Working through grief
Counselors discuss the advances and acceptance of thanatology

BY ANGELA KENNEDY

Thanatology is the study of the effects of death and dying on humans, taking into account both psychological and social aspects. Thanatology also involves researching ways to lessen the suffering and address the needs of both the terminally ill and those they will eventually leave behind.

For the past 23 years, Barbara Harris Whitfield, who had her own near-death experience, has been working within the therapeutic specialty of death and dying. The author, workshop presenter and thanatologist maintains a private practice in Atlanta. Having studied with renowned grief expert Elisabeth Kübler-Ross, Whitfield believes grief therapy is still in the early stages of being explored, expanded and defined.

“Elisabeth Kübler-Ross suggests that when we are faced with death, or the death of a loved one, we experience five emotional stages,” Whitfield says. “Her stages were and are a good beginning foundation for learning about our relationship with griefing and our relationship with someone who is dying, including ourselves. My experiences, however, have led me to believe that it takes us a step further. I have learned that the best way to help is to stand back and be a witness — validate the feelings, problems,

Continued on page 38

Opening school doors to MFTs
Viewpoints vary on Connecticut’s decision to certify marriage and family therapists to work in school settings

BY ANGELA KENNEDY

For more than a decade, marriage and family therapists (MFTs) in Connecticut have advocated to be included as part of in-house student mental health services teams at schools. Last year, they achieved their goal when Connecticut quietly became the first state in the nation to pass legislation certifying MFTs to work in school settings. Counseling professionals on both sides of the debate view this action as a landmark change and believe it could have major implications on the future practice of school counseling.

Currently, the Connecticut State Board of Education is reviewing proposed regulations to provide standards and stipulations in order for MFTs to be certified. The regulation draft states that for an MFT to receive an initial educator certificate to serve as a school marriage and family therapist, the applicant must meet the following requirements:

- Be a licensed MFT
- Have a written request from the employing agent (school board)
- Hold a bachelor’s degree from an approved institution
- Hold a master’s degree in marriage and family therapy from an accredited institution (Commission on Accreditation for Marriage and Family Therapy Education)

Furthermore, applicants must have completed graduate course work in the following areas:

- Child and adolescent development
- Learning theories
- School-based systems theory
- Federal and state education laws (such as the Individuals with Disabilities Education Act and Family Educational Rights and Privacy Act)
- 300 hours of school-based marriage and family therapy practicum

After the State Board of Education declares its intent to adopt the regulations, the regulations will be sent to the Office of Policy and Management and the Governor’s Office for approval. After approval, notice of a 30-day comment period will be published in the

Continued on page 24
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Links shown between mental health status, treatment access

In late November, Mental Health America released “Ranking America’s Mental Health: An Analysis of Depression Across the States,” a first-of-its-kind study examining state and national data for statistical associations between access-to-care factors and actual health outcomes such as a state’s mental health status and suicide rate.

The study includes a ranking of the 50 states and the District of Columbia based on rates of depression and suicide. Hawaii, Illinois, Maryland and New Jersey ranked in the top 10 both for lowest depression and lowest suicide rates.

On the other side of the coin, West Virginia, Utah, Idaho, Nevada and Wyoming had suicide and depression rates that ranked among the worst in the country. Researchers blame the severity of depression and suicide rates on such factors as poor access to mental health care and a dearth of resources for distressed people.

For the complete rankings, visit www.mentalhealthamerica.net/go/state-ranking.

“It is important to note that regardless of where each state ranks on our mental health scale, there is much room for improvement,” said David Shern, president and chief executive officer of Mental Health America. “While a number of factors, including biology and environment, impact an individual’s mental health, this study shows that states can significantly improve their populations’ mental health status by adopting policies that expand access to mental health treatments.”

In the study, Mental Health America found statistically significant associations between the following factors and better depression status and lower suicide rates:

- Mental health resources. On average, the higher the number of psychiatrists, psychologists and social workers per capita in a state, the lower the suicide rate.
- Barriers to treatment. The lower the percentage of the population reporting they could not obtain health care because of costs, the lower the suicide rate and the better the state’s depression status. Likewise, the lower the percentage of the population reporting unmet mental health care needs, the better the state’s depression status.
- Mental health treatment utilization. The higher the percentage of the population receiving mental health treatment, the lower the suicide rate.
- Socioeconomic characteristics. The more educated the population and the greater the percentage with health insurance, the lower the suicide rate. The more educated the population, the better the state’s depression status.

In addition, the report found the more generous a state’s mental health parity coverage, the greater the number of people that received mental health services.

“The findings of this study underscore the critical need to monitor the mental health status of Americans by examining depression and the states’ policies that may impact it,” Shern said. “Through regular and ongoing measurement of key indicators of depression, we will be able to understand how state public policies impact a population’s depression level and suicide rate — and make adjustments to benefit the millions of Americans affected by depression.”

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| **Worst**                          |
| 1. Utah                            |
| 2. West Virginia                   |
| 3. Kentucky                        |
| 4. Rhode Island                    |
| 5. Nevada                          |
| 6. Oklahoma                        |
| 7. Idaho                           |
| 8. Missouri                        |
| 9. Ohio                            |
| 10. Wyoming                        |

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| **Worst**                         |
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| 3. New Mexico                     |
| 4. Montana                        |
| 5. Wyoming                        |
| 6. Idaho                          |
| 7. Utah                           |
| 8. Colorado                       |
| 9. Arizona                        |
| 10. West Virginia                 |

ACA IN ACTION

Conference features international flavor

The American Counseling Association has been working to connect and develop relationships with counseling associations in Asia. What began as little more than the collection of lists from counseling associations in the Pacific Rim has since evolved into opportunities for international counseling leaders to share their expertise with those attending the ACA Conference in Honolulu, March 26-30.

Four counseling associations from the Pacific Rim will be presenting Education Sessions at the conference. Chinese Guidance and Counseling Association President Chin-Yen Chen will talk about “Counseling Education and Practice in Taiwan.” Singapore Association for Counselling President David Clare Blakely will present “Becoming a Counselor in a Foreign Country From the Perspective of a Solution-Focused Therapist.” Association for Taiwan Play Therapy President Shuo-Chen Kao will discuss “Eastern Colors in Play: Toy, Play and Symbol in Asian Cultures.” The Philippine Guidance and Counseling Association is also slated to present an Education Session.

Representatives from the four Pacific Rim counseling associations will also participate in a discussion panel on “The Global Future of Professional Counseling: Collaboration for International Social Changes.” The panel will be moderated by Court-land Lee, a past president of ACA and current president of the International Association for Counseling.

For more information or to register for the ACA Conference & Expo, visit www.counseling.org/conference.

Keep the lines of communication open

It is important to ACA that we continue to keep the lines of communication open with our members so we can provide you with necessary resources, tools, products and services — all designed with you in mind.

For ACA to continue servicing member needs, we are requesting that you take a few moments to update your member profile by logging on to the members-only section of the ACA website at www.counseling.org. Enter your user name and password. After you are logged in, select “Manage your membership.” Next, select “Update your profile” and proceed to update your information.

If you do not know your user name and password, contact ACA Member Services at 800.347.6647 ext. 222 (Monday through Friday, 8 a.m.-7 p.m. Eastern) or e-mail membership@counseling.org. Likewise, please use the same contact information if you have any other questions, comments or concerns about your ACA membership.

Staying connected to you is how ACA stays connected to the counseling community. Thanks again for supporting your professional association.

Help clients stick to their goals

A large segment of the population heads into the new year with goals for improving their quality of life. Not surprisingly, many of those goals have fallen by the wayside mere months — or even weeks — later.

One of the keys to keeping New Year’s resolutions is not to go it alone, says ACA member Sue Waldman, a licensed professional counselor in private practice. She believes counselors are in prime position to offer clients the support they may otherwise be missing to reach their goals. Because the new year often inspires people to examine what they truly want in life, she recommends that counselors engage clients to set specific, meaningful and achievable goals for themselves. For advice from Waldman and others on helping clients not only set, but otherwise be missing to reach their goals. Because the new year

Today.aspx. ■
You do not know what is in the best interest of military personnel. They do. Fred W. Lockard III, LPC

You are absolutely right, Dr. Hayes. I do not understand how it is possible for a professor Stuart Chen-Hayes to say that he supports the troops and then follow that up with one of the most anti-service member tirades we have ever read coming from a mental health professional. How can he say that he supports the troops and then spend nearly an entire page degrading what they are fighting for?

We have both shown professor Hayes’ letter to current and reserve service members, and they agree that this is clearly an anti-troop rant despite introductory comments that say otherwise. It is of course OK for professor Hayes to voice his personal opinion about the war, and we are not trying to say otherwise or impinge upon any person’s right to freedom of speech. But to encourage and/or expect the American Counseling Association to make a political statement and support his personal political beliefs is, in our opinion, not in the best interest of ACA, individual counselors or the military members to whom we may provide therapy.

It is quite possible that if ACA were to take political stands such as this, the very people we intend to help — returning service members and their families — would view ACA and, thus, counselors in general as anti-war and anti-soldier. If this happens, you can be sure that our service members will not seek our counseling services when they are most needed.

We have our own, differing political views and opinions, yet we would never even think of asking ACA as a body to support our political agenda. Is that objective? Is that non-biased? If so, perhaps the professor will join us in asking ACA to speak out against such political activity? Is this type of political rhetoric in the best interest of counseling as a profession? We do not think so.

We would like to remind the professor that military service is completely voluntary and our brave young service members raise their right hands knowing they will probably go to war. Professor Hayes, please do not speak of what is in the best interest of military personnel when your personal beliefs are clearly against anything that they do.
While many would like to arguably deserving of attention. ment policies, along with many economic and energy develop- al rights and freedoms, sound and inequitable taxation, person- religious oppression, oppressive crime, poverty, racism, genocide, Nations and Aboriginal people, change.” The plight of First list of “things that need to least at the macro level. catalyst for societal change, at a group struggle with how counselors as a group can or should serve as a catalyst for societal change, at least at the macro level. Personally, I have a very long list of “things that need to change.” The plight of First Nations and Aboriginal people, crime, poverty, racism, genocide, religious oppression, oppressive and inequitable taxation, person- al rights and freedoms, sound economic and energy develop- ment policies, along with many other issues, are critically impor- tant to many and, therefore, arguably deserving of attention. While many would like to employ the prestige and resources of the American Counsel- ing Association to advocate for these and other issues, we need to tread cautiously, not for lack of desire, but for pragmatic reasons. Fundamental to this conversa- tion, which issues do we champi- on and which do we ignore? Given the diversity of opinion that exists within our profession, how do we collectively prioritize our efforts? Equally important, how do we ensure that all voices participate in such conversations, not just the ones that echo our own beliefs and priorities? Many issues present differing opinions and competing priorities. Open debate is healthy. However, demanding that everyone con- form to a single set of beliefs, devoid of overwhelming consen- sus or compelling factual evi- dence, goes beyond “political correctness” and into the realm of “intellectual fascism.” Current ACA policy holds that absent compelling evidence or a clear consensus among our members, ACA as an organiza- tion does not possess a legitimate mandate to advocate for any par- ticular position or course of action on issues not directly related to counselors and the counseling profession. ACA can take a position on a particular issue, but the standard for doing so is very high, and for good reason. Now before passionate advo- cates of particular causes react too harshly to what may be seen as a potentially restrictive and unresponsive policy, let’s consid- er what underlies this position. In its design, it is a principled poli- cy that values and protects the multiple perspectives and broad range of opinion within our membership. If our association takes a position on a particular issue (e.g., gun control, abortion rights, the Cuban embargo and so on), we invariably end up advocating against the personal beliefs of many of our members, thereby alienating them. With regard to political issues, the bar is even higher. As a non- profit corporation, ACA is pro- hibited by law from endorsing or opposing specific political candi- dates, or from engaging in politi- cal activities that fall outside the scope of issues related to profes- sional counseling. For example, ACA can legally lobby for third- party equity for counselors and professional practice issues, but it is illegal for us to lobby for or against the war in Iraq. However, as individuals, counselors can and, I hope, will engage in politi- cal and social advocacy efforts that promote and advance causes which they deem important. Of course, this entire conversa- tion is moot if we neglect the fundamental to this conversa- tion standards and universal professional licensing for coun- selors, to name a few. Fortunately, my concerns are far out- weighed by my optimism as a professional counselor. In the years to come, as we mature as a profession through research and scholarship, I believe we will be increas- ingly effective in address- ing a wide range of social, pro- fessional and organizational challenges. Given the many dedi- cated and talented people working in the counseling profession, it could not be otherwise.
Getting along: A good first step

Let me first wish all of you a Happy New Year as we begin 2008. I am hopeful for a year in which we can live in a peaceful world that continues to value the good work being done by millions of professional counselors, counselor educators and related human service providers.

While my wish for a peaceful world may seem monumental, I sometimes think that simply getting along is the basic step needed to move us all toward that endeavor.

Several years ago, this publication included information from a professional counselor who talked about the profession of marriage and family therapy. The viewpoint expressed in that article was that marriage and family therapy was not its own separate and distinct profession. However, the American Counseling Association leadership did not adopt that view as an official position of ACA.

Unfortunately, I believe some people who read the original article thought ACA had indeed endorsed the viewpoint that was expressed. I am here to tell you that the staff and I have researched this issue at length, and we have yet to find anything in our archives or official minutes to support the statement that ACA does not regard marriage and family therapy as its own separate profession. But let’s face it, once something becomes part of the “public domain,” anyone can say anything about an issue. While most already understand that ACA does indeed recognize marital/marriage and family therapy as a distinct profession, the association’s current leadership went to the extraordinary lengths of discussing this issue during the fall Governing Council meeting so everyone would be clear on where, exactly, ACA stands.

We can all agree much work remains to be done in helping the world’s children, adolescents, adults, couples and families. Regardless of what some public policymakers may think about the importance of meeting the mental health needs of our most vulnerable, the fact is that help is needed, and the proverbial “client pie” is large enough for all mental health professionals to actively provide services. Whether you are a mental health professional who works in a school setting, private practice, a community agency, a rehabilitation facility, higher education, a hospital, a religious institution or a business, you know that the need exists. You know that you and your professional colleagues always seem to have more to do.

I am sharing these thoughts with you in light of the need to end any interprofessional bickering so we can attend to the work at hand — namely, helping those who are facing life’s challenges. You and your colleagues from the sister professions may not always agree on a particular modality of therapy. You may not always agree on the best path of treatment. You may not even agree on how much to charge someone for your services. However, continuing to spread untrue statements that only serve to raise questions and innuendo seems somewhat pointless and divisive to me.

In 1992, the acquittal of the police officers who had beaten Rodney King sparked days of rioting in Los Angeles. As the riots continued, King emerged and made a public plea for peace, asking, “Can’t we all just get along?” Some people have since made a mockery of King’s brief statement, but perhaps his question rings as true today as it did back in 1992.

Regardless of how you identify yourself professionally — professional counselor, psychologist, social worker, marriage and family therapist — I want you to know how much I appreciate what you are doing for many millions of people throughout the world. My hope for a more peaceful world really does begin locally, and that means the work you do contributes greatly to our moving forward, one step at a time.

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

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Counselor deployed to scene of California wildfires recounts early recovery needs and techniques

I met my team members at headquarters at 4 a.m. so we could begin the 1.5-hour drive up the mountain for a briefing with local firefighters. On this day, residents of the Lake Arrowhead area of California would also be allowed up the mountain to see the sites where their homes had stood just the week prior. Since that time, the roads had been blocked off and guarded by police, as the California wildfires were still smoldering and the area was considered dangerous. I was here to serve as a disaster mental health counselor as part of the American Red Cross effort to aid victims of the wildfires.

The residents assembled at the local school and received passes to enter the area that had been ravaged by fire. American Red Cross volunteers were also in place, offering shovels, rakes, water, snacks, masks, gloves, sifters and psychological support. Also greeting many of the returning residents were piles of ash, from which rose metal pieces resembling prehistoric monsters. What was now rubble had once been their homes.

This is an account of the residents’ coping efforts in the first days after the wildfires, as well as my thoughts on the role that mental health counselors can play in aiding victims caught in the midst of devastation.

The early stages of coping

Heroism: Residents’ faces wore expressions of fear, confusion and shock. One lady proclaimed, “I cannot recognize anything. Not one thing!” Initially, most picked up sifters or shovels and attempted to look for some familiar item, only to find that the entire contents of their homes had been reduced to a fine gray ash. As I approached one former home-site, a woman was running her finger over the gold rim of a piece of china. She looked at me and said, “My gold china.” From her pocket, she pulled out the head of a small statue and a broken piece of the base for a Lladro figurine. She repeatedly exclaimed, “Oh, Mommy, I am so sorry!” She then told me this had been her favorite piece. One week before her mother’s death, her mother had allowed her to pick out the piece. She had chosen the figurine because it looked like her mother.

Our role as American Red Cross disaster mental health providers was to offer a compassionate presence. This was a time to be human, to offer hugs, to place a gentle hand on their backs, to provide a confirming statement of the enormity of their loss or simply to just stand and listen. We left traditional counseling back home in our offices. In fact, there was no need to tell the residents we were counselors at all. We carried Mickey Mouse stuffed animals to give to the children. Eventually, when American Red Cross workers wanted the assistance of a mental health provider, they would simply say, “We need Mickey.”

Overwhelmed and dazed: A driver of one of the emergency response vehicles told me he had just seen a couple at their homesite. The woman was raking through the ashes looking for any valuables she could find. “But he just kept looking for a chisel, a 98-cent chisel,” the driver said in amazement. “He just lost a home worth hundreds of thousands of dollars, and he just kept looking for a 98-cent chisel!”

Mental health providers can help the other volunteers and first responders better understand that victims’ seemingly irrational responses are actually normal reactions given the circumstances. We can also educate volunteers about helpful responses to the survivors’ reactions. Most of these volunteers are on the front lines, dispensing food and materials to victims. All volunteers could benefit from taking a psychological first aid course, which could be offered at the deployment site.

Honeymoon: The community came together in a time of pain, need and loss. A temporary meeting site was established in the parking lot of a small park at the base of the mountain where 199 homes were lost. Community members manned the tables, passing out information to their neighbors about the first steps to take in the aftermath of the fires. Cases of water, shovels, rakes, masks, gloves, eyedrops, snacks and friendly hugs were all made readily available. One afternoon, a case of beer even arrived from a fellow resident.

A woman and her son drove through the former homesteads offering homemade sandwiches to the workers and residents who were sifting through the burned out remains. Another lady stopped and asked where she could drop off clothing donations. Neighbors pitched in to help older residents dig through the ashes in hopes of finding items that somehow managed to survive the flames.

We worked hand-in-hand with the community, and they taught us what their needs were. Local responders and resources initially manage the situation until a disaster is elevated to a national level. Then the area becomes eligible for federal aid and other support services. When we respond at the national level, it is side-by-side with the local responders. It behooves us to follow the lead of the local experts concerning their community’s norms, values, traditions and socioeconomic characteristics. When all the volunteers and services are pulled out, the local responders are once again left with the needs of the community in their hands.

