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• Assisting incarcerated women
• Making the most of mentoring
• Travel guide to Charlotte, N.C.

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Hospitalizations and mental illness

According to the latest statistics from the U.S. Department of Health and Human Services Agency for Healthcare Research and Quality, approximately 1.4 million hospitalizations in 2006 involved patients who were admitted for a mental illness, while another 7.1 million patients had a mental disorder in addition to the physical condition for which they were admitted. The 8.5 million hospitalizations involving patients with mental illness represented almost 22 percent of the overall 39.5 million hospitalizations in 2006.

Of those hospitalizations specifically for treatment of a mental disorder:

■ Nearly 730,000 involved depression or other mood disorders, such as bipolar disease.
■ Approximately 381,000 were the result of schizophrenia or other psychotic disorders.
■ Approximately 131,000 were related to delirium, dementia, amnesia or other cognitive problems.
■ Roughly 76,000 involved anxiety disorders and adjustment disorders — stress-related illnesses that can affect feeling, thoughts and behaviors.
■ About 34,000 involved attention-deficit disorder, disruptive behavior, impulse control, personality disorders or mental disorders usually diagnosed in infancy or later childhood.

For more information on this data, read “Hospital Stays Related to Mental Health, 2006” at hcup-us.ahrq.gov/reports/statbriefs/sb62.pdf.
The year ahead

We are living in a time of unbearable dissonance between promise and performance; between good politics and good policy; between professed and practiced family values; between racial creed and racial deed; between calls for community and rampant individualism and greed; and between our capacity to prevent and alleviate human deprivation and disease and our political and spiritual will to do so. — Marian Wright Edelman

In spite of the challenges and uncertainty that swirl around all of us these days, I do hope that you and your families, friends and significant others have had a wonderful and meaningful holiday season. I trust that it has been a time of good cheer, joy, renewal and connection, accompanied by long stretches of true peace.

I also recognize that the holidays can be very difficult for many of us — a time filled with sadness about loved ones lost or missing, immeasurable hours and days filled with loneliness and, perhaps, a deep sense of emptiness and regret. To those who have a difficult time during the holidays, I hope the promise of a new year and the pledge for positive change will provide you with a renewed sense of hope and purpose.

As the calendar gets set to change, I customarily settle back and write down my New Year’s resolutions. This year was no different, except this time I wrote two lists — a personal list and one that I will apply in my role as president of the American Counseling Association. I was afraid that listing my top 10 resolutions would somehow give the impression that one took precedent over another, and that is just not the case, so I have designated each as “No. 1.” Each of these resolutions is important to me and, I believe, important to the health and well-being of our great organization.

So, without further delay, my list of resolutions for my remaining service as ACA president:

1. Continue our efforts to become the premier organization and hope to professional counselors, both nationally and globally.
2. Continue our steadfast commitment to issues of social justice and to serving as advocates for all those who are disenfranchised, marginalized or oppressed.
3. Continue our efforts to increase public awareness about who counselors are and what services we provide.
4. Continue to seek alternative revenue streams and remain prudent and attentive to our commitment to financial solvency.
5. Continue to advocate and lobby for our members who are private practitioners by seeking parity and better working environments, and offer workshops/seminars/continuing education opportunities specifically designed to meet the needs of our members in private practice.
6. Continue our efforts to obtain licensure in California.
7. Continue our efforts as leaders to be transparent about our decisions and nimble and collaborative in our governance.
8. Continue our efforts to develop a viable and dynamic strategic plan that will serve us both now and into the future.
10. Continue our efforts to deliver meaningful and practical services to you, our members.

In closing, I wish you all the hope and promise that a new year can bring, and I look forward to our continued journey.

With pride,
Colleen ♦
The ACA Bookstore will be open during all exposition hours. For your convenience, an ACA Preconvention Bookstore will be located in the ACA registration area March 19–20 before the Exhibition Hall opens.

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March 21, 10:30 am – 6:00 pm  
March 22, 10:30 am – 6:00 pm

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March 21, 4:00 pm – 5:00 pm

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Samuel Gladding

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Norman Gysbers, Mary Heppner, and Joseph Johnston

*Case Incidents in Counseling for International Transitions*
edited by Nancy Arthur and Paul Pedersen

*Compelling Counseling Interventions: Celebrating VISTAS’ Fifth Anniversary*
edited by Garry Walz, Jeanne Bleuer, and Richard Yep

*Counseling Multiple Heritage Individuals, Couples, and Families*
written and edited by Richard Henriksen, Jr. and Derrick Paladino

*The Counselor and the Law, Fifth Edition*
Anne Marie “Nancy” Wheeler and Burt Bertram

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*School Counselors Share Their Favorite Group Activities*
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*Solution-Focused Counseling in Schools, Second Edition*
John Murphy

*Suicide Prevention in the Schools, Second Edition*
David Capuzzi

*Youth at Risk, Fifth Edition*
edited by David Capuzzi and Douglas Gross

American Counseling Association, Booth #601
EXECUTIVE DIRECTOR'S MESSAGE

Changing, giving, belonging

Happy New Year. I wish all of you a peaceful, healthy, rewarding and transformative year. While this is my first column of 2009, it also concludes a three-part effort that began with what I shared in November. My previous two columns focused on “change” and “giving,” respectively. This column addresses “belonging.”

