-time executive director, I believe we have made a step forward in being able to develop long term end goals that carry forward with each subsequent president and board.

As I reviewed the 2010-2011 goals for ACES published in Counseling Today, Deryl Bailey mentioned the importance of supporting our students, and creating authentic relationships with other counseling and non-counseling associations. I would see my role as carrying forward those same end goals already established, as well as soliciting from the board additional end goals that would encompass the views of all ACES members. This would enable us to create a vision of where we came from, where we are, and where we are going, for many boards to come.

Secretary Victoria Palmisano Professional background and experience Victoria Palmisano, PhD, LMHC, NCC, ACS is a Clinical Professor at the
University of Buffalo where she received a Counselor Education and Supervision PhD in 2007. A Certified School Counselor and a Licensed Mental Health Counselor, she has extensive experience in both clinical and school settings. Dr. Palmisano has a private practice providing counseling to children, adolescents and their families as well as consultation to local school districts and community agencies. Forensic counseling (specifically high conflict divorce and custody evaluations), trauma and grief issues are her clinical specialty. Her practice enables her to effectively integrate counseling theory and clinical practice. Drawing from her own work with clients, she is able to weave practical application of theory and skill demonstrating to her students and supervisees the essential diagnostic, therapeutic, and consultative skills professionals need to work with a variety of emotional and psychological conditions appearing in diverse populations. Having received Emerging Leader awards from both ACA and ASGW, Victoria is a current member of the ACES Executive Board as President of NARACES, Legislative Liaison and Board Member of ACA New York, and past president of WNY Mental Health Counseling Association which received Outstanding Chapter award under her leadership.

**Qualifications and reasons for seeking office**

After 15 years as a school counselor, community agency counselor, site supervisor, and private practitioner, I became a Counselor Educator. As a clinical professor, I maintain a fulltime practice and actively supervise Mental Health counseling students seeking licensure. For me, joining ACES is more than a duty or service – it is a necessity. I strongly feel we need to demonstrate with greater publicity the power and importance of what we as Counselor Educators and Supervisors and graduate students do everyday to produce outstanding school counselors; clinical mental health counselors; marital, couple, and family counselors; student affairs counselors; career counselors; addictions counselors; and Counselor Educators and supervisors. In particular, I am working to bring education, recognition, and support to the school and community supervisors of our counseling students. I like to think I bring the “S” to ACES. If I am fortunate to be elected secretary, my goal will be to serve the executive board as well as actively address the objectives of the established ACES strategic plan such as affirming and delivering education and supervision related to counseling in a culturally diverse society and promoting a unified professional identity for counselors, supervisors and counselor educators. My goal is to work alongside the President-Elect and the ACES Executive Board to guide the safeguarding of that vision. I will continue to nurture the collaborative relationships ACES has developed with other divisions and affiliates and strengthen our mutual effort and commitment to the counseling profession. Thank you!

**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. She has presented and published on a wide variety of topics including: student clinical supervision, spiritual issues in counseling, eating disorders, domestic violence, clinical mental health training, and challenges and opportunities of children raised by grandparents. Shannon served two terms on the Board of Directors for the Association for Spiritual Ethical and Religious Values in Counseling (ASERVIC) and is the current President-Elect. She received an ASERVIC Service Recognition Award in 2010. Additionally, she is the registration chair for the upcoming ACES 2011 conference in Nashville and was the site coordinator for the 2006 SACES conference in Orlando. She also received the 2009 President’s Service Award for SACES.

**Qualifications and reasons for seeking office**

It is an honor for me to be a candidate for Secretary of the Association for Counselor Education and Supervision (ACES). I believe wholeheartedly in the mission of the organization with its overarching goals focusing on research, diversity appreciation, and ethical practices in counseling and supervision throughout our profession. I have been actively involved with ACES and Southern ACES (SACES) since 2003 and have chaired the long range planning committee for SACES since 2006. During my tenure with ACES I have witnessed great accomplishments and growth within the organization and have seen many positive and proactive changes aligned with the spirit of its leadership. I believe it is important to maintain focus on the ongoing priority of promoting best practice initiatives throughout counselor training, clinical treatment, and supervision; and most importantly to provide ongoing professional development in myriad capacities (web-based services, publications, and national/regional conferences) to members and all interested counseling professionals. A critical goal of mine would be to maintain and support the high quality of the membership services and to assist the Executive Committee in everyway possible. I believe that my organizational skills and longstanding dedication to the counseling profession will enable me to provide historical knowledge that can benefit ACES as we move into the future. I endeavor to provide my best services to the membership; this will include utilizing my skills in accurate recordkeeping, multi-tasking, and advocacy for the organization. This is said with the support of my institution and the resources that they can provide. If elected, it would be incredibly meaningful for me to be able to be a part of supporting and strengthening ACES in a service capacity. I promise to take the responsibility to heart, mind, and spirit.

**ASSOCIATION FOR HUMANISTIC COUNSELING**

**President-Elect**

Matthew Lemberger

**Professional background and experience**

Matthew Lemberger is currently an Assistant Professor in the Counselor Edu-
My second priority as President of AHC includes the development of an annual retreat. The purpose of the retreat would focus on the revitalization of humanistic values in the counseling profession, including learning and experiential opportunities. My third priority will be to expand the community outreach efforts of members in the name of humanism. For example, I will encourage newly created local humanistic counseling groups to participate in local service and social justice initiatives.

Finally, as President I will support and strengthen those AHC initiatives that are currently flourishing, including the Empty Plate initiative, the Make a Difference Grant, scholarship in the division journal, and recent technological advances aimed at connecting members.

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

President-Elect

Hugh C. Crethar

Professional background and experience

I am an Associate Professor and Counseling Program Coordinator of CACREP Accredited counseling programs in School Counseling and Community Counseling at Oklahoma State University and have 20 years of experience in counseling and counselor education. I am honored to be a member in a faculty where each of us has been through advanced “Safe Zone” training and actively embraces diversity in its numerous forms. I have served for several years in the leadership of Counselors for Social Justice (Communication Officer, Newsletter Editor, President, and Governing Council Representative) as well as in taskforces within ALGBTIC (Taskforce on LGB and Intersex Counseling Competencies & Taskforce on Conversion Therapy). I have also provided leadership in moving our field to greater inclusiveness of people who are Intersex, including co-drafting the Intersex Resolution passed by ACA Governing Council in 2004 (http://counselorsforsocialjustice.com/PDF/IntersexResolution.pdf) and co-authorship of the aforementioned competencies. At local levels, I have also served as a Safe Zone trainer, diversity consultant and co-developer of the OSU Employee Queers & Allies League (EQuAL), an association comprised of faculty, staff, and administration. Among other things, I Co-Chaired the ACES Social Justice Summit and the ACA Public Policy and Legislation Committee.

Qualifications and reasons for seeking office

It is my honor to have been nominated to run for the office of President-Elect of the Association for Lesbian, Gay, Bisexual, & Transgender Issues in Counseling (ALGBTIC). Throughout my two decades of service in counseling, it has been an ongoing focus of mine to promote greater understanding and awareness of Lesbian, Gay, Bisexual, Intersex and Transgender (LGBT) issues among members of the counseling profession. I have done this work through a focus on client and client system empowerment and advocacy, working within the structures of ALGBTIC, CSJ, ACES, and ACA to bring a greater and increasingly empowering focus on diverse populations. I advocate in word and deed to identify systemic and systematic barriers to the human growth and development of diverse clientele. I believe that counseling has a history of being heterocentric, androcentric, abled-centric and ethnocentric and thus requires continued development on a pathway that is inclusive of a diversity of client contexts and needs. If elected, my goals as a leader in ALGBTIC would be (1) to continue a focus on development and implementation of counselor competency in serving diverse populations across all sexual/affectional orientations, (2) to continue work on collaborative efforts with other divisions and regions within ACA, (3) to continue work on the development of a greater understanding of empowering language and actions in counseling, (4) to heighten focus on client advocacy within the public policy and legislation advocacy of ACA and its divisions, (5) to maintain a focus on advocacy competence as relevant to LGBTIC populations, and (6) to heighten the focus on counseling on primary, secondary and tertiary prevention.
Ron McLean

Professional background and experience
Education: PhD, Counselor Education & Family Therapy – Saint Louis University; MS, Rehabilitation Counseling – University of North Carolina at Chapel Hill; BA, Sociology – Fayetteville State University
Licenses/Certifications: Licensed Mental Health Counselor, Licensed Professional Counselor, Nationally Certified Psychologist
Association Memberships: Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling; American Counseling Association; American College Counseling Association; Association Multicultural Counseling and Development; American Psychological Association
Recent Leadership Roles: Board Trustee - Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling; Director – McLean Counseling & Training Services – Metuchen, NJ; Director – University Maryland Eastern Shore Counseling Center - Princess Anne, MD
Honors/Awards: UMES White Ribbon Campaign
Recent Publication: Working with African American LGBTQ People (In Press)

Qualifications and reasons for seeking office
I have been an active member of ALGBTIC since its inception as a division. I have worked as: a liaison representative to AMCD, director of booth management at ACA national conferences, and board trustee. Over the years, I have been honored to make many friends within ALGBTIC and ACA who have helped me to learn and gain valuable insights about the needs of sexual minorities. These experiences have aided me in my development as a professional counselor and as a leader.

Now, it is time to give something back and to make a stronger contribution. I am running for president because I want to work with the membership to build on our legacy and move the organization forward. If I am elected president I will concentrate on the following areas:

1. Expand our membership and diversity – It is important to make sure that our organization is a warm and welcoming center to all people of various ethnic backgrounds and sexual orientations. The ability to network and develop allies will ensure that ALGBTIC continue to be vibrant.

2. Promote ALGBTIC to ACA divisions – our mission is to educate and assist professional counselors and/or organizations on “best practices” as it relates to sexual minorities. We have the expertise and the resources to expand our work in ACA and beyond.

3. Inspire leadership and mentorship – I would like to spearhead an initiative to attract, train, and provide leadership opportunities within the organization. In order to carry out our educational mission effectively, we need confident and competent members to join us and help us.

Finally, I believe that ALGBTIC is a special organization with a special mission, and “Together we can make a difference.”
Thanks for your support.

Governing Council Representative

Barry Chung

Professional background and experience
Ph.D. in counseling psychology, University of Illinois at Urbana-Champaign.
Professor and Chair, Department of Counseling and Applied Educational Psychology, Northeastern University.
Member of ACA, ALGBTIC, AMCD, and NCDA.
Authored 20 journal articles, 1 edited book, 7 book chapters, and 38 conference presentations about LGBT issues.

Qualifications and reasons for seeking office
I have devoted my entire career to LGBT scholarship and advocacy. I also have extensive leadership experience within ACA, National Career Development Association, and American Psychological Association. I believe I will be able to contribute to the mission and initiatives of ALGBTIC, and to the future directions of ACA.

My goals for serving as ALGBTIC governing council representative are:
1. To support ALGBTIC presidents and executive board in advancing LGBT issues in counseling.
2. To ensure attention to multicultural and social justice issues related to LGBT persons.
3. To facilitate ALGBTIC’s collaborative working relationships with ACA and its divisions.
4. To assist ACA in addressing current and critical issues facing the profession of counseling (e.g., 20/20 project, training and accreditation of counselor education programs, professional standards of practice, mentoring students and early career professionals, and international outreach and collaboration).

Joy Whitman

Professional background and experience
I have a master’s degree in Counseling and Human Relations and a doctorate in Counseling Psychology. I am Associate Professor of Education in the Department of Counseling and Special Education at DePaul University, and I am Licensed Clinical Professional Counselor in Illinois. Professionally I have held the following roles in ALGBTIC: Governing Council Representative (2009-present); Past-President (2005-2006); and Board Member 1999-2006. In ACA I have been a member of the ACA Ethics Committee (2003-2006) and the 20/20: Vision for the Counseling Profes-
Joel Marc Filmore

Professional background and experience

I am an LPC in the state of Illinois and a full-time graduate student at Northern Illinois University working on my PhD in Counselor Education and Supervision. I am one of the Founders of the Illinois Association for LGBT Issues in Counseling and have had a number of publications this past year specific to LGBT populations, including a publication in Counseling Today with Dr. Mike Chaney and Dr. Kris Goodrich. This year I was awarded the Merlin Schultz Professional Development Grant by the Illinois Counseling Association Foundation and the Orville Jones International Travel Scholarship by NIU and also received the Graduate Student of the Year Up and Coming Professional Award from ALGBTIC at the ACA 2011 Annual Conference in New Orleans.

Qualifications and reasons for seeking office

I am seeking the office of Board Trustee for ALGBTIC not only because I am a gay man but also because I am a man of color. I believe that it is important that our professional organizations be representative of the people and as such I believe that I can add a new, and different, perspective to an already stellar group of individuals. I am actively involved in, and with, the LGBT community and serve as a mentor on the campus of Northern Illinois University for gay and lesbian students in my professional role as an Academic Advisor and in my personal role as a graduate student. Because of my passion for advocacy I was one of the main driving forces behind the development of IL-ALGBTIC which is the state chapter of the national ALGBTIC in Illinois. The organization is still in its infancy of less than six months but has already become the third largest organization under the Illinois Counseling Association.

I am new to the profession of counseling and believe that having the honor of serving as a Board Trustee will not only provide me with a platform for addressing issues of multiculturalism within the LGBT community but also provide me with continued opportunities for growth in my professional identity as a counselor. Recent issues within Chicago’s Boystown have drawn national attention and shown a spotlight on inequities that many LGBT people of color face. I believe that my role as a Board Trustee can, and will, be one of building bridges so that we can come together as a community to address issues of social justice for all LGBT individuals. If we are to move forward in our fight for equality in our nation we must first fight for equality within our community.