Anger: The National Orange Show Events Center was set up so those affected by the wildfires could meet with caseworkers and have their paperwork filled out and processed for eligibility of services. Being asked to produce verification of various aspects of their lives during such a difficult time made some people very angry. In one instance, caseworkers called me over because they felt threatened by a man who was yelling at them. They didn’t understand why he was so angry with them; they were only trying to secure
through that experience. At the service center, I was called over to see a woman who was crying. She and her husband were applying for aid. She told me they had lost everything in the 2003 fires and had just been getting back to normal. The latest fires had brought back all the bad memories. I helped them understand that it is normal for old traumas to return to the surface when experiencing a new loss. In these situations, mental health workers should offer compassionate understanding and acknowledge the magnitude and far-reaching effects of the current loss.

**The mental health provider’s role**

Traditional counseling and therapy stay home when you are deployed to a disaster site. What is needed above all is a compassionate presence. On site, I am Louise or “Mickey,” not Dr. Graham. In most instances, there’s no need for the people I’m helping to even know that I am in the mental health field. Survivors need to have someone hear their stories, acknowledge their pain and the extent of their loss, and display empathy. Sometimes silent listening, a hand on the back or a hug is what conveys caring best. At times, the mental health worker needs to just “be” rather than “do.”

During disaster response efforts, the roles of professionals and nonprofessionals often become blurred. Traditional counseling methods such as reflection, paraphrasing, silence and interpretation are helpful, but nontraditional methods are also indispensable. Performing outreach in the areas where supplies are being handed out is an effective method of establishing contact and initiating the helping relationship. Prior to Hurri-

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To show our gratitude for your recruitment efforts and support, for every new member you recruit, your name will be entered in a monthly drawing for $50.

You will also qualify to receive the following prizes to be awarded in April 2008:

Two (2) new members .......... One free book from ACA Catalog (your choice)
Five (5) new members .......... $50 ACA Bucks*
Ten (10) new members .......... $100 ACA Bucks* and free ACA logo polo shirt
Fifteen (15) or more new members .......... One year ACA membership fee, one full conference registration and $100 Gift Certificate to Amazon.com (a $500+ value!)

All recruiters who recruit five (5) or more members by March 15, 2008 are eligible for the grand prize drawing for a new laptop computer to be awarded in April 2008. All recruiters will receive national recognition on the ACA website, counseling.org, ACAnews and in the Counseling Today publication.

ACA Bucks can be redeemed on any ACA product, membership, or conference registration. (Membership in ACA must be in good standing to qualify for all prize drawings.)

Already pledged to recruit and need referrals in your area? Oftentimes we commit to a project, but find ourselves not knowing where to begin. Receiving referrals of non-members in your area from your source...ACA—is your starting point! For more information on referrals in your area, contact Denise Williams, Director of Member Programs at 800-347-0647, x303 or email dwilliams@counseling.org.

Visit counseling.org/ROAR for more information, rules, updates and ideas on how to recruit new members.

Thank you for supporting your counseling association—ACA!
Contestation still surrounds education, other federal spending levels

Congress returned Dec. 4 from the Thanksgiving recess to a full plate of legislation, including 11 unfinished annual spending bills for the new fiscal year that began Oct. 1, 2007, and a continuing resolution, set to expire Dec. 14, that was funding the federal government. The process is moving toward a head-to-head showdown between Congress and President George W. Bush, who has already vetoed one spending bill and has vowed to veto others if they exceed his budget request. With time ticking away, Congress was working toward a bill before the end of January. The president's Fiscal Year 2008 budget for programs under the departments of Labor, Health and Human Services, and Education was $4 billion below the previous year's spending level.

At press time, members of Congress were working toward a potential compromise on the 11 remaining appropriations bills covering 15 Cabinet departments and other agencies, possibly resulting in $11 billion less in spending than congressional leaders originally wanted. The new Labor-Health and Human Services-Education spending bill that House and Senate appropriators are crafting would split the difference between the amount initially approved by Congress and the amount recommended by the president.

Funding for education programs would total roughly $59.2 billion, which is $1.5 billion below the original bill. Consequently, programs slated to receive increases, such as the Elementary and Secondary School Counseling Program ($50.75 million), Pell Grants, special education and other No Child Left Behind Act programs, would likely see those increases all but disappear.

With time ticking away, Congress may be left with very few options, which include acceding to the president's spending cut, passing another continuing resolution that would last until February to provide more time for work or passing a yearlong resolution to freeze spending at current levels.

Discussions about parity legislation go down to the wire

At press time, congressional leaders were still discussing legislation that would require most private health care plans to cover treatments for mental and addictive disorders. House and Senate leaders were attempting to reach agreement not only on policy differences in the respective chambers' versions of the legislation, but also on how (or whether) to pay for the legislation's expected cost to the federal government.

The American Counseling Association and other advocates for mental health and addictive disorder parity legislation were pushing for Congress to pass a bill before the end of 2007 to avoid the risk of the issue becoming bogged down in election politics in 2008. ACA helped sponsor a toll-free phone line used by advocates on Dec. 7 to call their members of Congress and ask for passage of parity legislation. ACA also joined with the American Mental Health Counselors Association and more than 135 other organizations in signing a letter to House Speaker Nancy Pelosi and Senate Majority Leader Harry Reid asking for swift passage of a strong parity bill.

For more information on this issue, contact Scott Barstow with ACA's public policy office by calling 800.347.6647 ext. 234 or sending an e-mail to sbarstow@counseling.org.

Draft language released to reauthorize SAMHSA

On Nov. 30, the Senate Health, Education, Labor and Pensions (HELP) Committee released draft language to reauthorize the Substance Abuse and Mental Health Services Administration. SAMHSA is long overdue for restructuring, having last been authorized in 2000. The Senate's draft legislation would eliminate several dormant programs. The American Counseling Association is working alongside the American Mental Health Counselors Association to gain adoption of language within the legislation to more fully recognize licensed professional counselors as mental health providers. ACA is also hoping the legislation can be improved in other areas. One contentious issue is taxpayer funding of substance abuse treatment by sectarian religious organizations. Already occurring under current law, the draft SAMHSA reauthorization bill would extend and broaden authorization of faith-based treatment programs and allow grant recipients to discriminate in their hiring of substance abuse counselors on the basis of counselors' religious beliefs and practices.

On another front, the legislation includes language regarding the provision of mental health services in schools. ACA's public policy office is concerned that this section of the bill does not adequately focus on the role and contributions of school counselors and other school-employed professionals in responding to the mental health needs of students. We shared suggestions with the committee for improving this language earlier in the year, but the suggestions were not adopted.

The Senate HELP Committee has tentatively scheduled its markup of the reauthorization for the end of January. The House of Representatives is also expected to begin taking up the issue at that time. ■

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Counselors who enter the profession later in life offer unique assets and generally say they find satisfaction in their roles

**BY JIM PATERSON**

The accepted thinking is that age brings wisdom. And there appears to be a trend toward testing that notion in the counseling profession, where the attributes of aging might be very useful indeed. Several graduate counseling programs around the nation have reported increasing numbers of people over the age of 50 (and even into their 70s) enrolling because of long-held interest or a desire to “give back.”

“I think these folks are substantially different from our usual midlife students,” says American Counseling Association member Mary Guindon, chair of the Johns Hopkins Department of Counseling and Human Services, where six students in the graduate counseling program are 60 or older. “They’re reaching an age that would be a traditional retirement age, but they do not see themselves among those who want to retire from the world of work. They don’t see themselves as old.”

Guindon and others believe these older adults are good for the profession. “They bring wisdom, experience, calmness and developmental advantages,” says Dale-Elizabeth Pehrsson, a professor of counselor education at the University of Nevada-Las Vegas and the Association for Counselor Education and Supervision’s representative to the ACA Governing Council. “Older counselors have ready-made connections and have an empathic understanding of life’s passages.”

**Years pay off**

Dan Northam, who joined the counseling program at the University of Nebraska when he was 57, thinks he is able to relate to a “broader spectrum of client life experiences and to do so more quickly, at the same time bringing to the table a larger repertoire of options for the client to consider.” A Vietnam veteran who spent more than 20 years in medical sales, Northam says his broad life experience allows him to better understand, evaluate and apply counseling theory, as well as more easily see the patterns that are influencing the lives of others.

“I think we have patience and a willingness to accept that there are valid reasons for people acting the way they do,” says ACA member Janie Powers, 60, who will receive her master’s degree in clinical counseling from Johns Hopkins. She works as a mediator in a busy suburban Washington, D.C., area circuit court for child custody and access cases.

“We have a bit of wisdom that is useful in this field. We’ve seen it all before. We are more likely to consider all aspects of someone’s story and life, and that is valuable in counseling,” Powers says, noting that her experience pays off as she works with adults in troubled relationships or families with young children.

“I am a mother and a grandmother,” says Nancy Scott, 66, a graduate of the Western Carolina University counseling program, “and I taught in public elementary, middle and high schools for 30 years. And, yes, I’ve learned a lot about human nature.” Scott attributes that not only to her personal life experiences, but also to the witnessing of important historical and cultural movements. For example, says the ACA member, living through the changes and resulting tensions related to the civil rights and women’s rights movements perhaps allows her to approach counseling with a broader perspective and a greater appreciation for the value of diversity than those who have only read about those events in textbooks.

Another ACA member, Margo Smith, enrolled in the Johns Hopkins counseling program after a wide-ranging career that included time spent as a homemaker. She says older students have “experienced life’s ups and downs. … This enables us, perhaps, to be more empathetic and also instinctively know about how to help a client.” Clients often have issues with their parents, she notes, and “having the warm ear of an older adult can help substitute a bit for what they have been missing. … Having been through all this permits me to understand and really feel much of the angst of my clients.”

Others believe that the true value of counseling becomes clearer with age. Stephen Burton, 54, was a technology expert, but went back to Western Carolina University to earn a graduate degree in school counseling. While he had studied psychology as an undergraduate, he says the subject seemed abstract and impractical to him at the time. His life experience has since changed that viewpoint, however.

“As an older person, the study of psychology and counseling theory made more sense, having met so many different kinds of people in the course of my personal life and career,” says Burton, a member of ACA and the American School Counselor Association. “We can support clients through (their) twists and turns by communicating...
with a certain confidence and credibility that life can, in fact, be lived well.”

“A person with more life experience will almost inevitably bring higher levels of motivation to counseling,” confirms ACA member Geoffrey Yager, a professor in the counseling program at the University of Cincinnati.

Learned perspective

Counselors who enter the profession in their later years can offer valuable perspective because they have passed through various stages of life and, in many instances, have guided their children through the same stages. And, as Pehrsson points out, senior counselors often have experience with grief and death that may benefit clients.

Margot Vance-Borland, 57, completing her master’s degree in counseling at Oregon State University, provides two examples in which she believes her maturity paid off. In the first instance, she urged a couple with a good but troubled relationship to recognize that even the best relationships require a lot of work. In the second instance, she counseled a 24-year-old woman to be patient with her career decisions. “We (senior counselors) perhaps have more experience and objectivity,” she says.

Despite possessing those attributes, Scott admits she still needed to learn some basic counseling skills, such as avoiding the urge to offer clients too much of her experience or trying too hard to “fix everything” for them. Those may be common tendencies for older counselors who think they hold many of life’s solutions. “I had to learn to allow clients to discover and uncover their own solutions,” Scott says. “That isn’t easy when you are pretty sure you know exactly what they should do.”

Northam and other older adult counselors also admit that they initially felt awkward going back to school or beginning their first jobs as counselors. “The only difficulty I encountered was in finding myself alone in a different culture,” Northam says. “Most of my classmates were 35 years younger than I, and 95 percent of them were females.” Over time, however, those boundaries seemed to disappear, he says.

Pehrsson believes some discrimination exists against older counseling students, especially those that are outspoken, but otherwise, she sees few hurdles for older adults who choose counseling as a career path. In her experience as a counselor educator, older students generally work hard, enjoy school and fit in with classmates almost seamlessly. And generally, she says, these students have little difficulty securing jobs.

Older counseling students say they have no more difficulty with changes in the culture or new ways of thinking than their younger peers. They admit, however, that clients sometimes make assumptions based on appearance. “I think that gray hair — or, in my case, white — lends itself, initially, to enhanced trust from the client,” Northam says.

So while these older students have much to offer to the profession, counseling also seems to be a good fit for them. “I see a number of students over 50 who come into counseling programs because they are looking for more satisfaction in their work. Developmentally, it is a time when people want to make their work congruent with who they are,” says Luellen Ramey, chair of the counseling department at Oakland University in Rochester, Mich. Oakland’s counseling program has 10 students over the age of 55 and five who are older than 60, including one who is 70. “It seems that self-actualization needs play a big part in them becoming students in counseling,” says Ramey, a member of the American Counseling Association.

Doing their share

“Giving back” is one key reason these students cite for choosing counseling as a later-in-life career, says Carolyn Greer, president of the Association for Adult Development and Aging, a division of ACA. She believes that older adults entering the field is a definite trend — one that is beneficial to both the new counselors and their clients.

“I am at a point in my life when it has become important to make a contribution to society,” Burton concurs. “Counseling is a good fit in terms of giving back because it lends itself to sharing our life experience.”

Vance-Borland, a former teacher and massage therapist, says, “The meaningfulness of the work is what is most gratifying about it. Seeing the powerful transformative potential from working deeply with clients’ core issues. Making the world a better place. Doing good in the world. Those are the things that drew me to this.”

Others say they were simply seeking satisfaction in their work or had long felt they would like to try counseling as a career, and this was the time in their life that seemed to offer the best opportunity. Others pointed to the fact that, as a group, seniors are living healthier, longer lives. They looked at their options and decided that counseling was a profession in which they could still make a substantial contribution.

“Developmentally, an older person may well be in an ideal place to give back,” Yager says. “Being the focus of attention may no longer be of great importance, and, as a result, the older counselor may naturally fit into the role of listener, facilitator and helper.”

Guindon agrees. “These folks are not your typical late middle age or early late-life people. Self-fulfillment for them comes through the love of learning and being able to finally learn in an area closely related to their more altruistic, generative selves. It is more than volunteering, because it has to do with legitimizing a new way of being in the world. They have a special love of learning for its own sake.”

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Interviews with the authors of books for counseling professionals

More Than a Job! Helping Your Teenagers Find Success and Satisfaction in Their Future Careers by Richard T. Lapan

Meaningful communication between parents and their teenagers is often difficult, but as most parents are aware, it is absolutely essential at various times, especially when it comes to helping teenagers make important decisions about their education and future career.

More Than a Job! Helping Your Teenagers Find Success and Satisfaction in Their Future Careers is not about helping your teenager make the “right” career choice. Rather, it is a practical manual for getting teens engaged in exploring career and educational directions that can increase their chances of future success and happiness.

Richard T. Lapan is a professor and chair of the Department of Student Development and Pupil Personnel Services at the University of Massachusetts Amherst. He also has extensive experience counseling children, adolescents and adults in a variety of school, hospital and community settings. His work in helping transform school counseling from a support service to a comprehensive program central to the academic and social missions of every school earned him the prestigious Counselor Educator of the Year award in 2006 from the American School Counselor Association.

Counseling Today: Considering how remote and uncommunicative many teens can be, why should parents believe it will be possible to get teens involved in career planning?

Richard Lapan: Studies have found that not only are teens nervous about what their futures will hold — a very natural reaction — but they are also eager for help in sorting out that future. While most teens are not going to voluntarily come to their parents and ask for help in exploring career and educational possibilities, they really do want, and need, our assistance. That’s why we’ve structured this book as a means of giving parents a way to get their teenager engaged and truly interested in exploring career possibilities.

CT: So this really is a how-to manual for parents to use in helping get their teens involved in thinking about their future.

RL: I wouldn’t call it “how-to,” but it is a very interactive approach to that goal of career exploration. What we’ve tried to provide is an easy-to-follow, step-by-step plan to help adults and teens work together in exploring and evaluating future educational and career goals. I also want to emphasize that this book is not written only for adolescents and isn’t the point of the book. Rather, it is a means of giving parents a way to get their teenager engaged and truly interested in exploring career possibilities.

CT: What is this book offering parents that they couldn’t do on their own to get a teen to look at future possibilities?

RL: While there is no magic cure for anything here, but there is a solid plan and structure that we know works in helping teenagers and their parents work together. We begin, for example, by emphasizing positive ways to talk with teenagers and get them engaged. We’ve developed the TEAM (Targets, Examples, Assessments, Mutual Actions) approach that gets both the parents and the teens actively involved in completing exercises that not only promote career exploration through behavioral targets and goal formation, but also help build a trusting and caring relationship between teenagers and adults.

Our goal is for this to be a workbook that moves career exploration for a teen from simply thinking or wishing that some future goal would be “cool” to actively exploring real and appropriate possibilities, as well as undertaking meaningful evaluations of educational and career opportunities.

More Than a Job! Helping Your Teenagers Find Success and Satisfaction in Their Future Careers can be ordered directly from the American Counseling Association (Order #72863). The book is available to ACA members for $18.95 and to nonmembers for $24.95. Order at the ACA online bookstore (www.counseling.org) or by calling the ACA order line at 800.422.2648 ext. 222.

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

Letters to the editor: ct@counseling.org
Teaching and learning about sexuality counseling in Taiwan

In August 2005, Counseling Today published an article on same-gender parents raising children, and my family was one of three featured in the story. I made an offhand remark in the article about how my family would be traveling for two weeks in Taiwan in late 2005 and early 2006. American Counseling Association member Ta-Wei Wang, a doctoral student in counseling at National Changhua University of Education (NCUE) in Changhua, Taiwan, read the article online and e-mailed me, asking if I would do a guest lecture at the university during my trip. I agreed, and my partner, pediatric physical therapist Lance Chen-Hayes, provided translation in Mandarin.

After the lecture, I inquired about the possibility of collaborating further with the department chair at that time, Shuchu Chao. She was excited about the possibility, and we worked to apply for a Taiwanese National Science Foundation grant. I also applied for a sabbatical from my employer, Lehman College of the City University of New York. The grant was officially approved by NCUE in late 2006, and my sabbatical began following the Lunar New Year celebrations in 2007.

In addition to working at NCUE, the other main motivation for traveling to Taiwan was to allow Lance and my son to spend six months in intensive Mandarin immersion at a preschool located near the home of our son’s grandparents in Taichung. Because of the rapidly deteriorating health of our son’s grandfather, we arrived two weeks early. Rushed to the hospital just before we flew out from the United States, he remained hospitalized for three weeks, but ultimately returned home in better health. We were thankful for national health care in Taiwan and saw the benefits of such a system for all involved. (Imagine going to the doctor for the free and paying only a couple of dollars for medications.)

Balancing worldviews

My teaching assignment included one master’s-level sexuality counseling course and one doctoral-level sexuality counseling course, neither of which had ever been offered in graduate counseling programs in Taiwan. Dr. Chao encouraged my teaching of sexuality counseling — she cofounded a center for gender and family counseling at NCUE, including the first marriage and family counseling program and institute in Taiwan. I also was asked to give several lectures on professional counselor education identity for school and community counselors, using national school counseling standards and program models in Taiwan, unveiling oppression, and counseling same-gender couples and same-gender-parented families.

My first thought was that I didn’t want to impose my White, European-American worldview on Taiwanese students whose ethnicities were primarily Chinese or Aboriginal and who held East Asian or indigenous worldviews. Many of the students were hesitant to take my classes because they perceived their English skills as being poor (compared with my Mandarin skills, their English was outstanding). We decided the doctoral students’ English was more advanced, and my partner Lance volunteered to translate the master’s-level class. Sexuality counseling has a powerful emotional learning component best experienced in one’s original language. The students were thrilled that they didn’t need to translate for each other or stop the class every few minutes to converse in Mandarin and clarify what I had just said in English.

In both classes, we studied not only sexuality, but the critical concepts of oppression and worldview. Students readily shared multiple personal and professional experiences as they related to multiple types of oppression (ableism, ageism, beautyism, classism, familyism, genderism, heterosexism, racism, religiosity and sexism in particular).

The students also discussed the challenges Taiwanese face in balancing modern and traditional worldviews. For example, while many younger Taiwanese are very progressive politically and intellectually, when it comes to sexual orientation, fears about how their families will react continue to keep most individuals in the closet. It is often easier for them to come out when they become partnered than when they are single because they have evidence of someone being in their life who will care for them long term. Another major area of interest was how to discuss a variety of hot-button sexuality issues in school counseling lesson plans and in community agency workshops. We discussed at length the Sexuality Information and Education Council of the United States’ Guidelines for Comprehensive Sexuality Education K-12 and how they could be useful in Taiwan. We spent significant time on readings from Larry Burlew and David Capuzzi’s Sexuality Counseling textbook, as well as an undergraduate healthy sexuality textbook and...
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It's difficult to think of the counseling profession without giving some credit to Sigmund Freud. Members of the very profession he invented, however, ended up rejecting most of his conclusions, which initially held great appeal.

Understanding what happened to Freud's ideas may restore some of the credit he deserves; it may also help counselors discover something about their own work. Freud's ideas are embedded in the culture of counseling, yet these ideas are often difficult to recognize because they have been relegated to some unconscious part of most counselors' minds. That is, until you ask counselors about these ideas. Then, they become aware.

Counselors trained in the last several decades know little about Freud. What they do know is often based on the opinions of others and is likely to be distorted or negative. Counselors know that Freud was the founder of the first helping professional approach, but deny that his ideas ever influence their work, even though most have not read a single one of his papers.

And why should counselors care to know about Freud? Scientists have held that his discoveries are not testable. Feminists have shown him to be an incorrigible misogynist. His therapeutic method, the talking cure, has been declared obsolete, often replaced by miracle drugs and therapies of minimal duration.

Yet, in spite of the zealous attempts of critics of psychoanalysis to banish Freudian ideas, many counselors still have these ideas within themselves — even if they're not necessarily aware of them. Presented with the question of whether Freud's conclusions still influence their work, some counselors were surprised at their own reactions. Andrea Macari, trained as a behaviorist, is a professor at an East Coast college. She purports to have rejected Freud's ideas entirely, but admits, "I am still drawn to him, and I didn't even know it. In fact, just a month ago, I traveled to England to visit the Freud Museum. I literally had a physiological reaction when I stepped into his office and saw the couch. It was such a moving moment for me! While his theories are not empirically validated, there is no denying that Freud was influential in establishing talk therapy."

Julienne Derichs, a licensed clinical professional counselor who manages a busy private practice in the Chicago suburbs, says, "Do I ever think about Freud during a session? Of course not! But when you asked me, I realized that I wouldn't be doing what I am doing if it wasn't for him."

Is Freud dead or alive?

A gifted neurologist and a prolific writer, Freud's body of work is long, complex and contradictory. He changed his mind often and continued to develop his theories through a process of inquiry and discovery that lasted for more than 50 years, ending only with his death in 1939. At that point, both his followers and detractors went to work "interpreting" what he had said. In the United States, "The psychiatric orthodoxy (Freud's initial followers) made a prophet out of Freud," says Ronald Rosenthal, a private practitioner, "and turned his ideas into commandments."

Theorists have often declared Freudian theory dead and, in proposing a rival one, found it necessary to attack Freud with an "interesting anxious vehemence," as Freud biographer Peter Gay points out. Freud continues to be "the man to beat." But what if we discovered that Freud was not so wrong after all?

In May 2006, Scientific American Mind published "Freud Returns," an article by neuroscientist and psychoanalyst Mark Solms, who contended that Freud's theories are enjoying a rebirth. In "The Secret Mind," a U.S. News & World Report article published in February 2005, the authors concluded that the unconscious really does shape people's decisions. And in March 2006, the
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several textbooks on how parents, guardians and counselors can best discuss sexuality with children and adolescents. Among the books we used was Justin Richardson and Mark Schuster’s Everything You Never Wanted Your Kids to Know About Sex (But Were Afraid They’d Ask).

Like their peers in the United States, the Taiwanese students found certain topics particularly challenging to address, both in their professional settings and in their own families: issues related to masturbation, sexual orientation, gender identity/ expression, abortion, HIV/AIDS, prevention and counseling with sexual assault survivors and perpetrators, counseling sex workers and talking effectively to children and adolescents about sexuality.

When I took my first sexuality counseling course as a master’s student at Indiana University in the mid-1980s with the late Alan Bell, former research psychologist for the Kinsey Institute, the panels of guest speakers provided the most powerful learning experiences. Research has shown that sexuality education and counseling often become the most salient when guest speakers are part of the classroom experience. When teaching the sexuality counseling course in the United States, I usually use large numbers of guest speakers. While lecturing in Taiwan, I substituted role plays and websites or simply “sat in” for the guest speakers. This approach worked well enough, but more Taiwanese-based guest speakers would have brought home these issues even more so.

As a gay man living temporarily in Taiwan, I found it refreshing to see how little physical violence is directed toward gay people in the Chinese culture. When I think about the need for gay people to always be wary of potential harm in the United States and many other parts of the globe, spending almost six months away from that atmosphere offered a taste of relief.

Opening a dialogue

An important part of the trip for me was learning about the history of counseling in Taiwan and how to increase the presence of counselor education identity and the Council for Accreditation of Counseling and Related Educational Programs, especially for school counseling. Counselor education has not enjoyed much visibility in Taiwan. Psychotherapy is the primary undergraduate training for most counselors in Taiwan, and only a few U.S.-trained counselor educators are employed at graduate schools there.

A few years ago, Taiwan began to offer counselors a counseling psychology license at the master’s and doctoral levels. In talking with Taiwanese students and faculty, I learned that the nation has a large college counseling contingent with an identity and practice similar to that found in the United States. Taiwan also has a substantial community counseling community whose graduates tend to work in nonprofit and nongovernmental organizations.

Most interesting was the status of school counseling. I spoke in depth with Chin-Yen Chen, president of the Chinese Counseling Association, who shared that Taiwan has several thousand school counselors. But unlike the United States, most of these counselors are in the elementary grades and have the title “guidance teacher.” Few at the elementary level have degrees in school counseling; most, in fact, do little counseling. More of the “guidance teachers” working at the middle and high school levels have school counseling degrees. Our discussions centered on moving toward a school counseling identity for all three grade levels and pushing for full-time positions for school counselors, including use of the term “school counselor” as a certification title for persons who have completed a master’s degree in school counseling.

Currently, most school counselors in Taiwan teach regular curriculum subjects for at least half of their jobs in middle and high schools; at the elementary level, this makes up almost all of their work. So, much like the history of school counseling in the United States, Taiwan struggles with identity and role issues and making the best use of school counselors’ time. I encouraged Taiwanese counselors and counselor educators to move toward a school counseling program-based model. I also discussed the use of the American School Counselor Association standards and school counseling program model in the United States and how Taiwan might adapt one or both of those to ensure high school graduation and college/career access and equity for every Taiwanese student.

Taiwan has some unique equity issues. For example, there is no compulsory kindergarten and no compulsory education past the ninth grade. Legislation is pending to move toward compulsory high school through 12th grade for all students, but currently, a substantial segment of Taiwanese students do not finish high school. In addition, high-stakes testing determines career paths. Where students place on national college exams determines where and what they will be able to study. Although students work hard and study constantly, they are not guaranteed a place in a college that fits their interests or preferred career paths. This is an issue of equity and fairness that could benefit from lots of advocacy over time.

Taiwanese students were stunned at the data on achievement, opportunity, funding and attainment gaps in the United States, and they had creative ideas for lessening those gaps. My hope is that NCUE, the City University of New York, other Taiwan and U.S.-based counselor education programs, the Chinese Counseling Association and ACA, ASCA and the Association for Counselor Education and Supervision will partner over time to promote collaboration between our students and faculty.

Stuart Chen-Hayes is associate professor of counselor education at Lehman College of the City University of New York. Contact him at stuart.chen-hayes@lehman.cuny.edu.

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1. The most overwhelming lesson Winfield learned in doing her gene testing process is that there are feelings within line that a. are not present and alleviate herself. b. are stronger than her will to control them. c. are beyond her hold five stages. d. take extraordinary courage to face.
2. According to Leibman and Rapp, practical matters don't affect a person's grief process as much as their personality traits. a. True b. False
3. After the fires a. The disaster mental health counselors identified themselves as counselors when they approached the residents. b. False
4. Being asked to produce verification of various aspects of their lives during such a difficult time made more people a. refer to all that may have been available to them. b. feel useful, even distrait. c. very angry. d. all of the above
5. "Better late than never" a. According to Geoffrey Yager, a person with more life experience will almost inevitably bring higher levels of "to counseling" b. objectivity c. understanding d. introspection
6. Older counseling students may say the phrase "difficulty with changes in culture or a new way of thinking than their younger peers." a. more b. a little more c. no more d. in many cases, less
7. "Private Practice in Counseling" a. A good benchmark is to maintain records five years for adults after treatment or the doing of a session. b. five. c. seven d. eight e. ten
8. Blue Cross Blue Shield's evaluation of its reimbursement policy by 60 to 75 cents likely signals the beginning of a trend a. True b. False
9. "Student Focus" a. In reading to the student realized the need for a blend of the elements that had attracted her to the counseling profession in the first place b. select ambiguity c. sense of clients d. trust the process e. not right
10. "Behind the Book" a. The strategies in the TCP approach are designed to do all of the following EXCEPT: b. get both parents and teens actively involved c. promote career exploration through behavioral targets and goal formation d. help build a training and caring relationship between teachers and adults e. stimulate creative problem-solving for all participants

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might think, even though the American Red Cross assigns mental health volunteers to help its other disaster response volunteers to debrief. Disaster response volunteers are thrust back into their normal day-to-day world, but they still have one foot firmly planted at the disaster site. A piece of your heart remains behind with the many people whose sorrow you shared, and intrusive thoughts tend to pop up even as you attempt to tackle your daily demands. Did that lady ever find her wedding ring in the debris? Did the elderly lady recover the cast iron pan her deceased mother had given her? Be prepared to feel a bit dissociated from your normal daily routines, even as you resume your professional and family responsibilities.

I

Another lesson I’ve learned is to never make a promise unless you are 100 percent positive you can deliver on it. In one instance, I started to respond to a resident, “Tomorrow I will …” I caught myself and instead said, “I never know where they will send me tomorrow, but if I am back here I will …” While a counselor’s official function as part of the disaster response team is to provide mental health support, you’re just as likely to find yourself helping to unload a truck of supplies or handing out water and snacks. This is an opportunity to interact with the other volunteers, establishing relationships and assessing how they’re coping with the devastation and the grief of the survivors. These shared times will result in more volunteers calling on you if they think a survivor might need “Mickey.”

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Louise Graham (left) and other mental health workers were often hailed by the nickname “Mickey” because of the stuffed toys they handed out to children.

Louise Graham is a member of the American Counseling Association and an associate professor in the Graduate Department of Counselor Education at Bridgewater State College. Contact her at lgraham@bridgew.edu.

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Three internship lessons that classes couldn’t teach

Two years of counseling course work had provided an abundance of valuable information. Surely I was ready for internship.

That thought didn’t last long. While my transcript was full of classes, all the information I had absorbed seemed either lost or inaccessible during the beginning days and weeks of my internship.

The first day found me parked in front of an uninviting brick building trying to imagine what the next nine months would be like. Walking up the sidewalk and approaching the front door, I wondered, “Did I learn enough to do this? Will I remember those class and book lessons that I aced?” At that moment, I could not seem to remember anything.

Internship took place in a residential treatment center for adolescents. The youth were court ordered to live there and participate in counseling. I had been excited to start my internship, but now uncertainty set in. I was trying to be excited, but scared was the more accurate description.

The emotional ups and downs did not go away on day two, day three or any of the subsequent days. The pattern was happy and excited one moment, scared and frustrated the next. But as the emotional turmoil of first-day jitters began to quiet, my focus turned to putting together all the information I had learned in the classroom. The basics were there. I knew how to talk to clients, but what about all the other nuggets of counseling information?

My fear was that all the valuable information I had so furiously written in my notebooks was forgotten. I was tempted to tear through all the notebooks and look for something to soothe the roller coaster of emotions, but I was just too tired at the end of the day. But the frustration, fear, excitement, happiness, stress, loneliness and disappointment — the entire mix of emotions I experienced those first few weeks — finally did have some positive consequences. They produced much self-reflection and reintroduced me to those classroom lessons. The practical experience began blending with the classroom lessons bit by bit.

My emotional roller coaster finally slowed after I remembered three very basic classroom lessons: accept ambiguity, connect with the client and trust the process. These were the key pieces that normalized internship and offered me hope that, eventually, all the information learned in the classroom really would come together.

Accept ambiguity

Ambiguity is about those moments in counseling when uncertainty and unknowns rule. Early on in my internship, that described almost every moment for me, so much so that ambiguity became my constant companion.

Other professions have fewer unknowns. Previously, I was in a business profession where the days were fairly predictable. Morning came, and I knew exactly what needed to get accomplished that day. But with my counseling internship, I had no idea what the day would bring. We had discussed this in the classroom, but faced with my everyday battle against turbulent emotions, things just didn’t work the way I had expected. When things went well with clients and nothing out of the ordinary occurred, I felt good. But when things did not go well or unexpected events or topics arose, fear and frustration took hold.

I tried to prepare for every possible counseling scenario with each client. It was the kind of approach that worked so well in school. But when it didn’t work in my internship, fear took over. Surely these streetwise clients could see straight through me. I fought the ambiguity by preparing even more, but exhaustion set in as the impossibility of preparing for every scenario became more apparent.

Over time, self-reflection helped me realize that while ambiguity is not necessarily the most comfortable thing to experience, those complexities are also what brought me into this field. Helping others...
Connecticut Law Journal, and public hearings will be held. The public will be encouraged to submit written comments on the proposed regulations. After the public hearings, the comments will be reviewed and the regulations modified, as appropriate.

The proposed regulations will then be presented to the state board for adoption on or before May 7. Upon adoption, the regulations will be submitted to the Office of the Attorney General for a determination of legal sufficiency and, if approved, will be sent to the Legislative Regulations Review Committee and the Office of Fiscal Analysis. After approval, the regulations would become effective upon filing with the Secretary of State.

**Headed in the ‘wrong’ direction?**

In the view of Bob Schmidt, a retired school counselor and past president of the Connecticut Counseling Association, the ball was dropped when the Connecticut School Counselor Association broke away from CCA in 2006 and appointed its own lobbyist. “They just took no action against it. I’m not sure why,” he says. “They couldn’t possibly think it was a good idea.” At press time, e-mails asking the CSCA president and president-elect for comment had received no response.

Schmidt is worried that adding MFTs to the mix will only serve to confuse the public even more about the role of school counselors. “There has always been this perception that school counselors are less than counselors, that they are not as prepared, that they are not as versatile, and that really bothers me,” he says. “Most administrators don’t realize that school counselors have almost identical clinical skills as other counselors. They (school counselors) are just as qualified.”

Schmidt is also concerned that allowing MFTs in schools will push school counselors back into the role of “guidance counselors,” limiting their responsibilities to working with students on college applications and administrative tasks. “(School) counselors are already burdened with administering and scheduling state tests. This will only make matters worse,” he says. “It pushes school counselors in a direction that they were slowly moving toward, but fighting against.”

Likewise, Schmidt is troubled over the future of the school counseling profession. He says many school counseling graduates feel increasingly frustrated that they are not being given more opportunity to provide actual counseling in schools. “The message that always came from the American Counseling Association is that we are counselors first,” he explains. “I don’t hear that message coming from the American School Counselor Association. It’s very frustrating to me. I’ve seen the importance of staying united. In retrospect, I think that maybe if (CCA’s) school counseling division had stayed with us and we had kept our lobbyists together, maybe this would not have happened.”

While state regulations in the law will require MFTs hired to work in school settings to complete additional training and course work, many of the regulations do not have to be met until 2014. “If an MFT wants to work in a school, all they have to do is have written documentation from the school system and agree to take some educational courses,” says Schmidt, who doesn’t believe that adding a few courses will provide MFTs with a school counselor’s ‘inside’ perspective. “I know I am protective of school counseling positions, but bottom line is that we are serving the kids, and their needs come first.”

Adding the certification for MFTs to work in schools will likely have the greatest impact at the elementary level, where school counseling positions in Connecticut are already few and far between, Schmidt says. According to him, only one in approximately every four towns in the state has a school counselor. “I think it is good that the Department of Education is considering MFTs to work in school arenas, but I am concerned that the actual LPC credential is being overlooked by the Department of Education,” says CCA Legislative Chair Diane Tobin, a licensed professional counselor. “Is MFT a specialty within the LPC? No, I don’t believe it should be considered this way.”

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Crespi also voices concern that placing greater focus on mental health during the school day might result in creativity. “If a student has a 10 a.m. therapy session every day, right before their English class, they may not be able to focus on their schoolwork after the session. If this goes on for a couple of years, consequences may not be reading on the level they should. That’s a new problem. We don’t want to substitute one problem for another,” he adds. He notes that it will be very important for MFTs not to disrupt students’ schedules and learning.

American School Counselor Association President Eric Spurs doesn’t think that Connecticut’s decision should result in a turf war or any panic. He views MFTs working in school settings as another cog in the wheel to help students succeed.

“My initial reaction to it was that it could be a good collaboration and be very beneficial to student achievement. Being able to have additional staff at school to support students could be a great team approach,” he says. “If it was having MFTs instead of school counselors, then that would be a problem. But as I was reading the description of the guidelines (in the law), it seems that they are determining the differences between the roles, where the roles could overlap and making sure the roles and responsibilities of all the student services folks are well defined.”

Sparks adds that it’s imperative for school counselors to clearly define their role within the school system and establish a comprehensive school counselor program. “The role of school counselors is that we are educators with school counseling training. If the counselors are not defining their role, then they find themselves dealing with more of an administrative role,” he says. “Marriage and family therapists are providing a different type of approach and a different type of service to students.”

Although Sparks sees a benefit to having MFTs in schools, he admits some concern that providing therapy sessions during the school day could interfere with students’ education. He thinks the sessions might best be handled after school hours.

But overall, Sparks does not view the additional school mental health professionals as a threat to school counselors. “I don’t see it changing the role of the school counseling, because the school counselor is focused on guidance, curriculum in the classroom, goal setting and student planning — which isn’t what the MFTs will be doing,” he says. “Our focus is more educational, and they are thinking about the developmental life of the child and family as antagonistic. It’s a game of tug of war with the child in the middle.”

Cohen would like to make the schools more family-friendly, so both sides will feel they are on the same team and working together in the best interests of the child. “It will be difficult for an MFT to get this certification,” Cohen says. “They have to jump through a lot of hoops. We aren’t talking about a lot of people willing to do this. They have to demonstrate they have the skills. They have to go back and get more course work and complete a school-specific practicum offered by an MFT program. The people who really feel strongly that they have a role within schools and are willing to go the extra mile will be the people who will be certified. It’s not going to be an open floodgate of MFTs wanting to work in schools.”