Kristopher Goodrich

Professional background and experience

Education: PhD, Counselor Education and Supervision, Syracuse University; MS, Student Affairs Counseling, Syracuse University; BA, Psychology, Siena College Employment: Assistant Professor of Counselor Education at the University of New Mexico (August 2010 to Present); Visiting Assistant Professor of Counseling, Southern Arkansas University (August 2009 to May 2010); Pro bono counselor at the LGBTQ Resource Center at the University of New Mexico (1 day a week; January 2011 to Present)

Association Membership: ALGBTIC, ACA, ASGW, ACES, Chi Sigma Iota Licenses and Certifications: LMHC (New Mexico), NCC, ACS Experience: Co-Chair of the LGBTQQQIA Affirmative Counseling and Social Justice Task Force (ALGBTIC; October 2010 to Present), Co-Chair of the Safe Schools Task Force (ALGBTIC; July 2011 to Present), Coordinator, Assistant/Associate Professor Mentorship Program (New Faculty Interest Network, October 2009 to Present), Committee Member (Chi Sigma Iota Chapter Development Committee, July 2009 to Present)

Written numerous articles about LGBTQQQIA experiences in the Journal for LGBT Issues in Counseling and other counseling related journals. Co-editing special issue entitled Queering Education: Serving LGBTTIQQ Students in P-12 Schools in the Journal of Homosexuality

Qualifications and reasons for seeking office

It is with a great deal of excitement that I am running for the position of Board Trustee in the Association for Lesbian, Gay, Bisexual, and Transgender Issues in Counseling. I have been a member of the association since 2003, and have recently become more actively involved in the association through co-chairing the LGBTQQQIA Affirmative Counseling and Social Justice Committee, as well as co-chairing the Safe Schools Task Force. LGBTQQQIA issues in counseling is my research agenda, and my personal and professional advocacy mission, as demonstrated by the continued and growing involvement with the community at both the local and national level. ALGBTIC and the people involved in it, have meant a great deal to me since I entered the field of counseling, and I
would love the opportunity to give back to its members on a much deeper level. It is for these reasons why I seek the position of Board Trustee.

My vision for the association is continued advocacy and work on inclusivity and respect for all members of our communities. Others have spoken about the perceived clique-iness of the association, whether based on gender identity, sexual orientation, race, or professional status (e.g., academic or practitioner). It’s my vision that ALGBTIC works to ensure that all members’ voices are heard, and all members seen, as the original goals of the division was to increase the diversity and inclusiveness of the counseling profession. Additionally, I think the division is in a great position now to serve as an advocate for our LGBTQQIA brothers and sisters across the globe, exploring and working to achieve rights for LGBTQQIA persons internationally. As our field globalizes, I too believe our division can be a leader in serving as a conscious and voice to those persons left silent in their home cultures.

Tonya Hammer
Professional background and experience
I am an Assistant Professor in the Counseling Department with the University of Houston-Clear Lake. I am an active member of TALGBTIC and have currently joined the Safe Schools Task Force for ALGBTIC. I am the Division Director of the Texas Counselors for Social Justice, a division of the Texas Counseling Association, as well as a past President of the division. I am an active member of Counselors for Social Justice and served as a tri-chair of the Day of Giving Back Project in New Orleans at the 2011 ACA conference. I am a past secretary for TACES, and am completing the last year of my term as Treasurer of ACC. I am involved in the Human Dignity and Humiliation Studies Network, an international organization promoting global systemic to open space for dignity and mutual respect to take root and grow, thus ending humiliating practices and breaking cycles of humiliation throughout the world. I am a Board Member and Education Chair of the recently formed GLSEN-Houston Chapter, a non-profit organization dedicated to helping to create a safe space for all students. I believe I bring with me not only a passion and willingness to serve, but proven leadership experience.

Qualifications and reasons for seeking office
I am honored to be nominated for the position of Board Trustee for the Association or Lesbian, Gay, Bi-sexual, and Transgender Issues in Counseling (ALGBTIC). I have prior experience in roles of leadership that reflect the duties and qualifications necessary for the position of Board Trustee of ALGBTIC. I am currently a Board Member and Education Chair for GLSEN-Houston, a chapter of GLSEN (Gay, Lesbian, Straight, Education Network), a non-profit organization dedicated to creating a safe space in public schools for all students regardless of sexual orientation, gender identity, or expression. I am also a Safe Zone Ally at my university and am a member of the recently formed Safe Schools Task Force with ALGBTIC. I am passionate about working with others in the counseling profession to confront oppression and marginalization in all forms and I see the position of Board Trustee as an opportunity to continue this endeavor. Through my work in the Texas Counselors for Social Justice, a division of the Texas Counseling Association, I have been able to advocate for my clients, my students, and the profession. I would like to be able to continue to do that through involvement and leadership in ALGBTIC.

Brandon Harper
Professional background and experience
I have a master’s degree in Professional Counseling from Carlow University (2010) and am a Board-Eligible National Certified Counselor. I currently serve as Secretary for ALGBTIC, as well as being a part of the committee that is revising the LGBTQQQA competencies. I also co-authored the Competencies for Counseling Transgender Clients. My experience with LGBTQQQA issues is personal as well as professional. I identify as a transgender gay man and I routinely advocate for LGBT issues by providing training presentations to universities, counseling agencies, corporations, and conferences at a local, state, and national level. I find being able to share my story with others empowering when it is clear that I am opening peoples’ minds in a positive way. I completed my practicum experience at the Pittsburgh AIDS Task Force and my Internship at Holy Family Social Services in McKees Rocks, PA.

Qualifications and reasons for seeking office
I am seeking the office of Trustee for ALGBTIC to continue my personal and professional mission of promoting advocacy working for and with the LGBTQQQA population. I am very active with ALGBTIC, serving as board secretary, co-authoring the Transgender Competencies, and assisting with the revision of the LGBTQQQA competencies. I was also awarded the 2010 ALGBTIC Graduate Student Award at the ACA Conference in Pittsburgh. I routinely provide LGBT trainings to counseling agencies, university undergrad, graduate, and doctorate classes, corporations, and conferences. I am also active in my local PFLAG chapter assisting individuals and their families with support and/or education. I would like to take the opportunity if I am board trustee to encourage development of Intersex competencies. The LGBTQQQA revision committee has started providing the groundwork for one. I would like to see this continue and to be broadened. I envision this development to be groundbreaking. It would most certainly bring Intersex issues to the forefront and encourage more education and research to become available surrounding the needs this community might bring to a counseling session. I would commit myself to this endeavor as well as any other endeavor or idea that ALGBTIC may propose.

Jeff Moe
Professional background and experience
I am an Assistant Professor of Counseling at the University of Houston-Victoria and have a Ph.D. in Counselor Education & Supervision and an M.A. in Community Counseling from the University of Toledo. I am a Licensed
Professional Counselor in Texas and Ohio, and have experience counseling with a variety of client issues and settings. I recently served as a pro-bono counselor for the Bering Support Network, an agency in Houston dedicated to providing low or no-cost counseling for sexually and gender diverse people as well as to those affected by HIV/AIDS. I am a member of ACA, ACES, Chi Sigma Iota, and am proud that ALGBTIC has been my home division since 2006. I co-chaired the 2010 ALGBTIC Inter-Spirituality Task Force and facilitated the planning of the ALGBTIC Inter-Spirituality Service at the ACA 2010 National Convention. I have a scholarly focus on sexual and gender diversity, including wellness for LGBTQIQA persons, affirmative school counseling for sexually and gender diverse youth, and comprehensive theorizing of sexual orientation and gender. I also present and write on counseling with marginalized populations and on systemic consultation and advocacy, topics I see as naturally resonate with issues facing sexually and gender diverse people today.

**Qualifications and reasons for seeking office**

I see becoming an ALGBTIC Board Trustee as an opportunity to help advance the dialogue on all issues related to sexuality and gender diversity at a watershed moment in the history of the profession and the world. In my personal life I espouse a centering-the-margins approach to engaging and collaborating with marginalized groups, and would infuse this perspective into my work as an ALGBTIC Trustee by advocating for direct representation of issues salient to marginalized groups within the broader communities of LGBTQIQA people. This includes de-centering my own and others’ assumptions in order to highlight the goals and needs of groups such as sexually and gender diverse People of Color, immigrants, and those living in rural communities. I believe that direct outreach to the communities that ALGBTIC serves and represents helps to provide deeper awareness of how ALGBTIC members can act collectively to serve both our division’s unique purpose within ACA and to enrich our relationships with and accountability to members, allies, and those we seek to serve. I see any effort to encourage dialogue and connection directly between communities as worthwhile; such efforts could occur via our website, national conference, and state branches. As a Trustee I would support member-to-member and member-to-ally networking; I believe that tapping into and highlighting the lived experiences of ALGBTIC members as successful change agents will help encourage advocacy for the needs of LGBTQIQA people. One issue common across communities of sexually and gender diverse people is that of violence and suicide prevention, and I would support ALGBTIC in providing up-to-date and practitioner friendly resources to counselors and allies that address crisis response and resiliency.

**ASSOCIATION FOR MULTICULTURAL COUNSELING AND DEVELOPMENT**

**President-Elect**

Michael Brooks

**Professional background and experience**

I completed my master’s and Ph.D. work at the University of Central Florida in 2000 and 2003 respectively. I once held a certificate in guidance and counseling (K-12), and presently I am licensed to counsel and supervise in the states of Alabama and Florida. I have worked as a counselor in many settings but for the past seven years, I have been a counselor educator at the University of Alabama, Birmingham. I have been an active member of ACA and AMCD since 1998, holding the positions of AMCD Publicity Committee Chair, AMCD Treasurer, and currently AMCD Southern Regional Representative. With regards to ACA, I am the Awards Committee co-Chair for the 2010-2011 year. In terms of scholarship, I have presented numerously at ACA conferences, regional conventions, state and local meetings, as well as in South Africa, Jamaica, and Haiti. My publications mirror my presentations on African American males in Counselor Education, urban youth empowerment, and special needs families. In the community, I sit on the executive board of a nonprofit organization designed to mentor African American Boys; and at my university, under the auspices of the Vice President for Equity/Diversity, I direct the Black male recruitment and retention initiative.

**Qualifications and reasons for seeking office**

Because I am a person of color, as a young graduate student, I thought joining AMCD would help give me a sense of comfort and mentorship. I went to several meetings silently watched handle the business of the division. One of the longtime members, Harriett Fields, told me “young man we have got to get you involved!” and I have not stopped yet.

Throughout my professional development, as I have grown in terms knowledge and experience, I have also increased my involvement in AMCD. It has been with each step, I have become more passionate in about my involvement in AMCD and more intentional to serve those who fall within the AMCD mission. Therefore, my goals as President-Elect of AMCD would be:

1. To continue increasing our membership. But to also enhance the membership drive efforts by reaching out young professionals and budding professionals. Moreover, to encourage and develop a membership that is multicultural; inclusive of varying abilities, religion, and sexual orientation.

2. To continue developing new leadership for the division. New leadership is a strong indicator of growth and new faces at the leadership table means new/innovative ideas. These new ideas keep the division progressive!

3. To extend the visibility of AMCD throughout the world by supporting global initiatives. AMCD has had international and intercontinental activities; these efforts have helped bring necessary attention to underserved populations and have enhanced multicultural counseling pedagogy.

As much as any other group in ACA, AMCD has been at the center of that great and honorable cause. I am a candidate for president-elect, seeking your vote and hoping to earn it. But whether or not I win your support, I need your goodwill and counsel. And should I succeed, I’ll need it all the more. I look forward to serving you!
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. Her practice focuses on cross-cultural, bicultural, and bilingual processes involved in assessment, counseling, consultation, and supervision. She earned a BA in psychology at the University of Puerto Rico, MA in applied/clinical psychology at the University of Houston, and Ph.D. in mental health counseling at the University of Florida. She directed programs in residential treatment, consultation, school-based day treatment, intensive family therapy, and outpatient clinics for children and adults. Dr. Gallardo-Cooper presents in numerous training programs on a wide range of topics and teaches clinical supervision at the Universidad del Valle de Guatemala graduate program. She was a member of the Hispanic Task Force in the President's Commission of Mental Health and selected by peers as Clinician of the Year. An ACA member since 1997, she co-chaired the AMCD Florida convention team in 1997. She served as AMCD VP for Latino Concerns and co-chaired the ACA task force on Latino Counseling Competencies. She coauthored Counseling Latinos and la familia: A practical guide with Azara Santiago-Rivera and Patricia Arredondo and published on bilingual counseling and multicultural family therapy.

Qualifications and reasons for seeking office

As President of AMCD I will build upon the fruits of our past leaders and embark on a new chapter for multiculturalism in our age of globalization. Because multicultural challenges are a global concern, we need to promote cultural solutions for our communities and abroad. Our responsibility is to lead through scientific knowledge, professional training, leadership, and political action.

AMCD must meet the needs of counseling professionals through these additional objectives:
1-Build upon the Multicultural Counseling Competencies with the Ethnic Concern groups to ensure exemplary practice standards for ethnicity, race, linguistic diversity, SES, and sexual orientation, as well as develop new integrative identity models (e.g., multicultural family).
2-Establish standards for bilingual counseling competencies and certification for multicultural counseling and supervision.
3-Pursue multicultural counseling continuing education requirements for licensed counselors.
4-Establish a committee on globalization. Promote international outreach initiatives and cultural exchanges where both national and international systems advance in multicultural knowledge.
5-Encourage leadership by supporting state and region AMCD membership and conducting leadership institutes.
6-Develop new products for the professional community.
7-Establish a “media team” to advance our mission in the public arena and lead national advocacy initiatives. Increase the availability of multicultural resources to community groups; all groups are potential partners/collaborators.
8-Support membership commitment and robust fiscal foundation. Work closely with ACA and assign AMCD delegates to each ACA division.

My efforts will be influenced by my experiences as a seasoned culturally and linguistically committed practitioner and trainer. I am keenly aware of the challenges when translating theory and research into practice, navigating though the obstacles of resistance, and pursuing culturally fit adaptations. I will be enthusiastic and committed to reach all members, create teams of action, encourage collaboration, and expand the role of AMCD to stimulate a progressive division.

Governing Council Representative

Kimberly Frazier

Professional background and experience

Dr. Kimberly N. Frazier is running to be the Association of Multicultural Counseling and Development Representative for American Counseling Association Governing Council. Dr. Frazier currently works as an Assistant Professor in Counselor Education at Clemson University. She has worked in the counseling profession as a counselor educator, a university administrator and as a private practice counselor. She holds licensure as a Licensed Professional Counselor and Licensed Marriage and Family Therapist, as well as certification as a Nationally Certified Counselor. Dr. Frazier has been a member of AMCD since 2000 and has continually worked in various leadership roles within the organization. Some of her leadership positions within AMCD include serving as a member of the editorial board for the Journal of Multicultural Counseling and Development, serving on the Membership Taskforce and currently serving as the chair of the AMCD Mentoring Program since 2006.

Qualifications and reasons for seeking office

As the AMCD Representative to the ACA Governing Council some goals that Dr. Frazier would work to achieve include:
- Advancing ACA’s Strategic Priorities with a focus on ensuring that issues of multiculturalism and diversity are effectively promoted in the process of operationalizing the association’s agenda
- Actively engaging in ACA’s Strategic Planning process to ensure that issues of multiculturalism and diversity are accurately reflected and promoted in ACA’s future vision, goals, and objectives
- Being a strong voice for multiculturalism and diversity in the governance of and formulation of policy for ACA
- Ensuring that ACA’s budget allocation process supports policies and programming for the advancement of multiculturalism and diversity in the counseling profession
- Being an active and vocal presence on Governing Council, effectively representing the strategic agenda established by the leadership of AMCD

Adelaida Santana Pellicier

Professional background and experience

Assassinations of MLK, Jr., John F., Bobby Kennedy, murders at Jackson State and Kent State, occurring during my undergraduate and graduate studies at Kent...
State, lead me to my 40+ career. I studied Spanish, Sociology, Student Personnel, and Counselor Education and Supervision with School and Multicultural Counseling cognates. I purposefully have chosen to be in professional environments to acquire awareness, knowledge, and skills to confront oppression wherever it exists and advocate for the oppressed.

As faculty at Northern Arizona University, I promoted and modeled multicultural competency in all my teaching and counseling. I have been hired often as a “token” and evolved into an unsuspected trailblazer everywhere: developed leadership and counseling seminars for Upward Bound students; designed college orientation curricula for 3 ethnic groups; created a multicultural student lounge for the education college; designed and implemented a Unity Day, celebrating all ethnic groups represented at Northern. I have facilitated unlearning racism workshops; have volunteered to counsel trauma victims in a Spanish Bilingual School, to counsel patients in Hospice, and to teach English to immigrants. I recently conducted workshops in Haiti on trauma.

I am the immediate past AMCD VP for Latina/o Concerns. Leadership, teaching, and creativity have yielded me honors.

**Qualifications and reasons for seeking office**

As a longtime member of ACA and AMCD (when it was ANWC), I have appreciated the interdependence of the divisions and the overall organization leadership. I believe that I am ready now in my professional life to offer perspectives from the AMCD division that provide important contributions to education and training, research and practice for the counseling profession. Our voice in AMCD counts on all issues pertaining to counseling and adds value through our multicultural priorities. As such this is the foundation of my goals as AMCD’s Representative on The Governing Council.

1. To promote ethnic and racial empathy and understanding, defending human and civil rights as prescribed by law.
2. To promote in-service and pre-service training for members and for others in the profession to strengthen members professionally and enhance their ability to serve as behavioral change agents.
3. To promote the operationalization of Multicultural Counseling Competencies by The American Counseling Association in all our endeavors and decisions.
4. To advocate social justice as part and parcel of cultural competence and our mission in The Governing Council.
5. To promote new methods of research investigation, innovative interventions, and pedagogies for counselor training.
6. To promote disaster outreach nationally as well as globally to address disparities in disaster response and the confounding effects of systemic oppression and disaster.
7. To promote and advocate for exemplary fiscal and political standards.
8. To encourage collaboration and initiative with other division representatives.
9. To function effectively under ambiguity and adversity.
10. To maintain a clear focus on the issues, create and implement our GC vision.
11. To maintain tenacity, steadfastness, and persistence on the issues while representing the mission, goals, and policies of AMCD.

**AMERICAN REHABILITATION COUNSELING ASSOCIATION**

**President-Elect**

**Paul J. Toreillo**

**Professional background and experience**

Current Position: Associate Professor & Director of Doctoral Programs, Department of Rehabilitation Studies, East Carolina University

Association Memberships/Leadership Roles: American Counseling Association; American Rehabilitation Counseling Association: Secretary, 2007–current, Treasurer, 2009–2010, Research Award (3rd place), 2005; Association for Counselor Education and Supervision, Professor Mentor, 2009–2010; International Association of Addictions & Offender Counselors; Motivational Interviewing Network of Trainers; National Rehabilitation Association

Credentials: Certified Rehabilitation Counselor, Licensed Clinical Addictions Specialist (NC), Certified Clinical Supervisor (NC)

**Qualifications and reasons for seeking office**

Thank you for considering me to serve in the capacity of ARCA President-Elect. Like you, I am deeply concerned about the field of Rehabilitation Counseling. In an era of economic hardships and health care reform, we face fundamental challenges. For example, the Veterans Administration recently enacted policy to hire Counselors only if they graduated from a CACREP accredited master’s program, thereby denying Rehabilitation Counselors (RCs) from CORE- or non-accredited programs the opportunity to work with Veterans with Disabilities. Like you, I am quite disturbed by such a policy. I have been an ARCA member for some time and served as Secretary and Treasurer in recent years. I value our organization, our members, our journal, and other ARCA activities. However, if RCs cannot get jobs, then the fundamental reason for ARCA’s existence has been lost. Since ARCA is a division of ACA and Rehabilitation Counseling is a specialty of Counseling, I am very interested in solutions to this fundamental problem, even if it means revitalizing taboo issues such as “CORE-CACREP merger.” I do not believe that bold actions will require any loss of Rehabilitation Counseling tradition, principle, or identity. However, such loss is assured if RCs cannot get jobs. I do believe that bold actions will require some sacrifice of power and control. If such sacrifice facilitates the long-term ability of RCs to get jobs, so be it.

**Governing Council Representative**

**Caroline K. Wilde**

**Professional background and experience**

I received my Ph.D. in Counseling and School Psychology from Florida State University and my Master’s degree in Community Counseling from the University of North Carolina at Charlotte. I am a Certified Rehabilitation Counselor (CRC) and a Licensed Mental Health Counselor (LMHC) in New York.

I have worked as a counselor educator for the past 14 years. Additionally, my clinical experiences include over 10 years...
in both public and private rehabilitation counseling and mental health settings. I am currently serving as President of the American Rehabilitation Counseling Association (ARCA). In addition, I serve on the ACA National Awards committee and have been ARCA’s delegate on ACA’s 20/20: A Vision for the Future of Counseling project since its inception.

My previous leadership experiences include serving as ARCA’s Chair of Public Policy and Legislation from 2002-2011. I have also served on/chaired several ACA committees including Public Policy and Legislation and Professional Standards. In 2004, I received ACA’s inaugural Counselor Educator Advocacy award. I have co-authored a book chapter and seven publications in various outlets. I have made more than 50 presentations at local, state, and national conferences on many counseling topics including rehabilitation counseling, licensure, and counselor identity.

Qualifications and reasons for seeking office

As a longtime member of both ARCA and ACA, I am committed to the continued growth and development of these professional associations and the vital role they play in supporting and advancing the counseling profession.

My professional and leadership experiences to date have been central in solidifying my commitment to strengthening and unifying the counseling profession. These experiences have afforded me many learning opportunities along the way. I have learned to appreciate the importance and the impact of the work we do every day as rehabilitation counselors. As a result of the professional relationships I have developed over the years, I have also come to value the contributions and interdependence of the many and varied counseling specialties that exist within our profession. On an ever increasing basis, I have become acutely aware of the issues and challenges that rehabilitation counselors and their clients encounter on a routine basis. As an ARCA leader, I have gained insight not only into the unique concerns and needs of rehabilitation counselors but also to the needs of the counseling profession as a whole. For the continued growth of our profession, I believe it is essential for all counselors to work together to advocate on behalf of the counseling profession, promote collaboration and unity within the profession and to strengthen our professional association.

If elected as ARCA’s representative to the ACA Governing Council, my primary goals would be to provide a voice for the needs and interests of rehabilitation counselors within ACA’s governance structure and to work with representatives from other counseling specialties to advance the missions of ARCA, ACA, as well as the counseling profession. Given my experience, leadership roles, and commitment, I believe I can serve both ARCA and ACA toward this end.

Research and Knowledge Council

Keith B. Wilson

Professional background and experience

- Post-doctoral Studies, Harvard University, Cambridge, MA, Management Development Program, Institutes for Higher Education, June 2007; Doctor of Philosophy, Education, The Ohio State University, Columbus, Ohio, Specialty; Rehabilitation Services, Cognate Area: Multicultural Education/Counseling, August 1997, Dissertation Title: The Relationship Between Consumer Race and Vocational Rehabilitation Services Outcomes; Master of Education, Rehabilitation Counseling, Kent State University, Kent, Ohio, December 1985; Bachelor of Arts, Rehabilitation Services, Wilberforce University, Wilberforce, Ohio, August 1984
- Certifications/License: Certified Rehabilitation Counselor (CRC), National Certified Counselor (NCC), Licensed Professional Counselor (LPC), Pennsylvania; American Board of Disability Analysts (ABDA): Diplomate Service Awards (condensed): Climate Enhancement Award, Presented by the College of Education, Penn State University (2009); The Sylvia Walker National Multicultural Award, Presented by the National Rehabilitation Association (November 2006); Outstanding Faculty Award, College of Education, Penn State University (Fall 2003)

Research Awards (condensed): Outstanding Researcher Award, Presented by the Pennsylvania Counseling Association (October 2002); The Bobbie Atkins Research Award, Presented by the National Association of Multicultural Rehabilitation Concerns (July 2001)

Professional Memberships

(Condensed): National Association of Multicultural Rehabilitation Concerns (NAMRC) (1997-Present); Pennsylvania Association of Multicultural Counseling and Development (2000-Present); Pennsylvania Counseling Association (2000-Present); National Council on Rehabilitation Education (1997-Present); American Counseling Association (1994-Present); National Rehabilitation Association (1995-Present); American Rehabilitation Counseling Association (1992-Present)

I have been president of the Pennsylvania Rehabilitation Association and have served on several committees over the last fifteen years.

Qualifications and reasons for seeking office

My research activities focus on vocational rehabilitation (VR) outcomes (acceptance rates, kinds of services received, money spent on these clients, etc.) in the United States regarding people with disabilities. However, over the last six years, I am becoming more concerned with outcomes relative to phenotype (i.e., hue/color) regarding people with disabilities and able-bodied individuals in the United States.

As a member of the American Rehabilitation Counseling Association, I am elated to have the opportunity to seek election to be a candidate for the Research and Knowledge Council within our prestigious organization. I have been a productive member of the rehabilitation counseling faculty at The Pennsylvania State University going on fifteen years. My efforts have been recognized by several counseling and rehabilitation organizations in the form of research and service awards relative to both research and service to the profession. I will continue to involve my energies in the best ways not only to investigate research questions for our field, but advocate for many ways of knowing to include more diverse methodologies to facilitate understanding of very complex problems facing our profession regarding outcomes for the populations that we serve.
President-Elect

Carmen Gill

Professional background and experience

My professional background and experience includes working as a community agency counselor after obtaining my Master’s degree in counseling and serving as the crisis services manager after receiving my PhD in counselor education from the University of North Carolina at Greensboro. In addition, I have worked in hospital and university settings and I have license to practice counseling in NC, an Approved Clinical Supervisor credential and I am a National Certified Counselor. I have worked with ASERVIC as board member, newsletter editor, Secretary, and conference committee co-chair. In each of these roles, I have gained insight into the inner workings of this organization and come to thoroughly enjoy working for its leadership and the membership. I have been published multiple times in the area of spirituality and continue to write and research on related topics.

Qualifications and reasons for seeking office

I have had the privilege of working with the Association for Spiritual Ethical and Religious Values in Counseling for a little over seven years. I first became involved in ASERVIC in my doctoral program because my research interests involved spirituality. Over the past few years, I have learned a great deal about ASERVIC through serving in a variety of position within the organization, including board member, membership committee co-chair, secretary, newsletter editor, and conference committee co-chair. I believe this in depth knowledge, resulting from a history of service to ASERVIC, qualifies me for the position of president-elect. If I become president-elect, I hope to bolster the organization’s current goals which include increasing our membership, engaging the energy of our graduate student members, preparing for the next conference, furthering the spiritual journey’s mission, remaining fiscally responsible and continuing succession planning for the future of ASERVIC. I am committed to continuing to educate students and professionals on how to integrate spirituality into counseling effectively and ethically, which is the ultimate goal of ASERVIC.

Governing Council Representative

Lisa Jackson-Cherry

Professional background and experience

Lisa Jackson-Cherry, Ph.D., NCC, ACS, NCSC, PCE is a Professor and Department Chair at Marymount University. She currently serves as the Chair for the Board of Professional Counselors and Therapists of Maryland and is the past-president for the Association for Spiritual, Ethical, and Religious Values in Counseling. She is the recipient of the American Counseling Association’s 2006 Carl Perkins Award for Legislation and ASERVIC’s Meritorious Service and Outstanding Leadership Awards. She is the editor for ASERVIC/CACREP teaching modules and served on Summit II in the development of the spiritual and religious competencies developed by ASERVIC. She worked in the field as a mobile crisis team clinical coordinator, high school conflict resolution counselor, behavioral specialist, and provided crisis training for police officers. She is in private practice working with the underinsured and is involved with Concerns of Police Survivors (COPS-Kids) providing counseling to children of law enforcement officers killed in the line of duty. Dr. Jackson-Cherry has presented at local, national, and international conferences and has publications on various topics. She co-edited a textbook, Crisis Intervention and Prevention (2009). Her current research areas include ethical and legal issues and counseling issues encountered by the military and family during deployment and reintegration.