He adds that this move isn’t about MFTs struggling to define their identity as either a specialty or a stand-alone profession. “Marriage and family therapy has been a profession with master’s programs since the seventies,” Cohen says. “There are epistemological differences between family therapy, based in systems theory, and counseling, which is based on more of the traditional psychological and behavioral models. Our system just aren’t working the way they are now. We need a new idea on how to deal with kids coming into schools and playing out their family battles in the hallways, and to do that, we have to get to the source of the problem.”

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Maintaining client files

Q: I am all set to start my private practice after attending your workshop in North Carolina. I have two questions. First, I’ve searched the ACAEthical Standards Casebook, sixth edition, and your book, _The Complete Guide to Private Practice for Licensed Mental Health Professionals_, and I am unable to find “the number of years” a records custodian should hold on to client files in the event that the primary clinician is incapacitated or dies. Also, what is the number of years a counselor should hold on to client files after termination of a private practice?

A: We applaud your diligence in researching this question before beginning your private practice. We spoke to Larry Freeman and Martha McIntosh, the ethics gurus at the American Counseling Association. The ACA Code of Ethics does not specify the number of years records should be maintained in the event of the counselor’s death, incapacitation or termination of practice. Instead, the code of ethics states (in Standard B.6.g.), “Counselors store records following termination of services to ensure reasonable future access, maintain records in accordance with state and federal statutes governing records, and dispose of client records and other sensitive materials in a manner that protects client confidentiality.”

The standard was written this way because requirements might vary from state to state. Therefore, your first step is to consult with the North Carolina Counseling Association or your state’s mental health counselors division. (For a listing of ACA state branches and links to their websites, visit the ACA website at www.counseling.org and click on the box labeled “Divisions/Regions/Branches” on the left-hand side of the page.) This is a great example of why it is imperative—though not necessarily cheap—for counselors to belong to their professional organizations at the state, division and national level.

As with other practice issues, informed counselors should be familiar with their state practice laws, federal statutes (HIPAA and others) and the ACA Code of Ethics. This is one reason we do not include a statement about the specific number of years to maintain files in our book. Another is the possible variance based on discipline (counseling, social work, marriage and family therapy and psychology). However, a good benchmark is to maintain records seven years for adults and 10 years for children after treatment or the closing of a practice.

Concerns have surfaced regarding possible changes in Current Procedural Terminology (CPT) codes used by counseling practitioners in agencies and mental health practices to file insurance claims. Some ACA members have forwarded information saying that an organization is offering a class with continuing education units to help practitioners learn all the CPT changes. The cost for this course is $239.

One member sent the following e-mail: “(I have a) question (that) has to do with new CPT codes for mental health in 2008. I’ve not seen any info on this matter. I received an e-mail from an LCSW friend. I will forward you information about the class teaching the new codes). Perhaps you can address these topics in your column. Others may or may not be aware.”

We researched these concerns and can provide the following information.

American Behavioral, a mental health managed care company, says it knows of no changes to the CPT coding developed and copyrighted by the American Medical Association (AMA). American Behavioral’s Network Development Coordinator, Rachael Millazzo, checked with the AMA and assured us that the CPT codes for mental health and psychotherapy will remain the same for the foreseeable future.

In addition, a review of the AMA website (https://catalog.ama-assn.org/Catalog/cpt/cpt_search.jsp) shows no changes in the CPT coding for psychotherapy.

Further, Donna Zappia, director of NetSource Billing explained that Blue Cross Blue Shield and some other insurance companies tie their reimbursement rates to Medicare reimbursement rates. An adjustment to these rates by Congress took effect in June and is reflected across the industry by various managed care and insurance companies.

We don’t think this is a trend, but rather a policy being followed by the industry. No further cuts are expected. However, we will continue to monitor changes in reimbursement rates by managed care and insurance companies.

Yes, this is the last, last reminder about using your NPI, the National Provider Identifier (NPI) number. We have updated counselors in this column for the past several months about the need to obtain and use your NPI number. There were several deadline extensions, but December 2007 was it! All managed care and insurance companies, as well as Medicare, will start returning claims filed without this number.

The Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) mandated the adoption of a standard unique identifier for health care providers. The National Plan and Provider Enumeration System collects identifying information on health care providers and assigns each a unique NPI.

Additional information is available on the NPPES website: https://nppes.cms.hhs.gov/NPPES/Welcome.do.


We hope to see you in Hawaii at the ACA Conference & Expo, where we will be presenting our preconference Learning Institute, “Starting, Maintaining and Expanding a Successful Private Practice” on March 27. Onsite private practice consultation will be available. Also come visit us in the exhibitor center and preview our book, _The Complete Guide to Private Practice for Licensed Mental Health Professionals_ (www.counselingprivatepractice.com).
March 26–March 30, 2008
Honolulu, Hawaii

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5. **The largest Exposition** (more than 100 exhibitors!) in the world dedicated to counseling professionals will be a part of your conference experience
6. The **expanded ACA Career Center** will help you with all aspects of your career, including onsite interviewing
7. **NEW! Free private consultations** will answer your most pressing questions on ethics and licensure issues
8. You can take home an **ACA Academy Certificate** in one of 15 specialties—Free!
9. You can relax and mingle at the **ACA Opening Party—the social event of the year!**
10. Meet authors and **discuss your publishing ideas** at the ACA Bookstore
11. **Network, socialize and share stories** and ideas with thousands of your colleagues, including our international guests
12. **Save 10%** on your liability insurance renewal with HPSO by attending approved sessions on risk management (more information will be in your tote bag)

Even more reasons to sign up now for the premier counseling event in 2008:

- ACA/American Red Cross Foundations of Disaster Mental Health Training (earn 6.5 CEs and it’s free!) Pre-registration by January 31, 2008 required
- National Board of Forensic Evaluators Credentialing Workshop (earn 15 CEs!)
- National Awards Reception
- ACA Foundation Luau
- ACA Branch Awards Ceremony
- C-AHEAD Wellness Center
- ALGBTIC Day of Learning
- First Timers’ Orientation and Mentoring Lunch

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- C-AHEAD Wellness Center
- ALGBTIC Day of Learning
- First Timers’ Orientation and Mentoring Lunch

**Keynote speaker Bradford P. Keeney, PhD, will share his creative approaches to psychotherapy, including insights learned through his study of healing practices in numerous cultures.**

**Keynote speaker John Gottman, PhD, world-renowned relationship expert, has important messages for counseling professionals on marriage, couples, and parent-child relationships as well as on his work in predictions.**
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Already registered for the conference? You can still add an LI to your registration. Simply call 800-347-6647, x222.

If you are looking for an in-depth, intensive session that you would like to immerse yourself in for a full day or for an entire evening prior to the Conference, then a Pre-Conference Learning Institute is for you!

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• A separate registration fee applies. Register by February 15 for lowest rates.

Daytime sessions: 6 CE hours
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For complete session descriptions and presenter information, visit www.counseling.org/Conference

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New Prof./Student/Retiree $110/$85 $150/$125
Non-Members
General Attendees $200/$160 $240/$200
Non-Member Student $160/$135 $200/$175

Wednesday, March 26, 2008
Introductory level
Challenges Facing Group Leaders: Understanding and Working with Difficult Group Members
A Field Guide to Counseling Toward Solutions: The Solution-Focused School
Issues and Techniques in Counseling Athletes
“If only I had known...”: Lessons from the Field

Yoga and Balance—ology—Holistic Modalities That Will Increase the Effectiveness of the Therapeutic Process

Advanced level
Time to Roll Up Our Sleeves: Introducing the A-P-C Approach for Intervening in Economically Challenged Communities
Culturally Competent Counseling with Muslims in the United States Post 9-11
Putting Theories into Practice: Using Creative, Multisensory Techniques with the Theories to Increase Depth and Impact
Obesity and Compulsive Overeating: The Addictions Treatment Model as a Recipe for Change
Skill-Building Hypnosis Training
Love and Sex in Intimate Relationships: Sexual Counseling and Therapy

Thursday, March 27
Introductory
Play Therapy: A Universal Language for Understanding and Helping Young Children from Diverse Cultures with Diverse Needs
Using Meditation and Mindfulness to Increase Therapeutic Presence in Counseling
Psychopharmacology for the Non-Medical Mental Health Practitioner
Starting, Maintaining, and Expanding a Successful Private Practice
Youth in Crisis: Understanding and Responding to Self-Injurious Behaviors
Planning for Retirement and/or Closing a Practice in Two Months or Twenty Years: What Counselors Need to Know
It’s Hard to Love You Just the Way You Are: Replacing Anger with Acceptance Using Integrative Behavioral Couple Therapy
The Power of Sand Tray Therapy: Creative Techniques for Therapeutic Disclosure, Trauma Counseling, and Healing

Advanced
Advanced Training in Using Group Techniques
School Counselor Accountability: Contributing to School Improvement
Multicultural Issues in Counseling: New Approaches to Diversity
Spirituality and Wellness in Baby-Boomers: A Mini-Course for Experienced Counselors and Counselor Educators
Tough Kids, Cool Counseling: Cognitive, Emotional, and Constructivist Change Techniques
Dealing with the Powerless and Oppressed: Reality Therapy in the Hurry Up World of “Be Brief and Get Over It”
After the Storm is Over: A Grief Perspective on Disaster Mental Health Work
Promoting Strength and Recovery: Culturally Sensitive Family Counseling with Boys Who Have Been Sexually Abused
Parenting Coordination—A High-Conflict Divorce Intervention: Mental Health Professionals in Family Court Systems
Action Research in Counseling: Closing the Gap Between Research and Practice
Advanced Ethical Considerations in the Use of Evidenced-Based Practices and in Crisis/Humanitarian Work
Integrating Creative Supervision Techniques: Applications and Perspectives
Already registered for the Conference? Make your hotel reservations by February 22!

- Contact the hotel directly and mention that you are attending the ACA Conference & Exposition so that you get the special Conference rate noted below.
- Free shuttle bus service is provided between all ACA official Conference hotels and the Hawaii Convention Center.
- Hotel rooms are subject to state and local taxes in effect at the time of check-in. All hotels are ADA compliant.

**ACA official Conference hotels:**

The following hotels are sold out:

- Doubletree Alana Waikiki Hotel
- Holiday Inn Waikiki

At press time, there were rooms available at:

- Hilton Hawaiian Village Beach Resort & Spa (ACA Headquarters Hotel)
  - Reservations: 800-445-8667
  - Questions: 808-949-4321
  - Rates: $205–$269
- Ala Moana Hotel
  - Reservations: 800-367-6025
  - Questions: 808-955-4811
  - Rates: $144 single/double

**An all-oceanfront property.**

The Hawaii Prince Hotel Waikiki and Golf Club

- Reservations: 800-321-6248
- Questions: 808-956-1111
- Email your reservation to: reservations@princehawaii.com
- Rates: $169 and up

**What is included in Your Conference Registration?**

- All 500+ Education Sessions
- Keynote speaker sessions
- Exposition Grand Opening and Welcome Reception on Thursday
- Opening Party on Friday (additional tickets for guests-$40)
- ACA National Awards Ceremony
- ACA Foundation Luau

Separate fees apply for Pre-Conference Learning Institutes, First Timers’ Orientation and Mentoring Luncheon, Tours of Hawaii, Division Luncheons, and the NBFE Credentialing Workshop.

**ACA Academies**

Attend at least 6 designated sessions in these special learning tracks and receive a special certificate of achievement—at no cost:

- Addictions
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- Child and Adolescent Counseling
- College Counseling
- Counseling Ethics
- Counselor Education and Supervision
- Couples and Family Counseling
- LGBT
- Group Work
- Human Development Across the Lifespan
- Mental Health/Private Practice
- Multicultural Counseling
- Rehabilitation Counseling and Disability Issues
- School Counseling
- Spirituality and Religious Values

In addition to the six sessions, Academy applicants must attend the Opening Keynote Session and visit the Expo. Check your Conference registration tote bag for forms and complete information.

**See you in Honolulu!**
Career planning helps you reach your goals

Q: I'm trying to develop a 10-year plan for my career. How do you suggest I approach this?

A: Stephen Covey devotees will recognize the following piece of advice: "Begin with the end in mind." Covey holds that all things are created twice: first in the imagination and then later in reality. If you first identify your goals, it will be easier to make decisions related to the outcomes you seek.

Start with the goal. Let's say your long-term goal is to be the director of an organization that provides counseling services. That's a good start, but it's pretty broad. When you add more detail to your goal, you can clarify your career path.

Define, define, define. Do you prefer nonprofits that specialize in counseling or those that provide a variety of services? Do you want to work in a publicly or privately funded agency? Do you like large organizations or smaller ones? Should this agency have national, regional or local center of control? Are you targeting a particular population? Where do you want to live? Do you want to be a generalist or a specialist? Do you want to work with many other professionals or only a few?

Peruse the classifieds. Most people look at advertisements as they're embarking on a job search, but few recognize job advertisements as a career planning tool. Find ads for the positions you aspire to five or 10 years down the road. What qualifications define the "perfect candidate" at the organizations that match your personal goals? Use these as a template to define your career development plan.

Talk to people who have the job you're striving to attain. What skills do professionals in your target job use every day? What new skills have they developed to become more effective in their roles? What were some of the good (and bad) decisions they made in their careers? What have they learned from those decisions? What advice do they have as you prepare for a similar position?

Consider your life roles. Your "worker" role does not exist in a vacuum. Other roles (child, student, leisure, citizen, life partner, homemaker, parent, pensioner), as defined by Donald Super, will certainly influence — and be influenced — by your identification as a worker. To achieve work/life balance, you need to account for these additional roles in your career plan.

Develop your action plan. Identify your strengths as well as areas for continued development. What experiences will position you as a strong candidate for the role you're seeking? How will you fit these developmental steps into your work and life over the time you have defined to achieve your goal? Is it possible to accomplish these objectives in the time allotted, or do you need to revise your thinking?

Differentiate. What will set you apart from other candidates whose academic credentials are similar to your own? What special skills or attributes do you possess that others lack? Is it technological expertise, fluency in a foreign language, an M.B.A. or the skills necessary to head a department? Have you been involved in fund-raising activities? Have you successfully written grant proposals? Do you have specialist knowledge in an area on which a new program could be developed?

Review your plan regularly. Surprises come along from time to time that may alter your approach. You may reach your goals ahead of schedule, or you may take you a little longer than anticipated. Your résumé is a concrete instrument that can help track your progress. Revisit it every six months or so (once a year at minimum).

Bear in mind, many people have enjoyed very interesting careers without creating a long-term plan. But if you appreciate (or crave) order, a career plan can help you manage both your short- and long-term prospects.

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

Letters to the editor: ct@counseling.org

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Your Counseling Today: January 2008
ACCA makes final preparations for fourth national conference
Submitted by Carolyn Kern
Carolyn.kern@unt.edu

The American College Counseling Association is ready for its 2008 National Conference in Savannah, Ga., at the Hyatt Regency-Savannah Historic Riverfront Hotel. The conference opens Feb. 6 with a preconference workshop with David Rudd on “Assessing and Managing Suicide Risk.” The keynote speaker, Richard Kadison of Harvard University, is sure to inspire attendees while informing them about ways to overcome challenges and identify new opportunities to reach the college student population.

Six hours of ethics continuing education units will be provided through two sessions on “Current Issues in Ethics, Suicide and the College Counselor” during the conference. In addition, many sessions related to current issues, research and practice for college counselors will be presented Feb. 7-9. Participants will gain practical application as well as vital information related to today’s college counseling needs. Registration is available through www.collegecounseling.org.

In addition, social activities will provide conference participants with opportunities to exchange ideas and meet new professionals. The Opening Reception will bring everyone together on the evening of Feb. 6 at 6:30. Additional activities outside of the conference include opportunities to explore scenic and historic Savannah, go deep-sea fishing or take a dolphin cruise. Do not miss this opportunity to refresh and renew! Questions? E-mail Sylvia Shortt at shortt@westga.edu.

In other news, ACCA’s scholarly publication, the Journal of College Counseling, will begin its second decade of publication in spring 2008. To mark this milestone, Volume 11, No. 1 will inaugurate a brand new cover design and launch the journal’s “Studies” section. For submission guidelines or to learn more about the journal, visit the American Counseling Association or ACCA websites.

Why join ACCA? We publish a high-quality, peer-reviewed journal. We host valuable CEU workshops (enough for most state’s licensure requirements!) at our national conferences. We offer an excellent community of more than 1,600 counseling professionals, both practitioners and academics. We are a home for graduate students. We have an active and informative Listserv. We publish VISIONS, a professional e-newsletter. We have an awesome website: www.collegecounseling.org. Just some of the great reasons to join ACCA!

Don’t forget to join us in Savannah for the 2008 ACCA National Conference! Details at www.collegecounseling.org. Sixteen CEUs will be available, six of which are in ethics!

Hypnosis training event one of the highlights at EB-ACA Annual Conference
Submitted by Susan Stammerjohan
sassyssusan61@yahoo.com

The Learning Institute “Advanced Empathy: Utilizing Hypnosis in Counseling and Psychotherapy” was held at the European Branch of the American Counseling Association Annual Conference on Nov. 3-4, 2007.

Excitement filled the room as participants entered the Learning Institute with their preconceived ideas, temptations, personal biases, expectations and experiences. Many were attending because of the presenter, licensed psychologist Robert M. Bollet. Participants anticipated being exposed to a holistic, participatory, enriching and challenging experience. Prior alumni of the 50-hour hypnosis certification program claim they left the sessions with a deeper awareness, both personally and professionally.

One of the best features of working in the counseling profession is that our growth is never complete. Each counselor has the potential to hone his or her counseling skills to finer levels. Experiences such as “Advanced Empathy” can reveal the unconscious universe within. In the helpful professions, which require working a healthy program of self-care, this therapeutic tool is precious.

During the training sessions, participants received encouragement to simply allow their minds to drift away to a place of comfort and serenity. Participants eagerly anticipated the words of Bollet, “Find a comfortable place and begin by focusing on your breath,” because they knew a therapeutic journey would follow. Bollet has been a staunch supporter of EB-ACA for many years. He returns year after year to renew friendships, share his knowledge and experience of hypnosis and conduct training for eager recipients of his version of hypnosis, which he derives from the theory and spirit of Milton H. Erickson. Bollet calls this “an advanced form of empathy.” One only has to enter Bollet’s presence to feel the genuine love and conviction he has for the therapeutic ability to reach the unconscious levels of the mind uninterruptedly and emphatically, thus facilitating deep healing.

This 50-hour certification training was offered to those seeking personal growth while also gaining new therapeutic tools. The lighthearted, engaging and humorous presenter made the material easy to digest and the experiential piece non-threatening. Theories and techniques were discussed, and participants were introduced to the basic components of trance induction and allowed to begin the practical experience. Attendees learned through instruction and hands-on practice, and by changing roles as participants and therapists. Everyone was given simple homework assignments, which were manageable and practical.

The weekend ended quickly, but the participants were already preparing for the next and final sessions of the training on Jan. 26-27 and March 6-9. Santiago Fallon will be joining Bollet for the second and third sessions of this three-part training.

Anyone interested in participating in the next 50-hour hypnosis certification training program sponsored by EB-ACA is encouraged to contact EB-ACA President Zena Bowen at zenabower@yahoo.com.