Qualifications and reasons for seeking office

I am honored to be nominated by my colleagues and leaders as the Governing Council Representative for the Association for Spiritual, Ethical, and Religious Values in Counseling (ASERVIC). It is a privilege and blessing to have served the members of ASERVIC, an organization that is dedicated to advancing the integration of spiritual, religious, and ethical issues into the counseling profession and practice. It would be an honor to continue to serve ASERVIC as the Governing Council Representative. ASERVIC is currently leading many numerous initiatives that are of major contributions to the field of counseling, clinicians, and educators (Spiritual Journey, ASERVIC National Conferences, ASERVIC/CACREP teaching modules, and monographs to name a few). If elected, I see my role as continuing with and promoting these great efforts as well as keeping the ASERVIC leadership and membership informed of ACA’s initiatives that directly impact ASERVIC. I hope to serve as the crucial communication link between ACA and ASERVIC for all matters involving ASERVIC. As a past-president of ASERVIC, I am aware of the importance of the Governing Council Representative’s role and, if elected, I pledge my commitment to following through on all the responsibilities required for this office and to be the strong advocate and voice for the advancement of ASERVIC.

Board Member

Chris Hull

No information received

Holly J. Hartwig Moorhead

Professional background and experience

Holly Hartwig Moorhead is an Assistant Professor in the School of Psychology and Counseling at Regent University. She received a doctorate in Counseling and Counselor Education and a master’s degree in Community Counseling from the University of North Carolina at Greensboro. Holly also is
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.

Claudia Sadler-Gerhardt  

Professional background and experience  

My undergraduate education is in nursing, my master's is in clinical counseling, and my Ph.D. is in Counselor Education and Supervision. I live in Ohio where I am licensed as a Professional Counselor. I am an Associate Professor in Counseling at Ashland University/
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 can be a key component in healing for many clients. From a training perspective, counselors can benefit from curricula that make spiritual and religious content and competencies more explicit and mainstream. If elected, I will strive to continue the work of the board by embracing its unified vision for spiritual and religious competencies and adding voice to the message of greater need for spiritual and religious integration into counselor training.

ASSOCIATION FOR SPECIALISTS IN GROUP WORK

President-Elect

Fred Bemak

Professional background and experience

I am currently a Professor with the Counseling and Development Program and Director of the Diversity Research and Action Center at George Mason University in Fairfax, Virginia. Previous positions include Johns Hopkins University Department Chair and Ohio State University Section Head. I have held numerous other leadership positions such as Director of an Upward Bound Program, Director of the Massachusetts Region I Adolescent Treatment Program, and Clinical Director of a NIMH funded national training consortium. My work is both national and international (in 40 countries) with more than 100 public and private sector organizations as an invited speaker, and providing training, consultation, and supervision. In addition, I have over 100 publications in professional journals, book chapters, and professional encyclopedias and 4 books as well as a forthcoming 2012 book entitled, Social Justice Counseling: The Next Steps Beyond Multiculturalism. During the course of my career I have received two Fulbright awards, and a World Rehabilitation International Exchange of Experts Fellowship, and a Kellogg Fellowship in International Development and Leadership. I am an ASGW Fellow and have received numerous awards including the 2011 ACA Kitty Gilbert and Kathleen Wrenn Award for a Humanitarian and Caring Person.

Alicia M. Homrich

Professional background and experience

Professor, Rollins College, Graduate Studies in Counseling; Licensed Psychologist, LMFT, NCC, Ph.D., Counseling Psychology, University of Georgia

Association for Specialists in Group Work service: Fellow, 2007; President’s Award for Extraordinary Service, 2000, 2003, 2006; Co-Chair, By-Laws Revision Committee, current; National Listserve Moderator, 2008-2010; Co-Chair, Emerging Leader’s Workshop, 2008; Co-Chair, National Conference, 2000, 2006; Editor, The Group Worker National Newsletter, 1999-2003; Member, 2000 Strategic Planning, 2000


While considering whether to accept the nomination I asked myself, “Can an ASGW President really contribute?” “Would I be willing to prioritize and fully commit myself to ASGW in a leadership role?”

After extensive discussion with previous and current ASGW leaders and serious reflection I have come to believe that one can make a difference as President. Having significant leadership and group counseling experience I believe my skills would be a good match for the position of President. In this role I would be committed to issues of diversity, the need to proactively engage and reengage current members, create meaning and purpose for all ASGW members to belong, and generate dynamic projects and activities that illuminate group counseling. I also believe that ASGW needs to expand the audience to those not currently affiliated through publicity, activities, outreach projects, and publications, in order to attract new members.

This background provides an excellent foundation for a future ASGW President. When asked to run, I was reluctant given my concern about whether the President can really make a difference. In addition, like so many of you, I already have numerous professional commitments that are interesting, productive, and enjoyable. While considering whether to accept the nomination I asked myself, “Can an ASGW President really contribute?” “Would I be willing to prioritize and fully commit myself to ASGW in a leadership role?”

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Alicia M. Homrich

Professional background and experience

Professor, Rollins College, Graduate Studies in Counseling; Licensed Psychologist, LMFT, NCC, Ph.D., Counseling Psychology, University of Georgia

Association for Specialists in Group Work service: Fellow, 2007; President’s Award for Extraordinary Service, 2000, 2003, 2006; Co-Chair, By-Laws Revision Committee, current; National Listserve Moderator, 2008-2010; Co-Chair, Emerging Leader’s Workshop, 2008; Co-Chair, National Conference, 2000, 2006; Editor, The Group Worker National Newsletter, 1999-2003; Member, 2000 Strategic Planning, 2000

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mational services to members so they can continue to enrich their knowledge and skills while establishing connections with other professionals. Learning, sharing, connecting, and defining professional standards for training and practice are foundational values of ASGW. These important services must continue and ASGW membership must be nurtured and expanded.

As president of ASGW, my primary goals will be to: 1) strengthen informational services to members so they can continue to enrich their knowledge and skills as group workers; 2) make the opportunities that ASGW offers to practitioners of group work known to non-members; and 3) increase ASGW membership and involvement.

Having served ASGW as editor of The Group Worker, I was a non-voting member of the Executive Board. For four years, I witnessed dedicated officers working on behalf of our organization to provide opportunities for members. I have observed the contribution of countless hours of planning and preparation invested in creating informative and dynamic national conferences. My biggest concern has been that not enough people who are in the profession of leading groups have accessed and benefitted from these efforts.

ASGW is currently a strong division with a loyal membership and dedicated leadership. The greatest challenge ahead is expanding membership and involving professionals who practice group work. As president, I would like to invite more counselors to make ASGW their divisional home and profit from the excellent work and welcoming connections of this organization.

Treasurer

Jonathan J. Orr

Professional background and experience

Thanks for the opportunity to share a little about my professional background and experience. I identify as a Clinical Assistant Professor in the Department of Counseling and Psychological Services at Georgia State University. I also maintain a small private practice and hold the titles of a National Certified Counselor and a Licensed Professional Counselor in Georgia. I earned both my master’s degree in Counseling and a Ph.D. in Counselor Education from the University of New Orleans. My teaching, counseling, and research interests include: group work, social justice, multicultural counseling, supervision, theory development, and professional counselor identity. I enjoy conducting workshops and presentations at local, state, regional, and national levels mostly because it affords me the opportunity to share ideas with likeminded colleagues and reconnect with my beloved community in this profession. I strongly believe that it is my privilege to act in servant leadership to my professional community and I have found many ways to do that through my membership in the American Counseling Association, the Association for Specialist in Group Work, and the Association for Counselor Education and Supervision among others.

Qualifications and reasons for seeking office

I am excited for the potential that the position of ASGW treasurer holds. I have been fortunate to work in service to ASGW for several years and I find those collective experiences to be a highlight of my career. Some descriptions of my past service positions include: Chair of the ASGW Conference Planning Committee for 2010 and 2012; Co-Chair of the ASGW Professional Development Committee; Chair of the ASGW Graduate Student Development Committee. I have also served as a member on the American Counseling Association Committee on Human Rights and on the Product Development Committee for the Association for Counselor Education and Supervision. In the role of ASGW treasurer, I intend to build on the strong relationships I have developed both in ASGW and throughout ACA to strengthen and grow our association. I am by nature and inclusive and transparent person, and I will use those strengths to foster confidence in my role as treasurer. My vision for the role of ASGW treasurer is one focused on fiscal responsibility and resource development. In terms of fiscal responsibility, I will draw on experiences from my past as a small business developer in New Orleans and current experiences of generating revenue for ASGW through the 2010 and 2012 conferences. When it comes to resource development, I will work closely with both the leadership and the membership in ASGW to discover innovative ways to strengthen and grow our association’s assets. In all of my activities, I will rely on my strong interpersonal skills to connect and collaborate, because I understand that the greatest resource for ASGW is the people involved.

Deborah Rubel

Professional background and experience

I have a master’s degree in mental health counseling and doctorate in counselor education and counseling from Idaho State University where I developed my passion for group work. I love to be in and lead groups but lately my relationship to group work is through providing supervision and training and through writing and research. I’ve been a member of ASGW’s Research Committee since 2005, Co-Chairperson since 2007 and on the editorial board for JSGW since 2009.
Qualifications and reasons for seeking office

My main reason for seeking the office of treasurer is to give back to the organization that has served as my professional home and contribute to its mission of improving the provision of group work to diverse populations for diverse issues through training, supervision, and research. ASGW is a solid organization that has had excellent financial management in the past. My goal would be to continue to support this tradition, communicating effectively with and being responsive to ASGW leaders and stakeholders as they conduct their important organizational tasks.

COUNSELORS FOR SOCIAL JUSTICE

President-Elect

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. She is currently tenured faculty at UTB.

In 2007, she founded the Texas Counselors for Social Justice and recently completed a three-year term as the division’s director. She also served CSJ on the National Planning and Implementation Committee for the ACA 2011 New Orleans Day of Giving Back and is an appointed member of the ACA Human Rights Committee during the 2010-2012 term. Dr. Yznaga is a former co-chair of the Texas Counseling Association’s Ethics Committee, and the School Counselor Issues, Advocacy, and Public Policy Committee. She is currently the Parliamentarian for the Texas Counseling Association. Dr. Yznaga’s has presented extensively on culturally-appropriate treatment of Mexican-descent students and clients, multicultural competencies, and ethics.

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).

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 and who acknowledge that there is much work to be done in the arena of human rights; 2) to provide awareness for those who have not yet been convinced that many groups continue to experience the daily pain of prejudice, oppression and racism; and 3) to facilitate practical and action-oriented solutions that would contribute to the mitigation, if not eradication, of marginalization in any form.

My interpersonal and leadership styles are grounded in respect and relationship building. In the spirit of strengthening the corps, my voice is firm but always respectful of diversity of opinion and thought. Each of us brings a unique talent to this work, and my hope is to assemble this talent to form a powerful group whose presence inspires and strengthens those who feel disempowered.

I believe that I have the leadership skills to organize Division leaders and members to develop and accomplish realistic goals, and to continue building effective coalitions with other ACA organizations. My experiences in Texas have taught me to lead with an open ear and an open heart, to make commitments that I can keep, and to see projects through to success. With members’ input and support, we can continue the work of social justice: equity, access, participation, and ultimately, harmony.

Governing Council Representative

Judy Daniels

Professional background and experience

I am a lifetime member of the American Counseling Association (ACA) and a founding member of Counselors for Social Justice (CSJ). In 2009-2010 I served as the president-elect of CSJ, in 20010-2011 I served as the president of CSJ, and currently I serving as the past president. I have been a counselor educator for 20 years and I have been working in the field of mental health for about 30 years. I have received teaching awards, ACA’s Wrenn Award, and I am a Fellow in ACA. In addition, from CSJ I have received the Ohana award and the Arnold Anti-Oppression award. In terms of scholarly accomplishments I have authored/coauthored about 45 articles and book chapters and conducted about 95 national and international presentations. I am a social justice advocate and work to promote social justice in every aspect of what I do.

Qualifications and reasons for seeking office

As one of the founding members of Counselors for Social Justice (CSJ) I am committed to promoting and implementing social justice theory and practice in all leadership positions that I am involved in. As a board member of CSJ and in my role as the president of CSJ, which I have just finished, I actively sought ways to strengthen CSJ as an organization and worked to infuse a social justice counseling orientation into the American Counseling Association (ACA). If I am elected to be the Governing Council Representative for CSJ, I will continue to look at creative ways of promoting social justice within ACA. I will take issues from our board and the membership to the governing council and work hard to represent CSJ’s position on these different issues. I plan on actively keeping the CSJ membership and the board, informed about the issues and concerns of the governing council and I hope to represent the collective views of our organization. If elected to the governing council I plan on networking with like-minded divisions and look for avenues to work together to best serve the interests of ACA and CSJ. If elected I look forward to continuing to serve as a board member of CSJ and continue to strengthen our organization.
Communications Officer

Tonya R. Hammer

Professional background and experience

I am an Assistant Professor in the Counseling Department with the University of Houston-Clear Lake. I am the Division Director of the Texas Counselors for Social Justice, a division of the Texas Counseling Association, as well as a past President of the division. I am an active member of Counselors for Social Justice and served as a tri-chair of the Day of Giving Back Project in New Orleans at the 2011 ACA conference. I am a past secretary for TACES, and am completing the last year of my term as Treasurer of ACC. I am involved in the Human Dignity and Humiliation Studies Network, an international organization promoting global systemic to open space for dignity and mutual respect to take root and grow, thus ending humiliating practices and breaking cycles of humiliation throughout the world. I am a Board Member and Education Chair of the recently formed GLSEN-Houston Chapter, a non-profit organization dedicated to helping to create a safe space for all students. Additionally, I am a recipient of the ʻOhana award, bestowed by the Counselors for Social Justice. I believe I bring with me not only a passion and willingness to serve, but proven leadership experience.

Qualifications and reasons for seeking office

I am honored to have been nominated for the position of Communications Officer for Counselors for Social Justice (CSJ). I have prior experience in roles of leadership that reflect the duties and qualifications necessary for this position. My responsibilities as secretary of TACES parallel those that I expect to provide to CSJ. Additionally, while serving as tri-chair of the 2011 Day of Giving Back Project in New Orleans, I took on the responsibility of documenting all of our meetings and served as a coordinator of communication amongst committee/task force members and ACA. I believe my experience in both of these areas has prepared me for this position. I have served Texas Counselors for Social Justice diligently over the past several years and would like to continue this service on a national level. I have a strong desire to work with others to see the mission and purpose of this infused in the counseling profession. It is my belief that to truly be a representative of social justice, one has to serve as well as teach and research. My work as a licensed professional counselor and counselor educator is dedicated to advocating for my students, my clients, and the profession. From my work with TxCSJ and CSJ, to my involvement in the Human Dignity and Humiliation Studies Network, I strive to address the injustice in society, from microaggressions to humiliation in all forms. I would love the opportunity to collaborate with other members and leaders of CSJ and other divisions in service to CSJ, ACA and the counseling profession.

Retired Persons Representative

Jane Goodman

Professional background and experience

I am Professor, Emerita, Counseling, at Oakland University in Michigan. I received my PhD in Counseling in 1978 from Wayne State University after receiving a master’s degree in the same subject and at the same place. My Bachelor’s degree is in Sociology from the University of Chicago. I hold a license as an LPC from the State of Michigan.

I was 2001-2002 president of the American Counseling Association and am a past president and Eminent Career Awardee of the National Career Development Association, Fellow of ACA and NCDA, the author of many articles and book chapters, in the area of transitions and career development, including the 2011 Fourth Edition of Counseling Adults in Transition (with Anderson and Schlossberg) and the NCDA Case Book (with Niles and Pope). My awards include CSJ’s Ohanna award and Group Worker of the Year from the Michigan ASGW. I am the mother or stepmother of seven and has nine grandchildren on whom she dotes.

Qualifications and reasons for seeking office

I have a passionate belief that counseling had a social justice beginning and that counselors have an obligation to continue that perspective in our work. My career began in seeking to reduce the sexism in interest testing and I have continued an interest in encouraging institutions to change when they are not serving disadvantaged or discriminated against populations. I would be honored to serve on the CSJ board as a way to continue that commitment.

INTERNATIONAL ASSOCIATION OF ADDICTIONS AND OFFENDER COUNSELORS

President-Elect

Wanda Briggs

Professional background and experience


License, Certification, & Clinical Training: North Carolina Board for Licensed Professional Counselors (LPC) #4407; National Board for Certified Counselors (NCC) #72497; State of North Carolina Licensed School Counselor, Class Code S; Substance Abuse Subtle Screening Inventory Training (SASSI-3), (2005); Clinical Hypnosis Training (2003, 2004)

Winthrop University: 2009-Present, Counseling & Development Program Coordinator (CACREP-Accredited); 2006-Present, Assistant Professor, College of Education, Curriculum & Instruction; Community Counseling Coordinator, Chi Delta Epsilon Faculty Advisor

and loss, and chronic illness. Provide supervision for LPC candidates.

Professional Service Experience:
2010-2011, ACA Division: Treasurer, International Association of Addictions and Offenders Counselors (IAAOC);
2006-2010, ACA Division: Co-Chair, International Association of Addictions and Offenders Counselors (IAAOC), Committee on addictions and Families, Couples, and Youth

Qualifications and reasons for seeking office

I am honored to be nominated for president-elect of IAAOC and look forward to continuing my service to our organization. As a member of IAAOC, I have been able to interact and assist the division through my committee work, presentations, publications on addiction and offender topics, and in service to the Board of Directors as 2010-2011 Treasurer. I consider IAAOC my professional home and am committed to IAAOC’s mission of work in the addiction and forensic/criminal justice fields and advocacy for appropriate treatment for the client populations we serve. I am passionate about providing leadership, educational development, and research that supports the advancement of this field of counseling.

As president-elect I will have the opportunity to assist in the educational renewal development of its members and in growth in membership. Specifically, I am interested in providing leadership to our division in two areas:

■ Counseling for aging populations. Today, we live in an era of unprecedented growth in the aging population. I believe that IAAOC has a responsibility to prepare its members to be responsive to the needs of this aging demographic group; specifically, in their ability to remain physically and mentally active. While diversity within this population is one of their greatest strengths and many remain free from drug misuse or abuse; the potential for misuse or abuse is significant and presents an ever-expanding need for addictions counselors in areas of prevention and intervention.

■ Enhancing IAAOC membership growth through the use technology. As a counselor educator and as president-elect, I wish to foster the efforts of our division and branch divisions to grow graduate student membership in IAAOC using available technology to explore ways that we can connect with new students on a regular basis.

I am committed to IAAOC and would be honored to serve as president-elect.

Keith Morgen

Professional background and experience

I have a Ph.D. in Counseling Psychology (Lehigh University), I am a Licensed Professional Counselor (New Jersey), National Certified Counselor, the Secretary of IAAOC, and the Chair of the IAAOC Spirituality Committee. I am an assistant professor in the counseling programs at Centenary College (Hackettstown, NJ). I was a Pre-doctoral (2001-2003) and Post-doctoral (2003-2004) Research Fellow in the Behavioral Sciences Training in Drug Abuse Program, which was funded by the National Institute on Drug Abuse (NIDA) and jointly sponsored by the Medical and Health Research Association of New York City, Inc. (MHRA), and the National Development and Research Institutes, Inc. (NDRI). I have published over 25 scholarly articles and book chapters focused on addictions and corrections issues. These articles have appeared in such journals as Journal of Addictions and Offender Counseling, Alcoholism Treatment Quarterly, Journal of Correctional Healthcare, The Gerontologist, Therapeutic Communities, and VISTAS 2010. I guest-edited the 2009 special spirituality issue of the Journal of Addictions and Offender Counseling. I have also discussed the interface between spirituality and addictions in two issues of Counseling Today and was interviewed on the subject for an IAAOC-sponsored podcast.

Qualifications and reasons for seeking office

I would be honored to lead IAAOC during this exciting period of discussion regarding counselor professional identity. As IAAOC President I would work to include addictions counseling into that conversation. For example, nationwide the counseling profession is fragmented with licenses/certifications required to perform addictions work coupled with employment opportunities calling specifically for these addictions credentials. However, these credential requirements (some dating back to the professionalization of addictions counseling) equal thousands of extra-hours of supervised training not mandated for work with any other DSM-IV disorder. The professionalization of addictions counseling strengthened the field. Unfortunately, it also (over time) reinforced the notion that addiction falls outside the scope of practice for professional counselors (i.e., the separate licensure and certification processes). In many states, burdensome regulations are keeping countless qualified, capable, and motivated counselors from entering the addictions field. Through my scholarly work on this issue I have heard of many new counselors nationwide facing this obstacle at the start of their careers. I believe that rigorous training is needed to work in the addictions. However, I also believe that professional counseling encompasses working with all disorders. Therefore, if elected, I would establish an IAAOC committee of experts to work with ACA and the states on finding a solution that takes into account both the graduate training of professional counselors and the need for specialized addictions training. This committee would also advocate at the state levels to inform all involved parties about how this issue fragments the counseling profession and impedes the quality of care for addicted clients. If the practice of addictions counseling really is to be considered a part of counseling (as implied by the latest CACREP standards), then it seems time to recalibrate the rest of the counseling profession to better fit that inclusive and unifying principle.

Secretary

Larry Ashley

Professional background and experience

Larry Ashley, Ed.S, LCADC, LMSW, LPC, CPGC, has been involved in the substance abuse and trauma field for thirty seven years as a university...
professor, researcher and therapist. He is currently Addictions Specialist/Mental Health Coordinator as well as graduate addiction studies program coordinator in the Department of Educational and Clinical Studies at the University of Nevada, Las Vegas. Director of the Problem Gambling Treatment Program and Clinical Assistant Professor in the Department of Internal Medicine in the University of Nevada School of Medicine. Due to his extensive clinical experience coupled with opportunities for national and international speaking engagements, Professor Ashley is considered to be a leading expert on Post-traumatic Stress Disorder and issues related to addictions. He has a special interest in on the impact of war on solders worldwide.

**Qualifications and reasons for seeking office**

During my entire counseling career, I have purposely taken actions towards one penultimate goal, to promote and advance the training, education, and supervision of addiction professionals. Ultimately, I serve others to ensure competent counseling practice in the specialization of addictions work. Further, in my research focus, my teaching passion, and my professional service, I specialize in the relationship between trauma and addictions. This includes examining the confluence of addiction as it relates to veterans, war, physical and sexual trauma; trauma and violence that particularly targets vulnerable populations.

In my long and rich career I have been honored to serve in many leadership positions for professional organizations. I am an active member of the International Association of Addiction and Offender Counselors and I serve as Chair of the Trauma and Addiction Committee. I have held several leadership positions within NAADAC The Association for Addictions Professionals as well. I am Past President of the Nevada Association for Addiction Professionals, the state affiliate of NAADAC. I am currently Chair of the Veterans Committee. Presently, I am appointed by the governor to serve as Vice Chair and Higher Education Representative for the Nevada Governor’s Committee on Co-Occurring Disorders. I, also, serve on the Nevada Board of Examiners for Alcohol, Drug and Gambling Counselors.

In my capacity as an experienced addictions and trauma specialist, I have been asked to present and consult internationally. This has led me to many exciting places, provided many learning opportunities and has increased my understanding of international and diverse perspectives. This in turn informs my work with clients and students. When I travel I facilitate and conduct training that focuses on Combat trauma, Sexual Trauma, Process Addictions and Co-occurring Disorders. My primary mission is to educate all professionals regarding issues related to Addictions and Trauma and promote competence.

**Virginia A. Magnus**

**Professional background and experience**

I am an Associate Professor in the Counseling Program at the University of Tennessee Chattanooga and have been a member of the faculty for the past six years. I earned my PhD from UNC Charlotte, and my Master’s degree from Butler University. I am a Licensed Professional Counselor, a Licensed Professional School Counselor, and a Certified Sports Counselor. Related experience includes providing counseling services for female adolescents in a drug and alcohol residential treatment center and incarcerated females.

**Qualifications and reasons for seeking office**

I am honored to be nominated for Secretary of the International Association of Addictions and Offender Counselors (IAAOC). I have been an IAAOC member for many years, previously served in various leadership roles, and continue to support our organization advocating for excellence in our profession for addictions and offender counselors. It is clear that IAAOC provides important leadership representing addictions and offender counselors as we continue to advance our profession, for example, the recent CACREP-accredited Addiction Specialty Track that IAAOC leadership supported.

I see major goals for serving the members of IAAOC as Secretary. First,
I appreciate the ideas shared by IAAOC members at our recent ACA Conference and IAAOC Membership meeting. I believe in the continued need to increase communication with IAAOC members and will work to support our executive leadership to provide information to the members. Second, I commit to continue our vision within IAAOC by seeking additional ways to develop resources which support the many aspects of addictions and offender counseling. Third, as Secretary, I will record and distribute minutes of IAAOC meetings in a timely manner. I am committed to serve as IAAOC Secretary with care and consistency as progress is made toward our goals next year.

The IAAOC division is an important division within the American Counseling Association and has valuable opportunities ahead to represent and advocate for the many IAAOC counselors working tirelessly in addictions and offender counseling and, as Secretary, I will commit my time, energy, and focus toward accomplishing important IAAOC goals as IAAOC Secretary.

NATIONAL EMPLOYMENT COUNSELING ASSOCIATION

President-Elect

Sharon McCormick

Professional background and experience

I am honored to be nominated for the President position for NECA. I am a multi-degreed and multi-credentialed human resources, career counseling, and training professional with a passion for employment, career, leadership, and workforce development.

I worked as a Counselor, Career Counselor, Coach and HR professional with just about every kind of job seeker in most industries over the years, as I wanted all the experience I could obtain since knew I wanted to be a Career Counselor at a very young age. My career counseling experience includes corporate, Federal, Higher Education and non-profit organizations, and I have helped create and manage successful career services programs. I enthusiastically created and taught career classes at six different colleges and universities, and at an Adult Learning Center, for 16 years.

I specialize in job placement, and expertly quantify a job seeker’s value while speaking to true HR hiring needs. I volunteered for 16 years as well, a commitment I expect to continue for the rest of my life, as I truly enjoy serving people of all ages. For more information about me and my philosophy, etc., please see my website: www.careertreasure.com.

Qualifications and reasons for seeking office

My life-long career advice of “get a degree, get a trade, and have your own business” rings true today, where I witnessed changes to our economy that I never expected, but must adapt to and thrive in, along with my family, friends, and clients. I care deeply about helping our country to “support itself” now and for our future generations.

I read and research employment topics and trends constantly, to stay on top of how to best guide those who ask me for employment advice.

I am very concerned about how to best support and advise job seekers today, and for the future, so I am focused on both short- and long-term innovative employment solutions. I believe in both individual employment empowerment, which includes helping job seekers gain multiple sources of income, and employer empowerment, or new models for employment based on worker co-operatives, much like credit unions.

As a voice for both job seekers and human resources professionals, my job is to envision new career paths, human resource paradigms, and employer partnerships, making them a win-win situation for everyone. My goals would be to immediately ask a lot of good questions of our members, my experts in their respective fields, and to draw upon their treasure by leading us toward consensus in building new visions, strategies, and actions for employment exploration and implementation. I am a results-oriented professional and I would define quantifiable outcome measures that I’d like to drive forward our success in achieving. I welcome the opportunity to serve NECA, our members, and job seekers everywhere, and I am honored to be nominated.

Governing Council Representative

Sue E. Pressman

Professional background and experience

Sue Pressman, PhD, LPC, NCC, NCCC, MCC, GCDFI. She holds a PhD from Virginia Tech in Counselor Education, MA from Gallaudet University in Rehabilitation Counseling, Bachelors Degree from the University of Florida in Speech Pathology.

Sue is President & CEO of Pressman Consulting, LLC a career management and human resource consulting firm headquartered in Arlington, Virginia. Sue has been a member of ACA for 30 years. She is a past president of NECA (2009 – 2010) and is a long time member of NCDA and has and written articles and been included in numerous counseling publications. She is also a founding member of the Deaf & Hard of Hearing in Government, a nonprofit organization serving all government agencies.

Sue has earned an outstanding reputation for career counseling, training, and leadership coaching with senior executives, military & Foreign Service officers, managers, labor unions, and people with disability. She works collaboratively with the Intelligence Community on career advising methods and for bringing workplace conflicts to resolution. Earlier in her career she established a workforce development division of a large corporation, held a long-term contract as a Senior-level Career Counselor in the U.S. Department of Education, launched and directed Gallaudet University’s career center.