AMCD asks for input on honoring culturally competent counselors
Submitted by Cirecie West-Olatunji
cwestolatunji@ccoe.uf.edu

Counselors who have demonstrated their commitment to multicultural counseling and development deserve to be honored. Take this opportunity to recognize your culturally competent colleagues by nominating them for Association for Multicultural Counseling and Development awards.

AMCD is pleased to announce that the nomination process for a wide variety of awards is now open. For a list of criteria and procedures for submission, go to the AMCD website at www.amcdaca.org.

Deadline for submission of nominations is Jan. 15, and a tentative selection date is scheduled for Feb. 1. If you have additional questions, contact Judy Lewis (J-Lewis@govst.edu) or Tarrell Portman (tarrell-portman@uiowa.edu).

The National Career Development Association hosted the 42nd annual National Career Development Week Poetry and Poster Contest in November. NCDA members from Lockhart Martin celebrated this special event. Pictured, from left, are Melinda Heredia, Pam Fillmon and Ginger McGraw.

ARCA outlines planned activities at ACA Conference
Submitted by Patty Nunez
Patricia.Nunez@cnca.com

The American Rehabilitation Counseling Association looks forward to seeing its members in Hawaii at the American Counseling Association Conference & Exposition. We will have our ARCA Executive Council meeting all day on Thursday, March 27. We will once again be holding an ARCA Graduate Student Breakfast meeting on Friday, March 28, from 7:30-8:30 a.m. We will also be holding our Awards Reception on Friday from 6 to 8 p.m.

ARCA activities will continue on Saturday, March 29, with our Brunch & Business meeting from 11 a.m. to 1 p.m. Last, but certainly not least, ARCA will present a session on “Creating a Student Organization & Student Task Force” on Saturday from 2 to 3 p.m.

We encourage all ARCA members to head west to Hawaii. Take the opportunity to not only visit a very beautiful island, but also attend a great conference! And remember, when you register for the conference, you can donate $2 of your registration fee to the ACA division of your choice. We hope that division will be ARCA!

We look forward to seeing you in Honolulu!
Presenters of the National Employment Counseling Association Life Work Institute at the Florida Counseling Association in December were, from left, President Carolyn Kalil, Bill Fenson, Michael Lazarick, Robert Chope, Kay Brawley and Sue Pressman. Join the NECA leadership team in Hawaii at the ACA Conference on March 27 for NECA’s Life Work Institute II, which will include a focus on entrepreneurship. The $75 registration fee includes the recognition luncheon and workshop from noon to 5 p.m. Register through the ACA website at www.counseling.org (see link for NECA luncheon). Details regarding program content are available on the NECA website: www.employmentelementalounseling.org.

The leadership team of the Association for Spiritual, Ethical and Religious Values in Counseling gathered for a board meeting to plan for the Conference on Spirituality in Counseling: Illuminating the Path for Training and Practice, to be held June 15-17 at Lake Junaluska, N.C. ASERVIC invites you to submit a proposal and register for its national conference. Proposal guidelines are posted at www.aservic.org. Proposals are due Feb. 1. The website also contains a brochure that explains the conference objectives in detail, as well as hotel and conference registration forms. Registration is limited and must be postmarked by April 15.

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PH.D. PROGRAM IN COUNSELOR EDUCATION AND SUPERVISION
Graduate Assistantships and Fellowships Available

The Counselor Education Program in the College of Education at the University of Central Florida invites applications for the CACREP-accredited Ph.D. Program in Counselor Education and Supervision. To apply, contact the program coordinator, Dr. Bill Belknap at edcounseling@ucf.edu or visit the website at http://www.counseling.ucf.edu or the College of Graduate Studies for more information. The application deadline is May 15. All applicants will be considered for fellowships.

The program encourages a full-time immersion experience with a heavy emphasis on individual mentoring. Each year, the program seeks to maximize an average of 10 students per year. The curriculum emphasizes the development of supervision, teaching, and research in addition to therapeutic skills. The counselor education faculty are actively involved in the profession through research, publication, and service to ACEA, the division, and other professional organizations. Currently, the counselor education program faculty include over 31,000,000 in grant funding annually.

Program Overview: The Ph.D. Program at the University of Central Florida has been recognized with several awards in the years since its inception. In 2005, the Robert F. Butler Outstanding Counselor Education Program Award was given by ACEA. In 2007, the Southern Association for Counselor Education and Supervision presented the Outstanding Counselor Education Program Award for the Doctoral Education level program to UCF. In 2008, a proposal was received for the Outstanding Counselor Education Award for both tenured and non-tenured faculty by the Southern Association for Counselor Education and Supervision.

Financial Assistance: Graduate Assistantship packages are available, which can exceed a value of $25,000.00 per year. Currently, the program awards Ph.D. level Graduate Assistantships with a background or interest in counseling and Family and Student Health Counseling, in addition to the new Florida’s University Graduate Program in Counseling. Scholarly backgrounds are needed to work on a research and training grant for the Consortium for Social Responsibility and Children in Education. All students who hold assistantships receive full tuition waiver and the current assistantships are $250,000.00 and are funded by a grant from the National Science Foundation.

The University: The University of Central Florida is located in Orlando and is one of the fastest growing universities in the country with a current enrollment of over 50,000 students. The College of Education is the largest in the state and leads all colleges with external funding, in excess of $18 million.

Western Michigan University Established 1983

Western Michigan University

- CACREP Accredited since 1983
- 59 hour program leading to the master's degree
- Academic and Practicum experiences in clinical supervision
- Graduate teaching opportunities available
- Nationally recognized faculty with diverse research and professional interests
- Nine doctoral students and five faculty members presented at the 2007 Association for Counselor Education and Supervision (ACE) Conference in Columbus, Ohio
- 17. Students and faculty have over 50 publications since 2010
- Our local chapter of the Sigma Tau Phi Counseling Honor Society
- Hosts annual research conference with students from diverse racial/ethnic backgrounds from local, state, national, and international locations
- Western Michigan University is located in Kalamazoo, Michigan, centrally located between Chicago and Detroit

Applications are available for download from our website: www.wmich.edu/ace.

APPLICATION DEADLINE: February 1, 2008. For more information about the doctoral program in Counselor Education, please contact Dr. Stephen L. Craig, Associate Professor and Director of Counselor Education at 269-385-5114 or ststephen.craig@wmich.edu.
The opening of the counselor’s mind

Note: The following article was written in response to Michael D’Andrea’s OpEd piece, “The closing of the counselor’s mind,” which appeared in the December 2007 issue of Counseling Today. OpEd articles do not necessarily reflect the views of the American Counseling Association or the Counseling Today staff.

A couple of months ago, an e-mail message appeared on CESNET (a Listserv for counselor educators, supervisors and graduate students) that presented the United States as a force that has sought to commit acts against civilians and made note of Hiroshima and Nagasaki as targets of that aggression. Part of the basis of the e-mail was a video produced by the owners of an ice cream company who are known to be anti-military. Michael D’Andrea, the person who sent the e-mail, has also mentioned that people with political expressions were not considered anti-military. On the basis of my understanding of the e-mail as anti-military, I questioned the use of CESNET for political purposes.

As a result of questioning the use of the Listserv for personal political expressions, I was classified as narrow-minded, an enemy of social justice and a person who needed to be ousted because of my question. I never attacked anyone or called anyone names and at all times tried to keep the discussion above reproach. However, that was not the sentiment often expressed during the ensuing discussion. For example, someone wrote during this discussion that “Social justice is just that … justice according to the current society in power. Consider that in the context of ‘freedom.’” It’s all about words. … We work with people. The ‘words’ used by people in power to promote agendas drive social justice. … Think about it.”

The point in these words is that if you do not have the power to determine the agenda, you must succumb to the will of those in power. That means that I and others have no voice in the social justice movement and, in fact, we have no true sense of freedom of speech because our voices are said to mean nothing. It drives home my question about using a Listserv designed for counselor educators and supervisors to discuss education and training issues, instead, proliferate a particular political point of view and agendas. Additionally, a constant accusation made during this discussion was that questioning the use of CESNET for the expression of a political social agenda meant that the freedom of speech of Michael D’Andrea and others was being denied.

Before I address this open accusation, let me out myself. I am an African American/Norwegian American. I was born in New York when my parents’ marriage was still illegal in 16 states. I was raised on the picket lines in New York as my grandmother and many others fought for the freedom of everyone to have a job and to be treated with respect. I grew up as a devoted Christian with strong family values and a sense of duty to my country, even though many like me were not afforded the freedoms of the majority or those in power and continue not to be afforded many of those freedoms today. I served voluntarily and with honor in the United States Air Force to protect the rights of all Americans. I have served my country also as a champion of the needs of others who struggle with daily life, such as the homeless and those who have been victimized by domestic violence, and I have done this for more than 30 years.

I have been recognized for outstanding community service by Vietnam-era veterans, by the president of the United States and by the mayor of Newport News, Va. I have received recognition for my involvement in multicultural activities and for being an outstanding multicultural educator. I have fought for the rights of the multiple heritage population to be able to identify themselves as who they are and not as single-race individuals. I have always upheld the right of anyone to say anything, but always asked that they not do harm to others.

In December’s OpEd piece, it was stated that there was an effort to stop the freedom of speech of those with a “multicultural-social justice perspective.” The discourse that went on over this topic on the Listserv involved people on both sides of the issue, and at no time was there an attempt to deny anyone the freedom to express themselves. However, there was a constant cry from many for the personal attacks and name-calling to stop. For me (and for others with whom I have spoken), being called insensitive and an enemy of social justice just because I was unwilling to blindly accept the views being expressed felt like being bullied. As a result of the constant attacks, both in the discussion on CESNET and in those sent to me directly, I decided it was not in my best interest to stay on CESNET, and I withdrew my involvement.

It is a social injustice when a racial/ethnic minority participating on a list designed to share information feels so belittled, disheartened and silenced that he has to leave a discussion because one of the very people who identifies as a champion of social justice has decided that, if you do not espouse essentially similar views, you are the enemy and your perspective is not worthy of respect. Imagine being told that you do not know what Martin Luther King Jr. stood for even though you walked picket lines with him and he came to your grandmother’s house several times to eat and discuss the struggles related to freedom. Imagine

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further being told that for you to truly understand what Dr. King stood for, that you need to read a book.

As counselors, we are taught not to force our values onto others, and yet my values were constantly being disrespected during the discussion on CESNET as I was told that, if I did not accept the values presented, I was the enemy. It is amazing that Dr. D’Andrea has stated time and time again that he was denied freedom of speech, and yet, not only did he dominate the discussion on CESNET, but for a long time has had a column (or a “bully pulpit”) in Counseling Today. There has been no column space allowed for a different perspective or point of view.

As a dues-paying member of the American Counseling Association, I wonder, where is the fairness in that?

I believe that the freedom of speech is essential to a free society. I believe that it is a right that should be freely expressed by all. I believe that people have the right to be religious, moderate, conservative and have differing points of view just like anyone else. I do not believe that you have to have a particular political point of view to be accepted or to be heard.

I believe in what it says in the preamble to the 2005 ACA Code of Ethics: “Association members recognize diversity and embrace a cross-cultural approach in support of the worth, dignity, potential and uniqueness of people within their social and cultural contexts.”

We live in a time when people are often put down and chastised because of their views. The counseling profession is not a place for people to feel left out or to believe that their voice cannot or will not be heard. I believe all people have political perspectives that drive many of the decisions they make, and they are entitled to them. I also believe others are entitled to have differing points of view, and they also have the right to express them without being called names and ridiculed. Discussion that is open and not hostile, that is engaging and not accusatory, that is accepting and not merely tolerated, opens doors to opportunity. When there is no discourse because only one point of view is privileged, I wonder what message that sends about counseling or counselor education?

I have been described as someone who is not willing to discuss the political issues of our times and as one who is avoiding the struggles for a more multiculturally inclusive discussion in counselor education. However, the truth is that I no longer want to be ridiculed for being different or called names because I do not want to follow what I am told I must follow to be accepted. I am who I am, and I’m proud of who I am. I seek to help my clients grow and to feel equally proud of themselves.

I often want to share the words of my grandmother, an African American with only an elementary education who worked as a housekeeper. As I look back on this discussion, I wonder what she would have said. I believe in her own way, she did address this issue when she said to me many years ago, “Son, many will work to have you join them in their causes, but your cause is to help people. God placed you here to help others, and in all the things you do, remember that you serve Him.” Like many others, and even those with differing points of view, I am here to serve others. It is in that service that we should be careful not to cause harm for others.

Richard C. Henriksen Jr. is an associate professor of education in the Sam Houston State University Department of Educational Leadership and Counseling.

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In the Room With Men: A Casebook of Therapeutic Change

In the Room With Men is ostensibly about helping men to work with the issues in their lives. Yet, in reality, it is a disposition on the journey taken by the therapist in working with men. This book is ambitious in endeavoring to undertake a number of very important issues in counseling male clients, and it succeeds quite well.

One of the major themes running through the book is the manner in which the process of working with men impacts both the client and the therapist. While this is most evident in Holly Sweet's self-reflective chapter on how the transcference/countertransference interaction impacted therapy with her client, all the authors draw upon a personal case study to delineate similar issues regarding the manner in which they work with men. Each chapter concludes with the writer responding to a set of reflection questions posed by the editors. This is designed to elucidate the therapist's reactions to the client and how that therapist's personal beliefs regarding masculinity informed his or her therapy.

While the theme of personal growth is central to the book, a second major contribution to the field of men's studies is the diversity of issues presented by the male clients. Several chapters deal with the exploration of emotions with men. Other chapters are specific to racial/cultural concerns (Asian American, Latino, African American), therapeutic techniques in working with male clients and helping men to explore the role of male socialization. And additional chapters address homosexuality, religion, divorce and teenage fatherhood.

Additionally, for therapists unfamiliar with the emerging literature on men's studies, several chapters provide a basic overview of the current conceptualization of men's psychosocial functioning. While the theoretical emphasis is heavily weighted toward a feminist psychosocialization process, drawing upon the work of, among others, Jim O'Neil (gender role conflict theory), a tantalizing revision of this theoretical perspective is postulated by Jay Wade in his chapter on working with an angry black male. Wade's research on the role of reference groups on male identity development explains some discrepancies in current conceptualizations of male socialization and should be explored by those working with men.

In the Room With Men makes a significant contribution to the field of men's studies and counseling. While a must read for every counselor and therapist, or anyone wishing to understand men and how to help them, this book is, ultimately, an exploration of oneself as a therapist. Sweet encapsulates this in presenting nine questions for therapists working with men to explore: Do we welcome men into our offices? Are we knowledgeable about the reasons behind many men's resistance to understanding and feeling their emotions? Do we explore our own countertransference? Can we understand and be compassionate to the transference of our male clients? Can we talk with men in their own language? Do we consider using different kinds of techniques in our work with men? Are we afraid of men, or do we dislike them on some level? How do we explore masculinity? And, most importantly, do we really like men? Reviewed by Steven M. Hoover, professor and chair, counselor education and the prevention of prejudice, St. Cloud State University.

The Future of Prejudice: Psychoanalysis and the Prevention of Prejudice

An Old Testament passage from the book of Jeremiah says, "The heart is deceitful above all things and desperately wicked." The passage then asks the rhetorical question, "Who can know it?" This ominous statement and question permeate the intelligent and reasoned treatise The Future of Prejudice.

In this thought-provoking clarion call to action, a skilled interdisciplinary group of health care professionals presents prejudice as a multifaceted construct that has historically been seen as monolithic, but in reality is anything but. Divided into four distinct parts with 16 chapters, this psychoanalytically oriented text provides counselors with more opportunities for self-reflection and more challenges to positively impact society than other texts that address issues related to humankind's inhumanity, multicultural considerations or inter/ interpersonal insidiousness. A comprehensive definition of the prejudice construct is developed in Chapters 1-5, while the book shows prejudice operationally defined in the lives of people in Chapters 6-15.

Contributors to this volume came up with a way to explain prejudice as a strong force within human beings developed and maintained through means that counselors can understand and address. Although medical professionals predominate among the text's authors, they allow space for the counselor training principle of developmental wellness, as well as the universal client issues of clashing cultures and boundary violations.

This book can serve to support every area of counselor education and training. In counselor education programs, instructors, researchers and students benefit from theories of prejudice that employ information from developmental, familial, attachment, socialization and even vicarious trauma research. Practitioners can gain insight from the discussion of prejudice and the intersectional conflicts lived out in the lives of clients. And all counselors can learn from the confrontational presentation of the culminating chapter. A poignant question is asked in Chapter 16 and dominates the landscape therein. Repeatedly, counselors are asked, "What can we do, and when should we act in our efforts?" (p. 271). Although legitimate genotypic and phenotypic explanations abound, and intrapersonal myopia is understood and excused, the book's contributors not only believe that a viable response exists, they share a preventative diagram or recipe for assuaging the destructive nature of benign and malignant prejudice.

Any counselor can derive practical value from this writing. However, if people allow a "deceitful heart" to blind them, the perpetuation of the wickedness of prejudice continues, and counselors lose the opportunity to be positive social change engineers. Let's not lose this opportunity. Reviewed by Kortney Krill, graduate student, and Jeffrey M. Smith, associate professor and counselor education program director, Creighton University.

Eight Lessons for a Happier Marriage

This book tackles a difficult question: How does one have a happy, healthy marriage? Its approach is based on the fundamental idea of choice theory; that is, the only person you can change is yourself. Eight Lessons for a Happier Marriage is obviously tailored for marriages, but the book can be useful to anyone in a committed relationship. In addition, it presents the reader with the responsibility of deciding whether to have a happy marriage. The book's premise is that if the reader takes the first step and makes little changes needed in the relationship, his or her partner will be more responsive to change as well.

William and Carleen Glasser simplify many concepts of choice theory and integrate them into eight easily applied lessons. The book presents not only ideas and concepts, but also the tools necessary to implement them. Structurally, each of the eight lessons is set up as a cartoon, a case study, a choice theory concept and application of that concept, followed by a discussion question. The "On the Edge" drawings by cartoonist Joe Martin and distinguished family psychologist Jon Carlson add humor to difficult topics as they introduce the central issue of each lesson. Case studies illustrate the lessons to the intended audience and assist in translating the lessons to real-life situations. In addition to explaining the common problems that exist in relationships, the book gives couples a discussion question to complete before moving on to the next lesson. These questions provide couples with a way of transitioning into conversation, which could be challenging to initiate otherwise. Because an unhappy marriage affects the entire family, the Glassers also incorporate a skill involving children to explain discontent in marriage. This is a way to open up a line of family communication in a non-confrontational manner. The skit, in appropriate language, is suitable for teens and preteens.

For anyone willing to put forth the necessary work to create a happier marriage, this book is an excellent tool. It would be most effective if both individuals in the relationship read the book concurrently and then discussed each lesson before they proceeded. Many relationships could be significantly strengthened if this resource was on the nightstand of every married or committed couple.

Reviewed by Sarah Boehm, graduate student in counseling at Creighton University.

Ruth Harper is a professor of counseling and human resource development at South Dakota State University and column coordinator for Resource Reviews. Submit reviews for consideration to Ruth.Harper@sdstate.edu.

Letters to the editor: cjt@counseling.org
Here’s a sampling of other books that have crossed our desks recently. Although we didn’t have time to give them full reviews, we thought counseling professionals might find them interesting nonetheless.

**Making Psychotherapy Work: Collaborating Effectively With Your Patient**

*By Steven A. Frankel, 2007, Psychosocial Press, 351 pages, $47, ISBN 1-887841-57-1*

This book focuses on what is known to be the critical ingredient in successful therapy: the therapeutic relationship. Author Steven Frankel stresses the importance of authenticity and humility in creating heartfelt connections with clients. The “bedrock” of true interpersonal connection is explored and encouraged in new ways in this book.

**Therapy’s Best: Practical Advice and Gems of Wisdom From Twenty Accomplished Counselors and Therapists**


It’s not me! It’s him (or her)! This book examines the mystery of why so many people are attracted to those who have personality disorders. More important, it provides strategies for detecting and avoiding potentially disastrous relationships, as well as help for those already in such partnerships. W. Brad Johnson and Kelly Murray point out that finding and maintaining a healthy relationship is hard, even under ideal conditions; it is much more difficult when one partner has a serious psychological problem. This book serves as a guide to personality disorders in relationships: the doubting partner (paranoid), the detached partner (schizoid), the dangerous partner (antisocial), the sticky partner (dependent) and so on. The authors lay out the nine top reasons people are attracted to others who have personality disorders (e.g., I need to be needed, I’m not worthy of more, etc.). Realistic expectations for these relationships are offered along with extremely well-informed, practical advice.

**Playing the Other: Dramatizing Personal Narratives in Playback Theatre**


Psychodrama has evolved since the 1970s, and one example of its evolution is explained clearly and compellingly in this book. Drama therapists may be familiar with the concepts described here, but other counselors will find it fascinating to consider what truths may be discovered through playback performances. Notions of the public and personal are explored in new ways, and the ethics and implications of enacting biographical stories are thoroughly discussed.

**When No One Understands: Letters to a Teenager on Life, Loss and the Hard Road to Adulthood**


In a series of intimate, eloquent letters, family psychologist Brad Sachs shares a synthesis of his extensive correspondence with Amanda (not her real name), a suicidal teenager unwilling to engage in traditional therapy. Deliberately excluding her responses but including key phrases of hers in his own missives, Sachs addresses issues that are widespread among adolescents: a mourning for childhood (often unrecognized), relationship troubles, changing family dynamics and the temptations of alcohol and drugs, to name a few. Gently, yet honestly, these letters confront Amanda with the fact that, yes, life can be hard, but it is also likely to improve, given time and patience. It’s a most convincing, humane, literary effort, one to be recommended to parents, counselors and anyone struggling to reach out with compassion to teens today.
pain, needs and wants of the dying person.”

Whitfield says neither counselors nor those working through grief should focus on the particular order of the five stages of death and dying: denial, anger, bargaining, depression and acceptance. “The grieving process does us. We don’t do it,” she asserts. “If we can let go of always needing to control and let things come up naturally on their own, half the battle will be over. The most overwhelming lesson I learned in doing my own grieving process is that there are feelings within me that are stronger than my will to control them. I had to give in and let them move and go at their own pace.” Furthermore, Whitfield strongly advocates for grief being considered a normal reaction to loss. She does not advocate for grief being considered a pace.” Furthermore, Whitfield strongly and let them move and go at their own time. Eventually we move through sadness and make meaning out of our loss. “Our society has convinced us that we (individuals who are grieving) are depressed and that drugs will relieve our pain. Prescription drugs only put our grief work on hold, where it will remain until we stop the drugs and let go into feeling the pain. It takes courage to face our loss.”

Whitfield says she frequently sees clients who needed assistance with their grief, but instead of counseling and guidance, they had received only a prescription. “A lot of physicians don’t know how to respect the grieving process,” she says. “We have to wean (our clients) off of these medications that are stopping the grieving process and help them learn how to grieve naturally.”

A changing perspective

Those considering grief counseling as a niche should seek additional educational opportunities related to grief and bereavement rather than relying solely on standard counseling curriculum, Whitfield advises. “Take all the extra classes and workshops you can. Realize that you can’t just sit back and be an expert,” she says. “You have to continually of Whitfield in order to help your clients.” She notes that grief and bereavement counseling is fairly new compared with other counseling specialties and is still actively growing and developing.

“I can remember 25 years ago when I had one of my presentations canceled (focusing on grief) because of a 10-year-old boy in Florida they didn’t want me to talk about putting our hands on dying patients,” Whitfield recalls. “They didn’t want me to talk about the word ‘spiritual.’ So that whole idea has gone to the wayside.”

Today, she notes, physical comfort, connection and spirituality all play vital roles in working with individuals who are dying. She teaches family members and helping professionals how to ease the suffering of those who are terminalill by using touch, meditation and visualization. “This helps the dying person to relax,” Whitfield says. “It also helps the round-the-clock caregivers to feel that they are giving some love to the person without hurting them. That’s something I like to teach people, and I’ve been told it’s cutting edge.”

Whitfield also provides support sessions via phone to individuals who are trying to allow a dying loved one to spend their final days at home rather than in a hospital. “I believe this is a trend that is getting more popular,” she says. “Leave them at home if they want to be at home.”

One of Whitfield’s clients, who previously came to Whitfield’s office for counseling sessions, is temporarily living outside the state so she can be with her mother and allow her to die at home. When the client is struggling, she calls Whitfield and has a 30- to 60-minute session over the phone. “It’s important to keep her on track so she doesn’t feel overresponsible and to help her keep her mother at home,” Whitfield explains. “That’s our whole goal — to keep her mother at home so she may die in her own bed.” After the mother has passed, the client will return to Atlanta to begin grief counseling with Whitfield.

Methods for helping people cope with the impending death of a loved one in hospice situations have evolved considerably over the past few decades, Whitfield says. “What I’ve seen change over the years is that, back then, we (caregivers) thought we had to control the situation,” she says. “What I’ve seen happen in my own practice is standing back and allowing the spirit to take over, standing back and letting the dying person run the show. It’s now about just being there as a communicator (in hospice situations) between the dying person and their loved ones.”

Client to counselor

Twenty years ago, Amy Liebman-Rapp was a highly respected designer, sales and marketing professional and management consultant in the Northeast residential construction industry. While she found psychology interesting, she never envisioned becoming a counselor and thanatologist.

Liebman-Rapp was introduced to grief therapy when she sought help coping with her husband’s chronic long-term illness. In 1991, after her husband was diagnosed by doctors with stage III cancer, she returned to school with the help of her 8-year-old son who coped with the loss. She dove into research, reading as much as she could find on the subject of children’s grief.

“Unfortunately, in the early nineties, there wasn’t very much out there on children’s bereavement (and) certainly not much on how to parent a grieving child,” she says. “So, it became an educational process for myself. I had already been in therapy for the past five years, and I had a great understanding in terms of family systems and chronic illness, but I wanted to know more.”

During this time, school officials and doctors expressed concerns that her son had attention deficit/hyperactivity disorder. But in trying to understand all that her son was going through, Liebman-Rapp discovered that AD/HD and child bereavement share similar features. Eventually, it was determined that her son did not have AD/HD; he was simply a grieving child.

Finding herself at a new stage in life as both a grieving spouse and parent, Liebman-Rapp decided to return to school to pursue a degree in counseling. She attended the graduate counseling program at Fordham University and The Dougy Center/National Center for Grieving Children and Families International Summer Institute in Portland, Ore. With the support of her mentor, Kenneth J. Doka, she collected information both from her research and her own experience and set out to help other parents console and care for grieving children.

“I was trying to make meaning in my own experience and trying to transform my own grief,” she says. “Dr. Doka encouraged me to go out in the world and be a teacher. It’s been an intuitive path for me. It’s never been like work; it is a love and passion.”

Today, Liebman-Rapp, a member of the American Counseling Association, is a private practitioner, speaker and educator. She’s also the founder of The Sanctuary, a New Jersey resource center that provides grief counseling, bereavement education and outreach to children, teenagers, adults, fam-
There is a lot of controversy surrounding grief therapy,” she acknowledges. “(The question is) does it work, or should you just do nothing? One of the hot topics in the field is whether narrative therapy works with grieving clients. There is a lot of controversy depending on the type of therapy a client is getting. I think it’s only recently that the telling of the story has been recognized to have therapeutic value in and of itself.”

Liebman-Rapp begins grief counseling with narrative therapy and then moves on to explore the client’s family history. “I come from a family systems perspective,” she says, “so what was going on in the family prior to the death has a lot to do with how the family will cope. It’s all interrelated.”

Another current discussion among grief counselors pertains to human resilience, Liebman-Rapp says, or the factors that make individuals either more or less able to cope and recover from the loss of a loved one. Practical matters, such as financial security, good health and positive social support, affect a person’s grief process as much as their personality traits, coping style and ability to find positive meaning after a traumatic loss, she says.

Much like Whitfield, Liebman-Rapp thinks the Kübler-Ross stages can serve as a starting point in helping clients understand the grieving process. However, she cautions that grief does not follow a linear timeline. “I’m a firm believer that people grieve in their own way. There’s no right or wrong,” she says. “There are misconceptions out there as to how much time it takes to go through the process and the stages, but people go back and forth. It takes years. This isn’t new within the grief (counseling) community, but it’s new in our culture and world. It’s the realization that grief is an ongoing process. Grief never ends. It’s revisited and experienced as secondary losses throughout a person’s life.”

Bernadette Graham, facilitator for ACA’s new Grief and Bereavement Interest Network, believes recent traumatic events, such as the war in Iraq, natural disasters and school shootings, have resulted in a changing worldview of grief and loss. “People are becoming more aware of these traumatic losses and are taking grief more seriously,” she says. “The difficult part to that is, in counseling, grief isn’t a diagnosis. Many counselors steer away from it or try to call it something else like anxiety or PTSD (post-traumatic stress disorder).”

Regardless, grief is something that counselors can’t shy away from, says Graham, a group counselor at Green Door, a Washington, D.C., community program that prepares people with severe and persistent mental illness to work and live independently. “All counselors — school counselors, private practitioners, mental health counselors — you are going to come across situations where people are grieving. Grief touches the entire spectrum of counseling. It’s important for counselors to have at least some knowledge base in this area. Even if they choose not to pursue that type of counseling with their client, they can recognize the issues and refer the client to a grief counselor.”

Graham adds that the counseling profession and society in general are becoming more accepting of the fact that individuals can grieve over any type of loss, be it a loved one, a relationship, a job or even a pet. Counselors who want to stay connected and current in the field of grief counseling are invited to join the ACA Grief and Bereavement Interest Network. For complete details or to sign up for the listserv, go to www.counseling.org and click on the box near the bottom of the page that says “About Us.” Scroll down the page until you see “Interest Network Facilitators” and click on the link for more information.

Learn more about grief counseling

The American Counseling Association offers the following online continuing education course on grief counseling.

Grief Counseling
Sharon Katz

Three-hour course
Grief is the most universal and painful experience that we encounter in ourselves and in our clients. Our society and the helping professions contain myths about how to handle grief that are at best totally unhelpful to clients and, often, potentially destructive. In this course, you will increase awareness of your attitudes, beliefs and feelings about grief by exploring your experiences with loss. You will learn about new approaches and understandings of loss and grief, as well as be offered practical strategies to assist your clients.

To access the course, visit the ACA website at www.counseling.org, click on “Resources,” then click on “Professional Development” and read the information under “Continuing Education Online.”

In addition, the ACA Annual Conference in Honolulu (March 26-30) will offer numerous sessions focused on grief and bereavement counseling. Among the options for attendees:

Learning Institute
- After the Storm Is Over: A Grief Perspective on Disaster Mental Health Work

Education Sessions
- The Storyteller’s Companion: Counselors as Creative Advocates for Bereaved Children
- Recognizing and Managing Maladaptive Coping Mechanisms in Families Facing Chronic Grief
- Bridging the Gap Between Training and Practice With Grief Issues
- Understanding and Counseling Military Families
- Counseling Children and Adolescents on Death and Dying: What to Say, How to Say It and Utilizing Expressive Therapy Tools

For dates, times and complete descriptions of these and other Learning Institutes and Education Sessions being offered at the ACA Conference, or to register to attend the conference, visit www.counseling.org/Convention/.
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Critical Incidents In Counseling Children

This phenomenal resource provides an extensive array of cases on counseling children under the age of 13 in both school and non-school settings. Each case offers specific suggestions for working with clients for whom words are not necessarily their primary form of communication. Instead of focusing only on “success stories,” the counselors in this book also discuss especially challenging cases and give candid descriptions of their self-doubt and confusion about how to proceed.

Critical Incidents In Counseling Children

Edited by Suzanne M. (Hosking) Dugger and Laurie A. Carlson

"Dugger and Carlson have masterfully compiled this comprehensive collection of real-life vignettes representing a diverse population of children. The critical incidents and responses from a list of who’s who in the world of counseling make this an extraordinary textbook and reference tool that definitely belongs on the shelves of clients and school counselors alike."

—Debra Verstey, MA, LPC, NCC
Past President, Association of Michigan School Counselors Counselor, Chippewa Valley High School, Clinton Township, Michigan

2007 432 pages
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ACA Member Price: $31.35

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

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Neuroscience and psychoanalysis

Freed anticipated that neurological data would eventually support his theories. He would be pleased to know that current developments in brain research have made it possible for scientists to integrate neuroscience with his ideas.

Solms, also the author of Clinical Studies in Neuro-Psychoanalysis, writes that the latest neurological findings are leading scientists to a "chemical framework of the mind that validates the general sketch Freud made over a century ago," when he was first grappling with questions regarding the relationship between the body and the mind and between normality and mental illness.

No longer can physicians tell their patients, “It’s all in your head,” because anything that is “all in the head” is also "all in the body," writes Regina Pally, a psychoanalyst and author of The Mind-Brain Relationship. She contends that "emotions connect not only the mind and the body of one individual but minds and bodies between individuals."

Neuroscience researchers are also accumulating support for the theories that explain how the past influences the present, why making the unconscious conscious is helpful, why we need to feel our feelings, how repression works, the meaning of dreams and other Freudian ideas. These findings are consistent with the work of Daniel Siegel (The Developing Mind), who addresses the influence of the environment on brain development, and Louis Cozolino (The Neuroscience of Psychotherapy), who explains how good counseling and psychotherapy can alter neural connections. Reconciling neurology with the counseling profession makes it possible to offer more integrated treatments and gives counselors more tools to help clients understand themselves, two of Freud’s early wishes.

What did we learn from the White old man?

Humanistic/existential psychology theorists also rejected Freud’s ideas about the unconscious, as if admitting its existence was incompatible with notions of personal responsibility and growth. The powerful feminist critique of Freud put the nail in his coffin, or rather, pushed him underground. Professors who no longer dared to speak Freud’s name stopped reading and teaching his ideas. And with the baby thrown out with the bathwater, countless counselors of subsequent generations "forgot" how much of what they did and knew was based on Freud.

Counseling Today ■ January 2008

Critical Incidents in Counseling Children
Nevertheless, it is clear that the counseling profession owes much to Freud. As Schwartz explains, “Freud had turned the informal listening sessions routinely practiced by physicians into a genuinely new therapy — long-term listening for the express purpose of therapeutic change.” It might be helpful to remember that Freud’s accomplishments took place before the advent of feminism, multiculturalism and social constructionism.

Gay’s observation is also fitting: “The question is not so much: What did Freud really say? A better question is: What has his work led to?”

Awareness. Freud taught us that people are not always in control or difficulties in post-traumatic stress or even procrastination. The more consciousness, the better. As Stephen Mitchell and Margaret Black explain in “Freud and Beyond,” Freud understood nature and nurture as operating in a complementary fashion. The more constitution played a part … the less experience was required to create mental health-related problems, and similarly, the less constitution played a part, the more traumatic experience was required.

For Freud, many ingredients explained the unpredictable outcome of character, personality, relationships, career decisions and mental health. Think of how often you are puzzled about the resilience of individuals who are “normal” despite being exposed to severe early trauma, or the unexplainable difficulties of a person with a trauma-free upbringing. Freud understood that rigid explanatory formulas did not exist, and good counselors do too.

Oedipus revisited. As the first family counselor, Freud thought the civilizing efforts of the adults provided the origins of ethical and moral codes of behavior. A revolutionary idea at the time, the conceptualization of the superego as the internalized voice of our early caretakers during our childhood and adolescent years would have long-lasting implications. By emphasizing the importance of the civilizing role of the early caretaking, Freud told us about the dangers of excesses in either direction.

Good therapeutic conversations lead or indirectly, to make awareness of ethical and moral codes of behavior. In your mind and may even make you a better counselor.

As the further this, you might conclude that you are more of a Freudian than you thought. That you were not rejecting Freud, but rather his interpreters. That you got rid of all of Freud because you disagreed with some of what he wrote. That you kept some core ideas without realizing that you did. Unearthing the Freudian within might help you become aware of how his ideas are embedded in your mind and may even make you a better counselor.
COMING EVENTS

National ACCA Conference
Feb. 6-9
Savannah, Ga.

The Fourth National American College Counseling Association Conference, in conjunction with the 15th Georgia College Counseling Association Conference, has the theme “Opening New Channels in College Counseling.” The registration form and list of programs are available on the ACCA website at www.collegecounseling.org.

The registration fee includes two lunches and an opening reception. There is also a graduate student reception and mentor program. ACCA encourages graduate students to attend.

The conference will be held at the Hyatt Regency-Savannah; reservation information is available on the website. E-mail Sylvia Shortt at sshortt@westga.edu for more information. Click on the “registration folder” link at www.collegecounseling.org for a complete list of program titles and activities.

Fourth Interamerican Congress on Counseling
April 14-18
Managua, Nicaragua

The central theme of the Fourth Inter-American Congress on Counseling (Sociedad Interamericana de Counseling — SIC) revolves around the relationship between culture, community and counseling. The congress will offer professional activities whereby attendees will spend a day at one of four local community agencies doing hands-on work to contribute to the well-being of the centers. The congress will also take attendees on a tour of the city to show firsthand the devastation of civil war and natural disasters, such as the earthquake that shook Managua on Dec. 23, 1972.

For information on proposal submissions, registration and housing, view the congress’s homepage at www.sic.org.hn.

Bipolar Disorder Conference
April 19
Austin, Texas

Diablo Behavioral Healthcare Neuro-Science Seminars will present a conference on juvenile-onset bipolar disorder. This event will be held at the Austin Convention Center. This unique two-day presentation will provide attendees a rare opportunity for quality, fully accredited continuing education. For more information, visit www.behaviorquest.com.

Behavioral Healthcare Conference
May 1-3
Boston

The National Council for Community Behavioral Healthcare’s annual conference, “Simply the Best, Better Than All the Rest,” is a once-a-year opportunity to learn from innovative, cutting-edge thinkers, be inspired by world-renowned speakers and connect with colleagues from around the globe.

From scientific advances to leadership training, there will be a robust curriculum featuring an array of tools and insights to help community behavioral health providers enhance business operations and revenue and improve clinical outcomes. For more information, visit www.thenationalcouncil.org/Boston.

FYI

Call for submissions, manuscripts

The Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling, a division of the American Counseling Association, is inviting submissions for its journal, The Journal of LGBT Issues in Counseling. The intent of this journal is to publish articles relevant to working with sexual minorities that will be of interest to counselors, counselor educators and other counseling-related professionals who work across a wide spectrum of fields, including in schools, mental health settings, family agencies, and colleges and universities.