Qualifications and reasons for seeking office

For about 30 years I have been an active ACA member and am honored to have been nominated to Governing Council. I have a passion for my work as a career counselor practitioner and business owner and someone who has focused on the labor market issues and creating inclusive environments for my entire career. I am pleased to bring representation from this sector of our membership.

I was introduced to ACA when I was a counseling graduate student at Gallaudet University. Back then it was a very strong recommendation to all students in our program to join ACA. That was a great
recommendation. While the counseling profession offers many specialties for us to focus on our individual areas of interest, ACA serves as the large umbrella and unites our specialties with a voice for us all to government and legislative decision makers. For these reasons and more I welcome the opportunity to provide input through Governing Council.

As one of your voices, I look forward to representing the field of career and employment counseling to ACA. I want to learn and be involved with ACA policy and organization development so that I can help ACA continue to be a leader in the counseling arena. In these times of high unemployment and tough economics I will provide input to ACA so that we as a profession can have an even louder voice to help move the country into better times by educating the public and the legislative decision makers on how we as professional counselors are making a positive difference and the importance of keeping the profession alive. As a one of your governing council representatives I will be committed, analytical, and speak up with both head and heart to work on issues that are both driving and presenting concern to the counseling profession regardless of the counseling special interest area.

Trustee

Seneka Arrington
No information received

Angeline Bilotta-Sousa
No information received

Mary Ann Radebach

Professional background and experience
Past President, former Treasurer and long-time member of NECA. As NECA's representative, reviewed ACA conference proposals for several years. Received Research Award from NECA for employment study. Retired Employment and Training Counselor from Delaware Department of Labor. Master's of Education in Counseling and Doctorate of Education in Vocational Education. Taught Graduate Courses in Counseling Education. For seven years owned and operated business called Careers Unlimited. Returned Peace Corps Volunteer having served two years in Ukraine from 2004-2006 as a Teacher Trainer. Worked for four months traveling throughout Ukraine as a recruiter for a Department of State's cultural exchange program for high school students. Recently retired from the U.S. Government as a Management Analyst, administering International Technical Assistance Programs.

Qualifications and reasons for seeking office
When you meet a new person, one of the first questions is, “What do you do?” Many of us define ourselves by our employment. It is hard to know where to start looking for a job and what kind of a job is the right job. The average person spends almost 40 years in the labor market. That’s a long time to be working at something you don’t like. NECA exists to help people with these decisions. Our NECA counselors have the education, skills and experience to assist job seekers find the right employment path.

My goal is to help NECA members continue their excellent work in supporting people in their search for the right job.

WESTERN REGION

Governing Council Representative

Joseph Dear

Professional background and experience
Retired Coordinator, Pupil Personnel services for the State of California for twenty years; Education: Ed.D, Counselor Education; M.S. Community Mental Health; B.A., Psychology; Association Experience: Governing Council Representative for Western Region 2009-2012; CACREP Board of Directors, 2002-2008; Chair, ACA Western Region, 2002-2005; Member, ACA Branch Development Task Force, 2005-2006; Member, ACA Branch Awards Committee, 2001-2002; Member, ACA Practice Research Network committee from the beginning 1998-2002); Member, ACA Youth Violence Prevention Task Force 1996-2002; Member and past chair ACA Research and Knowledge Committee, 1997-1998 & 1998-1999); Past President, California Counseling Association; Past President, California School Counselors Association; Past President, California Association of Counselor Educators and Supervisors; Past President, California Association for Multicultural Counseling and Development. Branch, Division and Affiliate Memberships: ACA, ACES, AMCD, ASERVIC, California Counseling Associations and Divisions: California ACES, California School Counselors Association; California Multicultural Counseling and Development, California Association for Spiritual, Ethical and Religious Values in Counseling. Other Voluntary Involvement: Board of Directors, United Way, California Capitol Region, 1992-1997; National Advisory Council Member, United Nations Children’s Fund (UNICEF), 1994-1998. Awards and Honors: H.B. McDaniels Hall of Fame Award for Counseling, Stanford University, 2010; United Way Lifetime Achievement Award Recipient, 2004

Qualifications and reasons for seeking office
My goal is to continue to represent the Western Region to the best of my ability. During my present tenure on the Governing Council, I have played a major role in getting the Governing Council to pay more attention to the needs of the association’s branches and have played a major role in making sure that branches continue to be considered when major changes in the organization’s governance and other significant areas are discussed. Another goal is to make certain that this strong support is continued for the next several years. This has been manifested by the association now exploring ways to have branches to combine national and state memberships if the branches so choose, on a voluntary basis. If approved, branches will be under no obligations to do so if they choose to not participate. Another manifestation is for the first time since offering the joint Institute for Leadership Training, more branches will be able to attend than at any other time since the joint training started several years ago. Ten branches will be represented in Washington DC this year and my plan is to have even more representation next year.

Anyone who knows me know that I am a no-nonsense kind of a person who loves being involved and always follows through on my commitments. What I said in my previous goal statement about my strength on the Governing Council being as a mediator and facilitator to bring people together has
turned out to be true. Since being elected to the Council, I have been able to work very constructively with many of the other “old timers” and “strong voices” on the Council to reach agreeable ends. My membership on the Executive Committee will allow me to be even more effective in the coming years.

Rachel Kristianson

Professional background and experience

I retired in June of 2008, but worked in both counseling and human services for forty years. In addition to my leadership work with professional counseling associations, I am currently a Red Cross volunteer counselor and case manager.

During my career I worked in a variety of capacities. They include: Vista volunteer working in the inner city with children and families; caseworker with child protective, foster child and family services; financial aid counselor and college work-study program director; private practice as a counselor; and private practice doing adoptive and child custody home studies. However, my primary work in my forty-year career was as a school counselor with 25 years of experience at the middle school level. For 4 of those years I also worked at the elementary level part-time and for 14 years I taught one class in addition to my counseling duties.

I have both teaching and counseling credentials. I hold a B.A. from the University of Washington, a M.Ed. in counseling and guidance from Whitworth University, teaching credentials through work at Gonzaga University, and an additional 156 credits in upper level and graduate level courses. I am also a National Certified Counselor through NBCC.

Qualifications and reasons for seeking office

I understand and am committed to the profession of counseling and the counseling professional. I am currently the Past-Chair of the Western Region of ACA. I joined ACA in 1977. Since then I have maintained membership in professional counseling associations at the National, Division, Branch, and Branch Division levels. I have served as the president of the state branch, the branch school counseling division and as Chair of the Western Region of ACA for a total of 15 years in the president/chair leadership cycles. I was Western Region’s representative to Governing Council from 2003-2006. During that time, I was chosen and served on the ACA Executive Committee and the ACA Financial Affairs Committee in consecutive one-year terms.

I believe in ACA and its mission and purpose. Governing Council members need to be well informed and prepared for the meetings. In my first year of the 2003-2006 term, I was learning about GC. During the last two years of the term, I was a strong contributor to the work of the governing body of ACA. If elected, I feel I would be effective throughout the 2012-2015 term because of my background, work ethic, and previous experience on the Governing Council.

One of the ACA strategic priorities is to balance academia with practice. Many of the members of Governing Council are PhD’s and EdD’s from academia and other settings while the majority of members of ACA are Master’s level practitioners. As a Master’s level practitioner with years of experience, my perspective reflects the concerns of many ACA members. As a Western Region, officer, I worked extensively with the Branches of the Region to provide information and assist them as needed. Therefore, I feel well qualified to represent Western Region, the interests of the profession of counseling, and the American Counseling Association.
Article: Getting Off the Couch – Active Interventions

Learning Objectives: Reading this article will help you:

1) Understand how active interventions can be used as a strategy for addressing the varied counseling and human development needs of clients.
2) Learn stages of the active intervention process.

Continuing Education Examination

1) The use of active interventions based on group experiential learning is:
   a. Activity-driven counseling
   b. Outreach counseling
   c. Experiential counseling
   d. Adventure-based counseling

2) Engaging clients in active interventions can take place either inside or outside the confines of the counseling office.
   a. True
   b. False

3) The part of the active intervention process that involves asking clients about what they experienced is:
   a. Debriefing
   b. Processing
   c. Back-loading
   d. All of the above

4) The counselors interviewed for this article contend that active interventions are most beneficial when counseling:
   a. Almost any client
   b. Children
   c. Adolescent males
   d. Families

I certify that I have completed this test without receiving any help. Signature ___________________________ Date __________

Rate the following:

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<th>Strongly agree</th>
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<th>No opinion</th>
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I learned something I can apply in my current work
The information was well presented
Fulfillment of stated Learning Objectives were met
This offering met my expectations

Profession:

___ Alcoholism & Drug Abuse Counselor
___ Counselor
___ Counselor Educator
___ Psychologist
___ Social Worker
___ Student
___ Other

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Mail: Complete the test and mail (with payment payable to American Counseling Association) to: ACA Accounting Department/CT, American Counseling Association, 5999 Stevenson Ave., Alexandria, VA 22304. Your CE certificate will be emailed, unless noted otherwise, in 2–3 weeks. Questions? 800-347-6647, x306.
Imagine this …
You are part of a group of counselors that has been invited to a middle school in rural Nebraska. The director of school counseling, Ms. Smith, tells you that one of the activity clubs offered to students is a mental health club. She explains that in this club, students are educated about the benefits of positive mental health, share concerns related to events in their own lives and families, and learn coping skills.

You arrive at Park Middle School after classes have ended for the day, expecting to meet with the principal and some of the teachers to discuss the mental health club. Instead, you are escorted to the school gym, where you are greeted by more than 800 students as well as many parents and members of the local community. You find out from Ms. Smith that the students who are members of the mental health club have prepared a program for you and your colleagues.

After Ms. Smith greets the students, you sit and enjoy a two-hour program that includes skits, poetry, music and dance — all of which is about challenging issues the students face and the importance of good mental health. The other students in the audience seem to enjoy the program tremendously. They frequently cheer on their classmates and are generous with their applause. You remember times like this from your days in middle school, but those occasions involved pep rallies for school sports teams. These are the first mental health cheers you have ever heard.

Hard to imagine?
We certainly would have thought so. But then we had the opportunity to be a part of the very experience just described. Not in the United States, however. In Malawi, in Africa, at Chinsapo Secondary School in Lilongwe.

In June 2011, the National Board for Certified Counselors Board of Directors, along with two staff members, traveled to Lilongwe at the invitation of the Guidance, Counselling and Youth Development Centre for Africa (GCYDCA), a longtime partner of NBCC International (NBCC-I). GCYDCA provides training to a wide variety of professionals working with youth in many capacities and in many countries in Africa. GCYDCA also has developed counselor training, offering a certificate program, a diploma and a degree program in counseling.

The concept of the mental health clubs introduced to schools in Lilongwe by GCYDCA began with a collaboration between GCYDCA and NBCC-I that centered on the Mental Health Facilitator (MHF) program. The MHF program is based on a 30-hour curriculum developed by J. Scott Hinkle, NBCC’s director of professional development, and Donna Henderson, professor in the Department of Counseling at Wake Forest University.

The curriculum was developed in direct response to a challenge issued by Dr. Benedetto Saraceno, then director of the Department of Mental Health and Substance Abuse at the World Health Organization, to find ways to increase capacity and better meet the needs of the more than 450 million people in the world who do not have access to mental health services. MHF training was created to increase service capacity — especially in areas of the world where there are little to no mental health services — by educating laypersons, paraprofessionals and professionals from occupations not related to mental health in areas such as basic helping skills and referral. The curriculum also includes many opportunities to practice the skills during training. The MHF program is based on a training-of-trainers model. NBCC-I trains master trainers and then collaborates with local partners to train local trainers, who then train others in the MHF curriculum.

And now, this has expanded into African schools.

GCYDCA was the first organization to partner with NBCC-I after completion of the pilot training in Mexico. NBCC-I staff conducted the first training of trainers in Malawi in February 2008. GCYDCA Director Kenneth Hamwaka and his staff have provided much guidance and advice to NBCC-I in developing the program, especially in Africa.

The idea for the MHF clubs originated with GCYDCA and the guidance teachers who were the first Africans trained in the MHF program. Prior to the school program, NBCC Board members and leadership were able to meet with a group of students and teachers and gain their feedback about the program and their MHF clubs. Students and teachers talked...
freely about the positive effects of the clubs on individual students and the various schools as a whole.

In talking about her experiences meeting these teachers and students, Brandon Hunt, chair of the NBCC Board of Directors, said, “It was so moving to see how the MHF clubs have helped the students learn to make positive choices in their lives and to see how supportive they are of their peers.”

Wendi Schweiger, an NBCC staff member, has been actively working with the GCYDCA partnership and has traveled to Malawi several times. For her, one of the most moving moments was hearing the head teacher of the school, Mrs. Moyo, announce that since the implementation of the MHF club, the incidence of student pregnancy in the school has dropped to zero.

Chinsapo is a typical school in Malawi. It has limited resources and approximately 45 students per teacher.

So, imagine this … A mental health club in a school with teachers and administrators trained in the 30-hour MHF program has asked you to come to its presentation. Right down the road, at the local school, in the United States. It could happen!

Wendi K. Schweiger is associate vice president of NBCC International.

J. Scott Hinkle is director of professional development for NBCC.

Brandon Hunt is chair of the NBCC Board of Directors.

Letters to the editor: ct@counseling.org

Girls’ and Women’s Wellness: Contemporary Counseling Issues and Interventions

Laura Hensley Choate

“This is an exciting resource for addressing girls’ and women’s issues from a strength-based, holistic perspective that highlights resilience and coping. It will help women discover and actualize their inherent potential for positive change.”

—Jane E. Myers, PhD

The University of North Carolina at Greensboro

In this empowering resource, mental health counselors, counselor educators, and school counselors will find an abundance of practical strategies that can be used immediately in their daily practice. Each chapter includes assessment and intervention strategies, client handouts, workshop outlines, self-exploration activities, case studies with discussion questions, and recommended resources. Topics addressed include women’s development and mental health, self-esteem, body image, relational aggression in girls, sexual assault and intimate partner violence, college women’s experiences, life-work balance, spirituality, and the concerns of mid-life and older women. 2008 300 pages.