This journal welcomes the submission of articles that reflect issues pertinent to the health of sexual minority individuals and communities, and should focus on one of the following areas: (1) new research in the field of counseling, (2) a review of the literature that critically integrates previous work around a specific topic, (3) introduction of new techniques or innovations in service delivery within the counseling field or (4) theoretical or conceptual pieces that reflect new ideas or new ways of integrating previously held ideas. The journal is distributed quarterly.

Manuscripts should be prepared according to the guidelines of the most recent Publication Manual of the American Psychological Association. Manuscripts should be sent as attachments via the e-mail address below. All work must be done in Microsoft Word. It is expected that authors will follow the 2005 ACA Code of Ethics. It should be understood that authors bear full responsibility for the accuracy of all references, quotations, tables, figures and the overall content of their articles. Contact the editor for complete submission guidelines.

Submit articles to Ned Farley, Editor, The Journal of LGBT Issues in Counseling, at nfarley@untichoicea.edu. Initial confirmation will be sent via e-mail.

The Journal for the Professional Counselor invites submission of manuscripts that address the interests of counselors in school, college, agency and private practice settings. Scholarly research on a broad range of counseling-related topics is welcome.

Submissions may address varied domains, but practical implications should be explicit. The Journal for the Professional Counselor is a refereed journal based in current professional issues, theory, scientific research, innovative programs and effective practices.

Manuscripts may be sent to Paul M. Parsons, Editor, Journal for the Professional Counselor, Medaille College, 18 Agassiz Circle, Buffalo, NY 14214-9985. The guidelines for authors are listed on the homepage, including the use of the reference style in the Publication Manual of the American Psychological Association.

Mental Health America welcomes proposals for poster and breakout sessions to be presented at the 2008 Mental Health America Annual Conference, including the inaugural National Mental Health Promotion and Prevention Summit, to be held June 4-7 at the Hyatt Regency Washington on Capitol Hill in Washington, D.C. Presenters will have a chance to share their knowledge with hundreds of mental health advocates, consumers, practitioners, policymakers and the volunteer and executive leaders of Mental Health America’s 320 affiliate offices.

Submissions are due to Mental Health America no later than Jan. 15. Visit www.mentalhealthamerica.net/go/conference for submission details.

Seeking board members

Counseling and Values, the journal of the Association for Spiritual, Ethical, and Religious Values in Counseling and published by the American Counseling Association, is seeking applicants for its editorial board. The term will last from 2008 to 2011.

All ACA members who are interested in serving on the editorial board of the journal are encouraged to submit their application materials by Feb. 15. Notification will occur in late April. Primary responsibilities include anonymously reviewing manuscripts and submitting the reviews to the editor within 30 days of receipt. Editorial board members should be familiar with the content and aims of Counseling and Values and ASERVIC, have sound opinions on what is relevant to readers and be capable of offering constructive feedback to authors. Typically, editorial board members/reviewers are assigned one manuscript per month.

Send electronic copies of your résumé or vita and cover letter highlighting your qualifications as a reviewer, including ACA membership, areas of expertise and qualifications to be a reviewer, to the journal’s associate editor. The term will last from 2008 to 2011.

Applications should include the following: a statement of interest and related expertise, a current vita and a description of relevant experience as a reviewer to professional journals. The application deadline is Jan. 31. The position of associate editor is a nonpaid, service position and will involve working closely with the current editor to ensure that the journal continues to maintain its high standard of excellence.

Scholarship opportunity

The Melanie Merola O’Donnell Memorial Scholarship ($2,500) is being offered to students who are pursuing a master’s or doctorate in the mental health field. The scholarship is in memory of a native of Saratoga Springs, N.Y., who was killed by an individual driving under the influence of drugs on Jan. 5, 2006. The scholarship is a way for Melanie’s legacy to live on.

Applications for the scholarship are due Feb. 8. Visit www.cmcsscholarships.com for specific details on applying. The scholarship recipient will be personally notified and publicly announced by June 1. All other applicants will be notified electronically. Contact Maria Maurer at mmpmaurer128@yahoo.com or call 917.521.0469 with further questions.
We are pleased to announce that Registration is now open for AMHCA 2008! The 2007 Annual Conference in New Orleans set a new attendance record and we are looking forward to welcoming you to San Diego in 2008!

The site for the AMHCA 2008 Annual Conference is the Town and Country Resort and Convention Center in Mission Valley, San Diego. San Diego is one of the most appealing conference locations in the United States—visit Balboa Park, beautiful La Jolla beaches, Coronado, and enjoy one of the most livable big cities in America!

Learn from and meet with your peers!
- Keynote Address
- Welcome Reception
- Three Tracks
- Closing Reception
- Awards Ceremony and Banquet
- Poster Sessions

Enjoy dynamic, high-energy presentations from prominent experts in our field, and breakout presentations from peers around the country.

We look forward to seeing you in San Diego!
Mark your calendar now and save money by registering!

Registration Fees
Fees are all-inclusive. Registrations must be postmarked by the dead line to qualify for discounts.
AMHCA Non Members
- $395 Early Bird (Act by May 15)
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- $525 One Day Fee (Act by June 15)

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- $250 Early Bird (Act by May 15)
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Jose Szapocznik, Ph.D.,
developer of One-Person Family Therapy and Brief Structural Therapy, is a clinical psychologist and one of the nation's leading family therapists specializing in Hispanic families. Jose is currently director of the Center for Family Studies at the University of Miami. He will give an all-day workshop following his keynote address.

Lisa Boesky, Ph.D., is a clinical psychologist specializing in the identification, management, and treatment of adolescents and young adults with mental health disorders. Her new book, "When to Worry: How to Tell if Your Teen Needs Help—and What to Do About It," has been featured on national television, radio, magazines, and newspapers.

I have made peace with ambiguity by reframing and remembering, sometimes on a daily basis, why I entered the counseling field and how the predictable, boring business day had driven me out of that environment. The ambiguity of counseling is exactly what creates newness and excitement. Embracing this ambiguity rather than fighting it created better sessions with reduced emotional swings.

Connect with the client

Connecting with the client is such a basic classroom lesson, but only internship turned it into a reality for me. When the connection between an adolescent and me was weak, no counseling actually took place. The challenge instead became to figure out what would forge this connection.

I learned this lesson the hard way when one boy refused to say anything during our 50-minute sessions for two solid weeks. He wouldn’t even look at me. Disappointment set in, and I had thoughts about being a failure as a counselor. The third week, he brought his PlayStation 2 to counseling and stayed busy playing games, which also meant he was completely ignoring me. But I decided the PlayStation 2 could potentially provide the connection we were missing. I told him about the types of video games I played as a kid, and he smiled. It was the first smile I had seen from him in weeks. He even asked if I would like to learn how to play his PlayStation 2. Allowing the client to become my teacher created just the connection I had been seeking, and talking was no longer a problem.

Counseling became more productive as I first found creative ways to connect with clients before focusing on issues. This required learning about the client’s interests and then using those interests to help forge a connection. Remembering this very basic lesson about connecting quietened my emotions and gave me something to work toward with clients. What the classroom could not teach was how to create these unique connections because each client was a different person and needed different things from me. There was no formula to follow for establishing these connections. When I accepted that, the days got easier.

Trust the process

“Relax and trust the process.” I heard this statement repeatedly in the classroom and thought I had a solid grasp of its meaning. But while dealing with the emotional ups and downs of internship and the reality of clients, the process seemed inaccessible. As I struggled emotionally, I did not trust much of anything, including the process or myself.

“Trust the process” seems pretty basic, but it’s easily forgotten when an adolescent boy is glaring at you for taking him out of gym class. With a huge lump in my throat and fear creeping in again, I realized something needed to be said. My eloquent feeling reflection, “You feel angry that I took you out of gym class,” was not quite what the moment needed. Now the boy looked like he wanted to strangle me. In a panic I asked, “Would you like to play a game?” My heart jumped when he asked what games I had. I had brought Battleship to work that day. His glaring stopped. We played, but he remained difficult. Every time we met thereafter, a nagging fear crept in about whether I was actually doing any counseling. Was game playing a part of the process? Was this success or simply avoidance of problems?

Real counseling did not always look like prepracticum sessions. Many fears about doing counseling the right way lurked in the shadows. I had unsettlings thoughts about whether talking and playing Battleship with a client counted as “real” counseling.

Relax and trust the process. I had to rethink the statement. I wasn’t fixing this nontalking client, but we seemed to be getting along better and our interactions were positive. At the end of each session, I would ask myself, “Did I do my best with this client?” Usually the answer was yes.

The “process” is not as simple as the step-by-step model presented in the textbooks. Trust is a hard thing to come by, but I was gaining on it with this student and trying not to be overly focused on exactly how right it was. Learning to trust the process was not an academic or thinking problem. Getting there was only going to happen through real-life experiences with clients.

Those first-day jitters resulted in weeks of emotional ups and downs as I struggled to remember and put together all I had learned in the classroom. Clients were my best teachers, because by engaging in the emotional struggle with them, classroom lessons were firmly cemented. If only I could tell them that now.

The classroom can only teach so much about how to work with clients; actual real-life experience teaches the rest. The emotional turbulence I experienced was not pleasant, and the jumbled mess of information I encountered was confusing, but I will always be grateful for internship. It was a time for remembering what counseling is all about and for recalling why I chose to become a counselor in the first place. I’m not an expert yet, but I’m a lot better — and getting better all the time.

Mary Janicke, who retired last year after 55 years of service to the American Counseling Association, joined her former coworkers for a holiday brunch in December. At the brunch, Executive Director Richard Yep revealed that the conference room at ACA headquarters was being renamed in Mary’s honor.
Too much help, too little benefit

By now, most of us are aware that formal crisis debriefing, such as Critical Incident Stress Debriefing, has not been found beneficial in preventing or easing later stress reactions in trauma survivors. Popular in the early 2000s, these debriefing procedures were designed as early, single-session, highly structured group meetings that required each participant to talk about his or her thoughts and feelings related to the traumatic event.

In the Fall 2007 Journal of Humanistic Counseling, Education and Development, Mark Seely reviews the empirical research on psychological debriefing and discusses the reasons why the practice may be flawed: It may interfere with individuals' own coping processes, and its assumption that refusal to express feelings after a traumatic event is a pathological form of denial may be completely unwarranted.

Seely offers a person-centered approach to crisis intervention that allows the client to make use of existing coping skills and to set the pace of self-expression and recovery. Furthermore, he suggests that this approach should allow for crisis situations as opportunities for growth.

Measuring counselor burnout

Counseling is one of the health professions in which emotional and physical burnout among practitioners is both a serious problem and an ethical concern. The 2005 ACA Code of Ethics (Standard C.2.g., “Impairment”) requires counselors to be alert to burnout and to seek assistance if they feel professionally impaired. While early conceptions of burnout (and the most popular instrument to measure it) focus on the disorder as an individual problem, more recent analyses of job strain take note of organizational contributors to burnout among counselors. These factors may include lack of power in decision-making, lack of feedback, high work demands coupled with low pay, and role conflict.

Eleven researchers from five universities present a new scale, the Counselor Burnout Inventory (CBI), in the October 2007 Measurement and Evaluation in Counseling and Development. The article presents exploration of the factor structure, concurrent validity, internal consistency and test-retest reliability for the CBI. The CBI assesses counselors on five dimensions: exhaustion, negative work environment, devaluing clients, feelings of incompetence and deterioration of personal life.

Living it up in old age

Following current interest in positive psychology across the life span, Jane Myers and Suzanne Degges-White studied 142 residents of a posh retirement community in the Southeast. The residents were between the ages of 73 and 101 and mostly Caucasian; 61 percent had bachelor’s, master’s or doctoral degrees. Furthermore, this upscale retirement setting valued and provided social activities both for fun and for intellectual interests.

The researchers collected scores on a wellness inventory covering five factors:
- Creative self
- Coping self
- Social self
- Essential self (including spiritual, identity and self-care items)
- Physical self

The residents also filled out a measure of perceived stress and a measure of “mattering,” meaning perceiving themselves as important to others. Compared with a norm group of 2,017 adults ages 18 to 59, the residents of the retirement community scored higher on all five factors in the wellness inventory as well as on the “mattering” scale. They also reported less perceived stress than their younger counterparts.

The study, reported in the Fall 2007 issue of Adultspan Journal, indicates that class privilege possesses impressive longevity.
The New ACA Code of Ethics: What Practitioners, Instructors, and Supervisors Need To Know
By David Kaplan, PhD - 6 CE Credit Hours

What Could Be More Important?
The latest major revision of the ACA Code of Ethics has had a significant impact on professional counselors across all settings and specialties. You need to be aware of new ethical imperatives in such areas as confidentiality, dual relationships, multiculturalism and diversity, technology, recordkeeping, diagnosis, end-of-life care, and the selection of interventions — to provide the best service for your clients, and to protect yourself.

All ACA members agree to abide by the Code of Ethics
More than twenty state licensing boards use the ACA code as the basis for their standards of practice and the adjudication of client complaints.

The new 6-hour course from ACA will ensure that you are up to date on the most current concepts in ethics and know what must be done to fully comply with the ACA Code of Ethics and its focus on promoting client welfare. The ACA Code of Ethics is available FREE at counseling.org.

Take the course online at counseling.org
Click on the Resources tab, go to Professional Development and click on “Take Online Courses”
Non-members: $150 | Member price: $108
Call 800-347-6647 x222 for more information.
Interactive website launched for those living with depression

In December, the Depression and Bipolar Support Alliance launched FacingUs.org, a website with interactive features that enable those living with depression and bipolar disorder to create their own personal wellness tools to aid them on their road to recovery. The site is designed to serve as a “clubhouse,” an online community that provides inspiration and encouragement to others. FacingUs.org was created to provide a safe haven for those living with mood disorders.

Although the site is designed for people living with depression and bipolar disorder, it is open to anyone interested in personal wellness. On the site, users can:
- Develop a wellness plan to help keep their days balanced and positive
- Keep a personal online journal of their daily feelings and emotions (entries are completely private)
- Share wellness tips with others on ways to maintain good mental and physical health
- Create a wellness book filled with tips for maintaining a healthy life (tips can be a combination of personal tips and those chosen from a library of shared tips posted to the site by other users)
- Print a copy of their wellness book, wellness plan and personal journal as a book with beautiful artwork as a cover
- Browse the multimedia room for a variety of art, audio and video presentations, public messages and personal video stories
- Connect to important resources that offer additional information about, and resources for, mood disorders

To find out more, visit www.FacingUs.org. To learn more about DBSA, visit www.DBSAlliance.org or call 800.826.3632.

Online survey provides insights into adolescent stress

Teen stress is no longer just about getting good grades or messybreakups. The fast-paced world we live in has introduced a host of new pressures that young people, especially young women, face. This trend is evident among girls all across the country, from small towns to Hollywood.

What are some of the factors contributing to this new wave of stress, and how is it affecting teens’ behavior? To answer these questions, BAN antiperspirant/deodorant partnered with Seventeen.com to host an online poll of young women across the country. Among the poll results:
- 21 percent of young girls said they turn to comfort food after they have a bad day.
- 11 percent said they eat junk food after a stressful event such as failing a biology test.
- 44 percent said their personality leans toward “up and down,” depending on their mood.
- Nearly one-fifth of respondents said they would be voted “most likely to stress out” by their classmates.
- 37 percent described themselves as emotional eaters, saying they always want to eat when they’re happy or that eating is the only thing that gets them over the blues.
- 12 percent said that the best reason for indulging in alcohol or junk food is as a way to “cheer up.”

To gain further insight into the survey findings, BAN enlisted Michelle Pearlman, a clinical psychologist in private practice in New York City. Pearlman disclosed some of the major factors contributing to adolescent stress.

- **The Internet:** The rise of websites such as MySpace and Facebook have given young people less time to themselves, as they are constantly connected to their friends and peers. While these websites can be beneficial and affect teens’ relationships in a positive way, they can also lead to more opportunities for gossip and increase the likelihood that rumors will spread.
- **The quest for perfection:** When Britney Spears appeared recently on MTV, her weight was criticized all over TV and on the Internet. The onslaught of similar messages can contribute to lower self-esteem and stress about one’s physical appearance.
- **Overscheduling:** With the increased expectation of getting into college, teens today have more pressure than ever before to not only maintain good grades, but to have a host of extracurricular activities to put on their college applications. Teens need time to relax and unwind, just as adults do.

“Girls handle their emotions differently than boys and, as a result, are twice as likely as boys to suffer from depression,” Pearlman said. “Too much stress is a factor that often leads to feelings of depression, so it is very important for teens to try to manage stress and for parents to be involved too.” When it comes to managing stress, Pearlman recommends that teens:
- Pay attention to situations that trigger feelings of stress and then use relaxation strategies (such as deep breathing and visualization) to keep those feelings under control.
- Decrease negative self-statements and increase positive self-statements.
- Take breaks by talking to friends, exercising, listening to music, etc.
- Ask for support or help if they need it.

To help their children prevent stress from getting out of control, Pearlman recommends that parents:
- Monitor the time their children spend online.
- Ask to see their children’s MySpace and Facebook pages.
- Talk and, most important, listen to what teens have to say about their day-to-day lives.
- Make everyone sit down and have dinner as a family to get better informed about teens’ lives.
- Use young celebrities as examples to talk to teens about issues such as drug abuse, weight loss and gain, and sex.

People/University News

**Norm Gysbers,** an American Counseling Association past president (1977-78), was honored with a curator’s professorship for his national and international work with school counseling. The prestigious academic position, awarded by the University of Missouri Board of Curators, is reserved for outstanding scholars with established reputations. He is the third education faculty member to receive this distinction.

Gysbers is a national leader in career development theory as well as school guidance and counseling program development. Last year, he spent his summer touring schools in China, Japan and South Korea, where government ministries and school officials alike attended his presentations on guidance programs and ways to improve student achievement. Since 2000, he has been working with school officials in Hong Kong to help organize successful school guidance and counseling activities, giving several lectures on topics such as performance anxiety, relationship issues and planning for the future.

Gysbers’ guidance and counseling programs have been implemented throughout the United States. Several of his books have been translated into Italian, Korean, Japanese and Mandarin.

**University of Nevada-Las Vegas** professor **Larry Ashley** received national recognition for his contributions to addiction counseling, being named the recipient of the Mel Schustad Professional of the Year Award by NAADAC, the Association for Addiction Professionals.

“I no longer consider addiction counseling and treatment a field; it is a profession,” Ashley said, “I am honored to help prepare and educate true addiction professionals, and am honored to receive this award.”

Ashley is a professor and researcher at UNLV, with more than 30 years of experience in substance abuse and trauma counseling. Because of his extensive clinical experience and speaking engagements, he is considered to be a leading expert on post-traumatic stress disorder and issues related to addictions. He takes special interest in the impact of war on soldiers worldwide.

The Department of Counseling and Human Services at St. Mary’s University in San Antonio was awarded a two-year, $284,000 grant to help fill the mental health services gap for area military members serving in Iraq and Afghanistan and their families. The Texas Resources for Iraq-Afghanistan Deployment (TRIAD) Fund of the San Antonio Area Foundation is funding the grant.