Order #72876 ISBN 978-1-55620-270-4 List Price: $55.95 ACA Member Price: $39.95

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

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New tools on the ACCA website

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

Greetings fellow American College Counseling Association members! It’s been an exciting year so far for many of us, whether we spent it counseling college students or teaching bright-and-bush-tailed graduate students what it means to be a counselor, social worker, therapist or psychologist.

No matter your role, ACCA is dedicated to making sure you have the latest information available at your fingertips. Our website (collegecounseling.org) has a host of new and exciting features available. They include the following:

- **ACE’s SPACE**: A collection of more than 40 articles related to college mental health and stress management. We encourage you to link ACE’s SPACE to your existing webpage and encourage students to use this resource. Check it out at space.collegecounseling.org.

- **Webinars**: We have five 90-minute webinars available for your online streaming as a member benefit and are adding more each semester. Check them out at collegecounseling.org/webinars (ACCA members only).

- **Online Forum**: With more than 450 users, the ACCA forum is the place to download handouts, PowerPoints, counseling syllabi and education materials. Also look for previous conference presentations at collegecounseling.org/forum/ (ACCA members only).

- **Ideas of Awesomeness**: Looking for that next “awesome” idea to take your counseling center to the next level? Hoping to wow your boss with a new outreach idea for your center? Check out 10 of our best ideas at collegecounseling.org/members/ten-ideas-of-awesomeness (ACCA members only).

- **ACCanews**: Our new, online newsfeed for national counseling stories that you need to know about in order to stay current in the field. Visit at collegecounseling.org/accanews.

- **Having trouble accessing your ACCA username and password for the ACCA website, for the online forum or for receiving our mailing list server? Drop an email to sean.r.downer@gmail.com, and he will get you set up.**

WCA bestows 2011 awards

Submitted by Janet de Vries  
jdevries@caspercollege.edu

The Wyoming Counseling Association presented the following awards at its annual fall conference:

- **Julie Laib**, WCA treasurer, received the Outstanding Service Award. Laib has put in numerous hours planning and organizing our annual conference, in addition to keeping the books balanced and everything accountable. Laib works full time as an outpatient therapist for Northwest Wyoming Treatment Center in Cody, which provides residential and outpatient substance abuse treatment for adolescents, as well as outpatient treatment and education for adults.

- **Denise Lubken**, president of the Wyoming School Counselors Association, received the Richard R. Means Elementary/Middle School Counselor of the Year Award, which recognizes accomplishments at the K-9 level. She has held regional meetings around the state to assess the needs of school counselors and knows what the current issues are. Lubken puts much energy into encouraging new members to get involved. She is a dynamic counselor at Gillette’s Meadowlark Elementary School.

- The Matthew Shepard Foundation was recognized with the Garth Shanklin Exemplary Practices Award for its efforts in promoting mental health services in Wyoming. The Matthew Shepard Foundation was founded by Dennis and Judy Shepard in memory of their 21-year-old son, Matthew, who was murdered in an anti-gay hate crime in Wyoming in October 1998. The foundation seeks to “replace hate with understanding, compassion and acceptance” through its varied educational, outreach and advocacy programs and by continuing to tell Matthew’s story.

- **Fred Bradley**, professor in the Department of Special Education, Counseling and Student Affairs at Kansas State University, received the Distinguished Alumni Recognition. He had a distinguished 40-year career of teaching, research and service to his university and the counseling profession. Bradley is a graduate of the University of Wyoming counselor education program.

AMCD seeks applicants for Mentoring Program

Submitted by Kimberly N. Frazier  
kfrazier@clemson.edu

The Association for Multicultural Counseling and Development is accepting applications for the 2012 Mentoring Program. Graduate counseling students (master’s or doctoral level) are encouraged to apply. Selected applicants will receive free registration for the upcoming American Counseling Association Annual Conference & Expo in San Francisco and a ticket to the AMCD luncheon. Graduate students will serve as volunteers for the various AMCD-sponsored events at the conference. For consideration, applicants must be AMCD members by January, forward a letter of support from a current AMCD member and submit a research proposal (two-page limit) regarding an issue that mirrors the multicultural mission and goals of AMCD. Selected research proposals will be presented in a poster presentation at the Mentoring Program Research Symposium held at the annual Mentoring Program Meeting during the ACA Annual Conference. Applications are to include a cover sheet that includes full name, institutional affiliation and applicant status (master’s level or doctoral level). Graduate students...
must also submit a letter from their adviser verifying graduate student status. Application materials must be received by midnight (Pacific time) on Jan. 15. They should be sent to the chair of the AMCD Mentoring Program, Kimberly N. Frazier, via email at kfrazie@clemson.edu or via ground mail at the Eugene T. Moore School of Education, Counselor Education Department, 318 Tillman Hall, Clemson, SC, 29634.

ASGW announces highlights of 2012 National Conference
Submitted by Janice DeLucia-Waack jdelucia@buffalo.edu

The Association for Specialists in Group Work will host its biennial National Conference in Albuquerque, N.M., Feb. 9-12. The theme of the conference will be “Creating Cultures of Caring: Using Group Work to Heal Ourselves, Our Communities and the World.” On Thursday, 12 three-hour groups will be offered (at no extra charge). Sessions on Friday, Saturday and Sunday will consist of 60- and 90-minute experiential groups, skill-building sessions, conversation hours and discussion of cutting-edge research. The emphasis, based on the theme of the conference, will be on wellness, holistic practices, ecological interventions and multicultural and social justice groups.

ASGW announces highlights of 2012 National Conference
Submitted by Janice DeLucia-Waack jdelucia@buffalo.edu

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The site will be the newly renovated Sheraton Albuquerque Uptown Hotel. Lee Man Wah, community therapist and producer and director of several documentaries, including The Color of Fear, will be the keynote speaker in addition to conducting a workshop. His new film will also premiere at the conference. For more information and/or to register, visit asgw.org. Scholarships are available for students. ASGW members and conference presenters receive discounted registration. Early bird registration ends Jan. 6. •

Due to Counseling Today’s production schedule, please be advised of the updated deadlines for submitting items to “Division, Region & Branch News” for the following issues:

February issue: Thursday, Dec. 29 at 5 p.m. ET
March issue: Friday, Jan. 27 at 5 p.m. ET
April issue: Friday, Feb. 24 at 5 p.m. ET

Rudow. The article discusses the Building Blocks to Licensure Portability initiative and gives the perceptions of many of your colleagues who are serving on the 20/20 Commission. For those of you planning on attending the ACA Annual Conference & Expo in San Francisco, I hope you will consider participating in the presentation by Kurt Kraus, Brad Erford, Caroline Wilde and David Kaplan titled “20/20: A Vision for the Future of Counseling — The Building Blocks to Portability Project.” This session will focus on the possibilities of achieving licensure portability following the development of a common licensure title, a specific licensure scope of practice and common educational requirements necessary for licensure.

ASERVIC Conference June 3 & 4, 2012

Spirituality and Counseling

The Inn & Spa at Loretto, Santa Fe

Keynote: Motivational Interviewing’s William R. Miller

Proposal Deadline December 15, See ASERVIC.org
COMING EVENTS

International Symposium on Addictive Disorders, Behavioral Health and Mental Health
Jan. 29 - Feb. 1
Colorado Springs, Colo.
Psychotherapy Associates and Educational Supporters host this annual symposium featuring more than 40 training and educational sessions provided by a faculty of recognized professional clinicians. Diverse program presentations will address such topics as post-traumatic stress disorder, trauma, mood disorders, brief solution-focused therapy, psychopharmacology, cognitive behavior therapies, ethics, sexual disorders, eating disorders, evidence-based psychotherapy, residential/IOP treatment, self-help recovery, relapse prevention, family intervention and virtual/online counseling. CEUs (approved), CMEs (applied for) and exhibits are available. For more information, email addicteduc@aol.com or visit ggforrest.com.

ASGW National Convention
Feb. 9-12
Albuquerque, N.M.
The Association for Specialists in Group Work will host its 2012 National Convention at the Sheraton Albuquerque Uptown Hotel with a theme of “Creating Cultures of Caring: Using Group Work to Heal Ourselves, Our Communities and the World.” The keynote address will be given by Lee Mun Wah, an internationally renowned educator, community therapist, director of the film The Color of Fear and founder/CEO of StirFry Seminars and Consulting. We invite you to share your practice and related to the use of group work across topics such as wellness, holistic health, trauma, community building, disaster- and crisis-related work, multicultural and social justice issues, prevention and conflict mediation. CEUs will be available.

SCCA Annual Conference
Feb. 23-25
Myrtle Beach, S.C.
The South Carolina Counseling Association will host its 48th annual conference at the Marriott Resort at the Grand Dunes. Themed “South Carolina Counselors: Making the Connections,” the conference will be loaded with great workshops on numerous topics related to mental health. CEUs for workshop attendance will be available. For more information, visit sccounselor.org or contact Mary Jane Anderson-Wiley at manders9@aug.edu.

CCA Annual Conference
March 9-10
Englewood, Colo.
The Colorado Counseling Association will host its 2012 annual conference at the DoubleTree Hotel DTC on March 9 (preconference) and March 10 (conference). This year’s theme is “Imagine: Colorado Counselors Moving Forward, Looking Back.” Preconference workshops include a full day on private practice, a half day on psychopharmacology and a half day on Gestalt techniques. Our conference keynote speaker will be Jon Nachison, co-founder of the STAND DOWN for Homeless Veterans and Their Families, with a presentation titled “Stand Down: A Three-Day Marathon Treatment Program for a Thousand Homeless Veterans and Their Families.” To register online or for more information, visit the CCA website at coloradocounselingassociation.org.

ACA Annual Conference & Exposition
March 21-25
San Francisco
Register now for the largest conference in the world dedicated to the counseling profession. Celebrating its 60th year, the American Counseling Association 2012 Annual Conference & Expo will offer hundreds of peer-reviewed sessions, plenty of networking opportunities, engaging social events, tours of the city and a keynote speech by Irvin D. Yalom, with a book signing to follow. For more information or to register, visit counseling.org/conference or call 800.347.6647 ext. 222.

FYI

Call for submissions
The Wisconsin Counseling Journal (WCJ) is seeking article submissions for possible publication in the fall 2012 edition (WCJ is published annually). WCJ places emphasis on original, data-based research but will consider conceptual articles (for example, position papers, innovative program development, case studies). All manuscripts are subject to a peer-review process involving members of the editorial board. The 2008 edition of WCJ was awarded Best Journal-Small Branch by the American Counseling Association at its 2009 Annual Conference & Exposition in Charlotte, N.C. For submission guidelines, contact editor Mark Gillen at mark.gillen@uwrf.edu, or find detailed instructions at uwrf.edu/CSP/Wisconsin-Counseling-Journal.cfm.

Call for applicants
The Association for Humanistic Counseling invites applications for our Make a Difference Grant and nominations for our National Awards. The Make a Difference Grant provides $500 in funding for graduate research in counseling that will make a difference for persons in need. Additionally, AHIC National Awards include recognition for outstanding work by humanistic clinicians and supervisors, research and publication, advocacy and social justice, and other great leadership. So, nominate someone whose work you know deserves recognition, including yourself (don’t be too modest, dear humanist), and apply for the research funding available to support your project that will make a difference for persons in need. Visit AHIC’s website for details: afhc.camp9.org/. Contact awards cochairs Marianne Woodside (mwoodsid@utk.edu) and Jeff L. Cochran (jcochrr11@utk.edu) with additional questions.

Bulletin Board submission guidelines
Items for the Counseling Today Bulletin Board must be submitted to lbhallcross@counseling.org. Limit submissions to 125 words or less. The deadline for submissions is the first of the month at 5 p.m. ET for publication in the following month’s issue. If the first of the month falls on a Saturday or Sunday, the deadline is 5 p.m. ET on Friday. (Please note this special exception due to the winter holidays: The deadline for the February issue will be 5 p.m. ET on Thursday, Dec. 29.)
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EMPLOYMENT

NATIONAL

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.

We have opportunities for Counselors, Psychiatrists, Psychologists, Social Workers, Psychiatric Nurses nationwide. Visit us at www.VAcareers.va.gov to learn more or to apply. EOE/AA, M/D/F/V

**ALABAMA**

**TROY UNIVERSITY**

**Assistant Professor**

Counseling & Psychology - College of Education. Troy University is a comprehensive public institution serving more than 30,000 students worldwide - 4 campuses in Alabama, locations in 15 states, 12 foreign countries, and 1 U.S. territory.

Troy University is currently accepting applications for the following position: Assistant Professor - Counseling & Psychology - College of Education, Montgomery, AL.

The Assistant Professor of Counseling & Psychology position in the College of Education is primarily responsible for teaching specialized graduate and eCampus courses in school counseling and other counseling courses. This position also involves pursuing a scholarship and research agenda, serving on committees at all levels, involvement in service to the community, advising graduate students, and supervising Practicum and Internship students. Minimum Qualifications: 1. Must possess an earned doctorate in Counselor Education from a CACREP accredited program. 2. Must have experience as a school counselor and a primary identification with the profession of school counseling.

Please go to www.troyuniversityjobs.com for further details and information on how to apply.

Troy University is an EEO and AA employer.

**FLORIDA**

**ASBURY THEOLOGICAL SEMINARY**

**Director Of Training, Part-Time**

Asbury Theological Seminary seeks a part-time Director of Training on Orlando, FL campus. The Director of Training is responsible for coordinating and supervising all aspects of counseling practicum and internship, including Clinical Pastoral Education. Job qualifications: active counseling license with minimum of 5 years experience as licensed counselor, minimum of 1 year experience as a supervisor; D.Min, PsyD, EdD or PhD is encouraged. Application deadline: December 15, 2011. Start date for Director of Training is July 1, 2012. For further details see blogs.asburyseminary.edu/seminary-employment

**NEW JERSEY**

**THE COLLEGE OF NEW JERSEY (TCNJ)**

**Assistant Professor, Tenure-Track, Counselor Education**

The Department of Counselor Education at The College of New Jersey (TCNJ) invites applications for a tenure-track, assistant professor faculty position for the Fall of 2012. Applicants must have an earned doctorate in counselor education with expertise and experience in school counseling.