Efforts are under way to identify and assist military members and their families who are in need of services, which will be provided at four sites around the city. To prepare for the delivery of such services, graduate students take an extra course, Counseling Military Families, designed to provide the most up-to-date information on the mental health needs and treatment of soldiers and their family members. The grant fills a gap in which few mental health professionals are prepared to meet the needs of returning veterans and their families. The clinical expertise gained through the grant initiatives will also allow for the dissemination of much-needed expertise to the broader mental health community.

For more information, call the Department of Counseling and Human Services at St. Mary’s University at 210.436.3226 or visit www.stmarytx.edu/grad/counseling.
FLORIDA

ECKER COLLEGE
Assistant Professor of Human Development

Tenure-track position to begin September, 2008. Ph.D. required: Preferred specializations: Community Psychology, Social Work, Counseling, or Human Development. Cluster hire to interdisciplinary major with multicultural dimension. Teach seven courses per academic year, including Community Mental Health, Counseling Strategies, and Lifespan Development. Participation in an interdisciplinary, values-oriented general education program is required, including a regular rotation in the two-semester freshman program. Eckerd College, the only independent national liberal arts college in Florida, has a tradition of innovative education and teaching/mentoring excellence. Send a letter of application, vita, teaching evaluations, statement of teaching philosophy, undergraduate and graduate transcripts, and three letters of recommendation. Address all materials to Dr. April Schwarzmuller, Eckerd College, 4200 54th Avenue South, St. Petersburg, FL 33711. E-mail inquiries are welcome: schwara@eckerd.edu. No electronic applications please. EOE.

INDIANA

INDIANA UNIVERSITY SOUTHEAST
Assistant Professor

Tenure-track Assistant Professor Counselor Education for MS in School Counseling in School of Education for fall 2008; ASCA/Ed Trust cohort model. Teach individual and group supervision. Summer teaching is available. Preference given to a master's degree and cohort model. IU Southeast is a metropolitan Louisville, KY and program has students from both states. Doctorate and previous graduate teaching experience in counseling required. For full position description and application process, visit www.ius.edu/hr/employment_opportunities.cfm. Review of applications begin on February 1, 2008.

LOUISIANA

LOYOLA UNIVERSITY NEW ORLEANS
Counselor Education Faculty Appointment - Assistant Professor

CACREP Accredited Community Counseling Program Seeks to Fill a Tenure Track Position. Responsibilities include: Teaching graduate counseling courses including methods of research, statistics, career and lifestyle development, practicum, and courses related to school counseling; advising graduate students in the counseling program, research, community and university service; participation in university, college and departmental activities; grant writing and grant administration. Doctorate in counseling or counselor education from a CACREP accredited program with an emphasis in adolescent/family therapy preferred. The applicant should have strong teaching and clinical skills. Send resume and three letters of recommendation to Dr. Kevin Fall, Loyola University, Box 66, 6363 St. Charles Avenue, New Orleans, LA 70118. Loyola is an Equal Opportunity Employer. Women and minorities are encouraged to apply. The review of applications will begin on January 15th and will continue until the position is filled. Position begins August 2008.

SOUTHEASTERN LOUISIANA UNIVERSITY
Counselor Education/Assistant Professor of Counseling

The counseling graduate program housed in the Department of Counseling and Human Development at Southeastern Louisiana University seeks to fill a tenure-track, assistant professor of counseling position beginning August 2008. Earned doctorate in Counselor Education from a CACREP institution required, with university teaching experience preferred. Candidate must be LPC or LPC eligible in the state of Louisiana. Preference will be given to candidates with graduate counseling experience, supervisory potential in research, teaching and scholarly activity, and must meet the requirements established by the Louisiana LPC board for board-approved supervisor status. Applicants must be committed to working with diversity. Responsibilities included teaching graduate counseling courses, supervising practicum and internship experiences, as well as active participation in research, writing and service activities. Maintaining office hours, mentoring students, holding committee appointments, and participating in university activities are also required. Salary is commensurate with experience and qualifications. To ensure consideration, application materials must be received by January 18, 2008. Qualified applicants should submit letter of application and curriculum vitae, including the names and full contact information of at least three (3) professional references and copies of ALL transcripts (originals required upon employment) to: Dr. June Williams, Chair, Southeastern Louisiana University, Department of Counseling & Human Development, SLU 10863, Hammond, LA 70402. Southeastern is an AA/EEO employer.

XAVIER UNIVERSITY of LOUISIANA
Associate/Assistant Professor, Counselor Education

Xavier University’s Division of Education invites applications for a full time tenure track position in either School Counseling or Clinical Mental Health at the Assistant/Associate Professor level beginning August 2008. The University: Founded in 1915 and is the only Historically Black Catholic Institution in the United States. Located in the City of New Orleans, Xavier serves a diverse population of approximately 5,000 students. New Orleans supports many cultural attractions including the New Orleans Museum of Art which attracts national and international exhibits, the Audubon Zoo and Aquarium, the Louisiana Philharmonic Orchestra, and the New Orleans Opera which are located in the downtown metropolitan area. Currently, the University has a comprehensive program of innovative curricular designs and student training opportunities; faculty development; and maintaining and enhancing relationships with area schools, community agencies and other relevant constituents. The Chair will also teach and advise in the graduate program. Academic rank is at the Associate or Full Professor level. Salary and fringe benefits are competitive. Review of applications will begin immediately, and the position will remain open until filled. A letter of application and curriculum vitae should be forwarded to Counseling Faculty/Department Chair Search Committee c/o Conne’ Kinsey, Johns Hopkins University, School of Education, 203 Shriver, North Charles Street, Baltimore, MD 21218. A/AEOE, Smoke Free and Drug Free.

MARYLAND

JOHNS HOPKINS UNIVERSITY
Counseling Faculty/Department Chair

The Department of Counseling and Human Services offers graduate programs in School Counseling, Clinical Community Counseling, and Organizational Counseling as well as a variety of graduate certificates for counseling professionals. Courses are offered at three major centers in the Baltimore-Washington metropolitan area. Currently, the department is accepting applications for the position of Department Chair. Applicants for the position must have an earned doctorate in Counselor Education (or a closely related field), with extensive experience in graduate counselor education; academic administrative leadership at the master’s and, preferably, doctoral levels; and an accomplished record in scholarship and external funding. Favorable candidates should have a demonstrated commitment to diversity and equity issues in the profession through scholarship, professional practice, curriculum development and service. Knowledge of CACREP and NCATE accreditation processes is also strongly desirable. Applicants for the position should also have demonstrated leadership in providing collaborative visionary leadership for the department; budget management; development and support of innovative curricular designs and student training opportunities; faculty development; and maintaining and enhancing relationships with area schools, community agencies and other relevant constituents. The Chair will also teach and advise in the graduate program. Review of applications will begin immediately, and the position will remain open until filled. A letter of application and curriculum vitae should be forwarded to Counseling Faculty/Department Chair Search Committee c/o Conne’ Kinsey, Johns Hopkins University, School of Education, 203 Shriver, North Charles Street, Baltimore, MD 21218. A/AEOE, Smoke Free and Drug Free.

ACT Summer Internship Program

ACT currently conducts an Educational Internship Program for attracting and retaining students from diverse, underrepresented backgrounds. In 2008, the program received a $1.8 million grant from the Department of Education. The National Internship Program's website is http://www.internshipprogram.com. A searchable database of internships is located at the ACT website: http://www.act.org. The National Internship Program, known as NIP, is located at the University of Maryland. The University of Maryland, Tobacco-Free, Drug-Free, Smoke-Free and Alcohol-Free.

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ST. CLOUD STATE UNIVERSITY
Assistant/Associate Professor of Counselor Education
Position: The School of Education invites applications for a full-time, nine month position at the Assistant/Associate Professor level in Counselor Education. This position is to begin fall semester of 2008.
Responsibilities: The successful candidate will be responsible for teaching undergraduate and graduate courses in Counselor Education as well as for other duties associated with the position.
Qualifications: Earned doctorate in counseling psychology or related field; evidence of scholarly productivity; ability to rank graduate students; and a demonstrated commitment to professional development and excellence in teaching.
Applications: Send letters of reference, curriculum vitae, and statement of teaching and research interests to: Dr. Monica M. McKee, Chair, Department of Counselor Education, St. Cloud State University, College of Education, St. Cloud, MN 56301. Review of applications will begin January 15, 2008 and continue until the position is filled.
Instructions for Applying: Applications should be submitted online at http://www.stcloudstate.edu/employment. A letter of reference and a letter that includes information about the candidate's teaching and research experience should be submitted electronically at that website. Applications will not be accepted by mail.
ST. CLOUD STATE UNIVERSITY
Counselor Education
Department of Counseling and Personnel Services
College of Education
St. Cloud, Minnesota 56301
Tel: 320-757-5511
Fax: 320-757-5926
E-mail: wjlepkowski@stcloudstate.edu

MISSISSIPPI UNIVERSITY OF MISSISSIPPI
School of Education
Assistant/Associate Professor of Education
Position: Tenure-track faculty position is available at the Assistant/Associate Professor level in the Department of Special Education in the School of Education at the University of Mississippi. The position will start August 1, 2008. The University of Mississippi is an equal opportunity, affirmative action institution and an ADA/504 institution. Individuals with disabilities are encouraged to apply.
Responsibilities: The successful candidate will have a doctorate in special education or related field and demonstrate an ability to consult with diverse university constituencies, particularly those in urban settings. Responsibilities include teaching, supervision, and publication. Preference for candidates with national publications. The position is available at the Assistant/Associate Professor level. Salary is commensurate with experience and qualifications. Applications should be submitted to: Professor Jim L. Ford, Chair, Department of Special Education, University of Mississippi, University, MS 38677. Application materials should include a cover letter, curriculum vitae, statement of research interests, and three letters of reference. Applications and complete materials must be submitted by January 6, 2008. Review of applications will begin December 3, 2007, and continue until the position is filled. Mailed applications will not be accepted.
William J. Ford, Chair, Department of Special Education
University of Mississippi
University, MS 38677
Phone: 662-915-1152
Fax: 662-915-1151
E-mail: ford@olemiss.edu

Counselling Today
filled. A complete application consists of a letter of interest that shows evidence of the qualifications described above, a current resume/vita, and the names, addresses, telephone numbers of five references, as well as your vision of how a counselor contributes to the personal and academic success of students. Nominations are welcomed. Application materials must be submitted via the secure MSU Online Employment System at: https://www.jobs.msstate.edu.

NEW JERSEY

FAIRLEIGH DICKINSON UNIVERSITY, COLLEGE AT FLORHAM
Assistant Professor - Counseling
The Department of Psychology, College at Florham, Fairleigh Dickinson University invites applications for a tenure track position at the assistant professor level beginning August 2008. The successful candidate will demonstrate excellence in teaching both undergraduate psychology courses and graduate courses in the counseling area. He/she will be involved in shaping and guiding the Counseling Master’s program and the current CACREP accreditation process. An earned doctorate in Counseling Psychology or Counseling required. A minimum of three years of college/graduate teaching experience required and LPC or eligibility strongly preferred. Contact Dr. Juneau Gavy, Chair by mail or phone. Review of applications will begin immediately and continue until position is filled. Send letter of interest, up-to-date resume and names and contact information for three professional references. Apply directly to the Chair or as identified: Keen University, 1000 Morris Avenue, Union, NJ 07083. Official transcripts and three letters of recommendation are required before appointment.

KEAN UNIVERSITY
Assistant Professor
Department of Counseling Education to teach graduate courses in counseling; to be responsible for the assessment and supervision of practicum/internship and graduate research. Position requires professional specialty in school counseling (including New Jersey school counseling certification or eligibility). Earned doctorate in Counseling, Counseling Education or Counseling Psychology required. Submit letter of interest, vita, three recommendation letters, official transcripts of college/graduate school, and three letters of recommendation before appointment. Send letter of interest, vita, and three letters of recommendation to: Professor A. Mecca, Chair, Department of Counseling, Keen University, 1000 Morris Avenue, Union, NJ 07083.

Caroline, LA

DUQUESNE UNIVERSITY
Counselor Education Program (CACREP) in Pittsburgh, PA is accepting applications for the Fall 2008 Ph.D. evening and weekend cohort, Application (GRE scores) due February 4, 2008. Assistantships and other funding available. Opportunities to teach and supervise. Contact Denise Clemente (clemented@duq.edu), 412-396-5567. http://www.duq.edu/exes

Pennsylvania

KUTZTOWN UNIVERSITY
Two Tenure-Track Positions
The Department of Counseling and Human Services at Kutztown University is seeking to fill Two Tenure-Track Graduate Faculty positions to begin August 25, 2008. Rank is negotiable contingent upon qualifications and administrative approval. Requirements of all candidates: Doctorate in counseling or related field from nationally accredited institution; three or more years graduate level teaching experience; record of scholarship; three or more years clinical/counseling experience (school experience preferred); PA Licensed Professional Counselor (preferred) or eligible; counselor supervision experience, and knowledge of CACREP standards. Position One: Counselor certified. Couples, family, child, and/or adolescent speciality is a plus. Position Two: Candidates: Specialty in one or more of the following areas: community mental health; couples, marital, and family; child and adolescent; school; student affairs; college. License/Certification is a plus. Submit: Cover letter (specify position sought), vita, three recommendation letters, official transcripts of graduate coursework, samples of scholarship, and copies of certificates/licenses to: Dr. Joseph Hamlin, Search Committee Chair, Department of Counseling and Human Services, Kutztown University, PA 19530. Review of applications begins immediately and continues until positions are filled. Candidates will complete a successful interview and classroom demonstration. Kutztown University of Pennsylvania is an Affirmative Action/Equal Opportunity employer and actively solicits applications from women and minorities. Kutztown University of Pennsylvania is a member of the State System of Higher Education.

AMERICAN COUNSELING ASSOCIATION
Professional Projects Coordinator
The American Counseling Association has a PART TIME opportunity (approximately 20 hours per week) for a Professional Projects Coordinator to work on its staff. Interested candidates should apply directly to the Chief Professional Officer, and will be involved in developing and coordinating professional projects consistent with the Association’s strategic plans, responding to member needs across the spectrum of professional issues and will provide consultation to ACA on counseling matters. Qualifications: Graduate degree in Counseling preferred + three years experience. Ideal candidate will have working knowledge of counseling issues across the spectrum. Candidates should also have an interest and skills in developing projects via web based technology. Grad students and New Professionals will be considered. If you are interested in this exciting opportunity, please fax/email a resume or vita to Cindy Welch, Associate Executive Director, HR, Fax: 703-823-0953; email jkukor@acu.org

WISCONSIN
UNIVERSITY OF WISCONSIN-WHITEWATER
Assistant/Associate Professor
The Counseling Education Department at the University of Wisconsin-Whitewater, CACREP accredited, announces a tenure-track, faculty position with rank of Assistant Professor/Associate Professor to begin August 24, 2008. Responsibilities include teaching core courses, as well as courses in the school or community counseling emphasis; providing service to the university including participating with department leadership, advising of student, providing community service; supervision of practicum students and interns; implementing program requirements; and participating with research and grant writing activities. Knowledge of web-based instruction would be preferred. Openness to work with diverse populations is essential. An earned doctorate in counselor education, counseling psychology, or a related field with counseling experience strongly preferred; consideration will be given to persons who are ABD and have counseling experience. Send letter of application, undergraduate and graduate transcripts (two plus years of college required, including New Jersey school counseling certification or eligibility). Earned doctorate in Counseling, Counseling Education or Counseling Psychology required. Send letter of interest, vita, and three letters of recommendation as an electronic attachment to: kinwalling@safes.fairs.msstate.edu. Questions regarding this position may be addressed to Dr. David Van Doren, Department of Counselor Education, University of Wisconsin-Whitewater, Whitewater, WI 53190. UW-Whitewater is an Equal Opportunity and Affirmative Action Employer, and actively seeks and encourages applications from women, people of color, persons with disabilities, and all veterans. Applications received by January 11, 2008 are ensured review, position open until filled.

WYOMING

YOUTH EMERGENCY SERVICES OF WYOMING
Therapist
LAT-LPC: Master’s Degree Therapist or professional addiction therapist, one year experience and eligible to meet Wyoming Licensure requirements within one year of hiring date. Requires specialized training in assessment, treatment planning and experience working with adolescents clients in a residential treatment facility. Benefits: Competitive salary, Medical/Dental insurance, paid leave and holidays. Enjoy Wyoming’s endless opportunities to adventure therapy, animals, swimming, in the treatment milieu. Mail VITA to: HR, PO Box 7215, Gillette, WY 82717. Phone: (307) 686-0669, Fax: (307) 686-2121. Email: tpruet@cscd.k12.wy.us

ASSISTANT PROFESSOR (Counselor Education/Tenure-Track)
LOUISIANA STATE UNIVERSITY
The Department of Behavioral Science and Policy, and Previous Director of the Counseling Psychology Program at the University of Kentucky, invites applications for a tenure-track assistant professor in Counseling Psychology, who will be involved in both teaching and research at the graduate level. A Ph.D. is required in Counseling Psychology, Clinical Psychology, or related field; a faculty position at the University requires a PART TIME commitment (approximately 20 hours per week) for a position. Responsibilities will include teaching graduate courses in counseling psychology and conducting research in counseling psychology with a focus on youth and family counseling. Research-Service Oriented: Doctoral or master’s degree in counseling psychology or related field; knowledge of counseling psychology research methods; knowledge of multicultural populations in a counseling psychology clinical setting; and experience working with children and families in a counseling psychology setting preferred. The position is available August 1, 2008. To apply, please send a letter of application, curriculum vitae, at least three letters of recommendation, and transcripts to: Prof. J. J. Currin, Search Committee, Dept. of Counseling, Psychology, and Human Services, University of Kentucky, Lexington, KY 40506. Review of applications will begin immediately and continue until the position is filled. The University of Kentucky is an Equal Opportunity/Affirmative Action employer. All qualified applicants will receive consideration for employment without regard to race, color, age, religion, national origin, ethnicity, gender, sexual orientation, gender identity, gender expression, or genetic information. The University of Kentucky prohibits discrimination and harassment on the basis of sexual orientation or gender identity and/or expression, including in the administration of its education policies, admissions policies, financial aid policies, and other University policies. The University of Kentucky is committed to providing an environment free from discrimination and harassment. Applications must be submitted by April 1, 2008.
Know the facts about Malpractice...

Myth #1
An individual malpractice insurance policy is an unnecessary expense if your employer already provides coverage for you.

Fact #1
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Myth #2
You are more likely to be sued if you carry an individual malpractice insurance policy in addition to employer-provided coverage.

Fact #2
The truth is, no one can know whether you’ve purchased an individual policy. If you are named in a lawsuit, your insurance status will not be uncovered until the “discovery phase” of the trial. At that point, you’ve already been named in the suit and you need to defend yourself.

Myth #3
Plaintiffs’ attorneys will keep you on the defendant list in a lawsuit if they find out that you have your own insurance in addition to employer-provided insurance.

Fact #3
If the plaintiff’s attorneys believe that you were even remotely involved in an incident or could help strengthen their case, you’ll stay in court—whether or not you have your own insurance.

Myth #4
If you are careful with your clients, you are unlikely to be sued and therefore don’t need your own insurance.

Fact #4
You are always under the risk of being sued. If a client even perceives there was harm done as a result of your providing (or failing to provide) services, that client could sue. If there are gaps in your employer’s plan—and it’s not uncommon—you may benefit from carrying your own insurance.

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