In addition to an earned doctorate, preferably from a CACREP-accrediting doctoral program, the successful candidate will have a solid research agenda, a proven record of excellence in counseling, and a record of successful teaching in the college classroom. Additionally, candidates should have, or be eligible for, school counselor certification and related professional counseling certifications and licenses in New Jersey.

Responsibilities will include: teaching, supervising, and advising students in our graduate programs, maintaining an active research agenda; and serving as a liaison between the department and state certification and licensure bodies.

Founded in 1855, TCNJ is a highly selective institution that has earned national recognition for its commitment to excellence. Emphasizing a residential experience for its nearly 6,000 undergraduates, TCNJ is one of Barron's 75 “Most Competitive” American colleges, and U.S. News & World Report's No. 1 public institution of its kind in the northern region of the country. The College also offered focused graduate programs in nursing, education and English. TCNJ was awarded, in 2006, a Phi Beta Kappa chapter - an honor shared by less than 10 percent of colleges and universities nationally. A strong liberal arts core forms the foundation for programs offered through TCNJ's seven schools - Arts & Communications; Business; Culture & Society; Education; Science; Nursing, Health, and Exercise Science; and Engineering. TCNJ faculty members are teacher-scholars who share a commitment to liberal learning. TCNJ is located within an hour, by train, of NYC and Philadelphia. The College's campus is set on 289 tree-lined acres in Ewing Township and is known for its natural beauty. TCNJ has 39 major buildings, including the 4th best college library in the nation, according to the Princeton Review.
The Department of Counselor Education, which consists of six full-time faculty members, has the first and longest running CACREP-accredited school counseling program in New Jersey, as well as programs in Clinical Mental Health Counseling and Marriage, Couples, and Family Counseling and Therapy. The department is proud of its faculty, who are acclaimed leaders and scholars in the profession, and its students, who are ranked 10th in the nation in terms of the total number of students who have been inducted into Chi Sigma Iota, The Counseling and Academic and Professional Honor Society International. For more information, please visit http://www.tcnj.edu/~educat/counselor/.

Contact Information: Mail cover letter, curriculum vitae, official transcripts, and three letters of recommendation to: Mark S. Woodford, Ph.D., Chairperson, Department of Counselor Education, 327 Forcina Hall, The College of New Jersey, Ewing, New Jersey, 08628-7718.

Electronic submission should be sent to woodford@tcnj.edu

The search will continue until the position is filled. For full consideration, applications should be received by December 1, 2011.

The College of New Jersey is an Equal Opportunity/Affirmative Action Employer. The College has a strong commitment to achieving diversity among faculty and staff, and strongly encourages women and members of underrepresented groups to apply.

MONMOUTH UNIVERSITY
Assistant Professor, School Counseling/Student Affairs & College Counseling

JOBS POSTING NUMBER: 0600681
DEPARTMENT: Ed Leadership, School Counseling and Special Ed, Full Time

JOBS DUTIES: Teach 9 credits per semester in school counseling and related areas (12 credits with a 3 credit course load reduction); Serve on University committees; Advise students (including student counseling association); Participate in Council on Accreditation of Counseling & Related Educational Programs (CACREP) accreditation process and maintenance; Coordinate and administer Counselor Preparation Comprehensive Examination (CPCE) testing; Teaching, advising,

ASSISTANT OR ASSOCIATE PROFESSOR
REHABILITATION COUNSELOR EDUCATION

Posting Number: 5196

The College of Education at Michigan State University (MSU) announces a position in the Office of Rehabilitation and Disability Studies, Department of Counseling, Educational Psychology, and Special Education. This tenure track position at the Assistant or Associate Professor rank will begin in August 2012.

The U.S. News & World Report annual ranking of graduate programs rated the MSU Rehabilitation Counseling programs (doctoral and masters levels) as one of the top programs in the nation for 2012. We are seeking a colleague to be part of our top-ranked programs who is committed to both research and practice that promote the enhanced quality of life of individuals with disabilities. We are interested in a colleague who shares our vision for stewardship of the rehabilitation counseling profession. Applications are invited from individuals with expertise in all areas of rehabilitation counseling, rehabilitation psychology, or related disciplines.

Responsibilities: (1) engagement in an active and productive program of research, (2) graduate teaching in both our CORE-accredited masters rehabilitation counseling and doctoral rehabilitation counselor education programs, (3) supervision of doctoral dissertations, (4) clinical supervision, and (5) participation in democratic governance and operation of our programs.

Qualifications: (1) earned doctorate in Rehabilitation Counselor Education, Rehabilitation Psychology or a closely related discipline, (2) commensurate with rank, a record of strong scholarly accomplishment through publication and success in obtaining and leading externally funded projects, (3) eligibility for CRC certification and licensure as a professional counselor (LPC) in Michigan, and (4) prior clinical experience as a rehabilitation counselor/rehabilitation psychologist working with individuals with disabilities.

The College of Education at Michigan State University offers an intellectually stimulating community for scholarship and provides resources to support faculty research initiatives. The Office of Rehabilitation and Disability Studies offers PhD in Rehabilitation Counseling Education and MA in Rehabilitation Counseling degrees. For more information visit our home page at: http://www.educ.msu.edu/cepse/rehab/

Interested candidates should apply to this position via the link at https://jobs.msu.edu. You will need to include a letter of application, curriculum vita, samples of publications, statement of teaching philosophy, and the names of three references. Review of applications will begin October 15, 2011 and will continue until the position is filled.

MSU’s College of Education is known for its innovative teacher preparation programs and nationally ranked graduate programs. The College is committed to the AAU/land Grant mission of the university and this mission is carried out through many research and outreach programs. The East Lansing community and surrounding areas offer affordable housing, easy commutes, excellent schools, a nationally acclaimed performing arts center, and a wide variety of recreational opportunities.

For more information contact: Dr. Michael Leahy, Director, Ph.D., Rehabilitation Counselor Education Program, leahym@msu.edu, 517-432-0605 or Dr. John Kosciulek, Director, M.A. Rehabilitation Counseling Program, jkosciul@msu.edu, 517-353-9443.

MSU is an Affirmative Action, Equal Opportunity Employer.
Counselor Education: Counseling and Student Services, Assistant Professor

The successful candidate will teach graduate level core courses in counseling and may have the opportunity to supervise students engaged in field practice and in research endeavors. Specific assignments are dependent on departmental needs and the background of the individual. Other responsibilities include working with faculty on program planning, evaluation, student advising, and accreditation. The successful candidate will be able to work with students, staff, and faculty of diverse ethnic and cultural perspectives, and have the opportunity to participate in scholarly collaboration with department faculty as well as with faculty across campus. Faculty members are also expected to engage in service activities at all levels of the university. An earned doctorate (Ph.D. or Ed.D.) in counselor education with an emphasis in counseling and student services or closely related field is required for appointment to a tenure track position, earning the degree from a CACREP accredited institution is preferred. Candidates nearing completion of the doctorate (ABD) may be considered. Please visit our website at [http://apprtrk.com/208924](http://apprtrk.com/208924) to view the full position announcement. For additional information on the University’s commitment to diversity visit: [www.csufresno.edu/diversity](http://www.csufresno.edu/diversity). Have application on file by December 15, 2011. Application to: Dr. Christopher Lucey, Chair, Search Committee, M/S ED3, California State University, Fresno, CA 93740-8025. E-mail: clucey@csufresno.edu.

California State University, Fresno is an Affirmative Action/Equal Opportunity Institution
Monmouth University is a dynamic, private university that empowers students to become leaders who are able to make significant contributions to their community and society. The Monmouth curriculum exemplifies academic excellence, featuring small class sizes that foster personalized attention. Located in a residential area, the campus sits moments from the shore and an hour from New York City and Philadelphia. While providing easy access to these locales, the University’s secure 156-acre campus serves as a home base for students. With fifty-six buildings providing the perfect synthesis of historical architecture and modern aesthetics, there is always something inspiring and dynamic to discover. Our school counseling program is CACREP accredited and we are currently seeking CACREP accreditation for our student affairs/college counseling program.

REQUIRED APPLICANT DOCUMENTS: Resume or Curriculum Vitae Cover Letter

CLOSING DATE FOR APPLICANTS: 12-01-2011 by 5:00 PM
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

MONTCLAIR STATE UNIVERSITY
Senior Tenure-Track Position

THE POSITION: The Counseling Program, Department of Counseling and Educational Leadership at MSU, is seeking an accomplished Counselor Educator for a senior tenure-track position at our vibrant and growing university. Participation in program, college and university committees and projects, teaching and mentoring doctoral students in the PhD in Counselor Education program, as well as students in our CACREP-accredited Master’s program. Dissertation advisement expected.

QUALIFICATIONS: Earned doctorate in Counselor Education, preferably from a CACREP – accredited program, advanced scholarship, and senior faculty experience required, to include chairing of dissertations. Proven ability to teach CACREP doctoral and MA courses; specialization or interest in research and assessment a plus. Active career participation with the American Counseling Association is expected; as is national visibility and commitment to social justice.

Send application letter, resume, and three letters of reference to: (include V number)
Dr. Tamara Lucas, CEHS Associate Dean, Montclair State University
BOX C316, V-F4
Montclair, NJ 07043

For information, contact Catherine Roland, Search Chair, at rolande@mail.montclair.edu Call 973-655-7184
Web www.montclair.edu

NEW YORK

HUNTER COLLEGE HIGH SCHOOL
Chairperson of Counseling

Department/Assistant Principal
The Hunter College Campus Schools, nationally celebrated K-12 public schools for intellectually gifted students governed by Hunter College of the City University of New York, has an opening for the Chairperson of its Counseling Department/Assistant Principal at the High School level.

RESPONSIBILITIES: Provides leadership for the Counseling Department of Hunter College High School; oversees all aspects of school counseling, including crisis intervention and college guidance; supervises and evaluates faculty; carries caseload of student counselors; plays an active role in school leadership as advisor to the Principal; serves as member of the Administrative Council.

MINIMUM QUALIFICATIONS: Master's degree, five years' teaching experience with a strong background in the subject area, and significant school leadership experience. Candidate must be eligible to receive NYS Certification as a School Administrator Supervisor (SAS) or School Building Leader (SBL) within four years of employment.

PREFERRED QUALIFICATIONS: Experience working with intellectually gifted students; a vision for leading a counseling department at a highly competitive college preparatory school; experience overseeing the college application process; experience working with in-school and outside learning specialists and mental health professionals.

For more information on compensation, benefits and how to apply, please see http://www.hchs.hunter.cuny.edu/index.php/help_wanted/ or http://hr.hunter.cuny.edu/jobs/hcijobs.html#4419

OHIO

JOHN CARROLL UNIVERSITY
Tenure-Track Faculty in Clinical Mental Health Counseling

DEPARTMENT OF EDUCATION & ALLIED STUDIES
The Department of Education and Allied Studies seeks applicants for an Assistant Professor in Clinical Mental Health Counseling. This is a tenure track position in a CACREP-accredited master’s program to begin August 2012.

REQUIRED QUALIFICATIONS:

Montgomery, AL
Assistant Professor - Counseling & Psychology - College of Education
The Assistant Professor of Counseling & Psychology position in the College of Education is primarily responsible for teaching specialized graduate and eCampus courses in school counseling and other counseling courses. This position also involves pursuing a scholarship and research agenda, serving on committees at all levels, involvement in service to the community, advising graduate students, and supervising Practicum and Internship students.
Minimum Qualifications: 1. Must possess an earned doctorate in Counselor Education from a CACREP accredited program. 2. Must have experience as a school counselor and a primary identification with the profession of school counseling.

Please go to www.troyuniversityjobs.com for further details and information on how to apply.

Troy University is an EEO and AA employer.
Earned doctorate in counselor education preferably from a CACREP accredited program; Valid license, or license eligible, as a Professional Clinical Counselor in Ohio; Interest and evidence of potential in research and publications in the field of Clinical Mental Health Counseling; Ability to teach graduate courses in Clinical Mental Health Counseling.

TO APPLY:
Applicants should send a letter of application, curriculum vitae, official copies of all university transcripts, copies of current professional licenses, a written statement concerning teaching philosophy/experience, statement concerning research agenda/experience, and three current letters of professional reference to the department chair. A more complete position description can be found at: http://sites.jcu.edu/facultypositions/home-page/college-of-arts-sciences/

Dr. Catherine Rosemary, Chair
Department of Education & Allied Studies

John Carroll University
20700 North Park Boulevard
University Hts, OH 44118

Search Committee Chairperson:
Dr. Cecile Brennan, cbrennan@jcu.edu
216-397-1987

Salary: Open, depending upon qualifications and background. Beginning Date: August, 2012 Deadline: Review begins December 15, 2011 and continues until position is filled.

John Carroll University is an Affirmative Action, Equal Opportunity Employer. The university is committed to diversity in the workplace and strongly encourages applications from women and minorities.

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**VIRGINIA**

**INOVA FAIRFAX HOSPITAL Therapist II**

Inova Health System employs more than 16,500 talented individuals who provide exceptional patient care in a practice environment which promotes team work and personal growth.

Expectations are high for the individuals we select, but the employment experience offers total compensation providing a competitive salary and a comprehensive benefits package including a variety of medical and dental plans, paid time off, on-site child care and a broad range of voluntary benefits and work life programs.

Inova Fairfax Hospital is seeking a Full-Time Therapist II for our Psych Partial Hospitalization Program.

Requirements:
Master's Degree in a Mental Health discipline
1 year of experience 2-4 years of experience preferred
Licensed LPC, LMFT or LCSW
CPR and First Aid certification eligible
Inova is an Equal Opportunity Employer. Apply to URL: https://careers1-inova.icims.com/jobs/16303/login
Alleged unprofessional conduct and inappropriate treatment – lead to a malpractice suit.

The client, a 51-year old woman uses her email correspondence with the counselor to mount a formidable legal case, suing for $500,000 in damages.

Read the details of this case study and how coverage through HPSO responded to protect our insured counselor at www.hpso.com/conduct1
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- AATBS Pass Guarantee*

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- Toll-free one-on-one assistance with licensed educational consultants

**NCMHCE MATERIALS PACKAGE INCLUDES:**
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