I believe most people would acknowledge that they “belong” to something—a family, a professional organization, a service group, a school. I am of course interested in what you and your colleagues value in your professional organizations. My sense is that you would belong to an organization that promotes your profession, provides resources to the profession, teaches about the profession’s ethical standards and advocates on behalf of the profession.

Belonging to the American Counseling Association is all of those things—and much, much more. Belonging to ACA creates a community of like-minded, well-intentioned, dedicated professionals who come together to enhance, improve and professionalize the art and science of professional counseling. Think about it. For an investment of about 43 cents per day, professional counselors receive the full benefit package offered by ACA (it is only 25 cents per day for students and retirees). And for just a few more pennies per day, one can also increase the value of membership by joining any of our 19 divisions (which many thousands of you have already done!).

However, it is my belief that you will only want to belong to an organization in which you see value. With the changes in the world economy, many people are cutting back on what they spend. My observation is that this cutting back is done to preserve the ability to purchase services or make donations that have a special place in the life of the individual. Once again, we see that change (in this case relative to the economy) affects what we give (to those organizations with which we feel a special affinity), with the result being that we belong to those organizations that resonate with who we are as caring and professional people.

When we embrace change and give of our time and limited resources, we also receive the benefit of belonging. ACA continues to look at what we need to do to change in the current environment, but we also try to look five, 10, even 20 years into the future. We will only be a vital, useful, beneficial organization to our members if we change to meet needs, provide the best possible services and benefits, and nurture a community that welcomes those who wish to belong.

I encourage you to bring your colleagues and students to our table. Let others know of the good things ACA has done, is doing and will be doing as we transition into the second decade of the 21st century. Quite simply, those who identify as professional counselors need to belong to ACA. While we are 40,000 strong, we have not even engaged one-quarter of those who identify as professional counselors in the United States, and when you think about counselors around the world, the percentage is even smaller.

We have been changing things in “our house” and refocusing our efforts to provide the best services and benefits possible. New what we need to do (with your help) is to let others know that we would be honored to have them belong to our organization. So, as we begin a new year, I ask that every ACA member bring at least one or two new people to our table. If you need information about ACA membership, services and benefits, contact us; we will be happy to provide you with these materials or even send them directly to a colleague, student or friend.

Let’s make this a banner year for those who will say, “I BELONG to the American Counseling Association.” I hope you will contact me with any comments, questions or suggestions that you might have. Please contact me via e-mail at rype@counseling.org or by phone at 800.347.6647 ext. 231.

Thanks and be well. •
**Another option to help counselors nurture creativity**

How exciting to see the upsurge of interest in the creative arts in counseling as reflected in the November issue of *Counseling Today*. “Creating connection, crafting wellness” gives us a glimpse of how effective working with the arts can be with a broad array of issues and populations.

To the list of organizations involved with creative therapies that was provided on page 37, I would like to add the International Expressive Arts Therapy Association ([ieata.org](http://ieata.org)). This international association may be of particular interest to counselors because this field emphasizes creativity and integration of all the arts rather than focusing on a particular arts modality. Interested practitioners with appropriate training and experience also can seek registration as a Registered Expressive Arts Therapist or a Registered Expressive Arts Consultant/Educator through IEATA.

Sally Atkins, Coordinator, and the Expressive Arts Faculty at Appalachian State University Boone, N.C.

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**Reader questions article on eating disorders, body image**

I enjoyed Mike Hovancsek’s article “Ghost in the machine” in the November issue. Certainly, counselors, our clients and society as a whole would benefit greatly if we avoided television and other media and read or moved instead. The article points out a couple of issues, however, that deserve comment.

The article mentions that the average woman in the United States is 5 feet 4 inches tall and weighs 140 pounds. The inference is that because it is “average,” it must be normal or at least acceptable. When this statistic is considered in light of the epidemic of people who are overweight or obese, this is not necessarily a reasonable inference. The National Center for Health Statistics has the same average height (actually 5 feet 3.7 inches tall) but says the average weight is 167 pounds, which is up from 152 pounds just 10 years ago. But even the 140 pounds may indicate a significant weight problem depending on the individual’s body type. The Centers for Disease Control and Prevention state that women ages 20 to 29 were 29 pounds heavier in 2002 than in 1960. The surgeon general has recently addressed childhood obesity as a significant health hazard in the United States. The many problems related to childhood obesity include sleep apnea, orthopedic problems, asthma, Type II diabetes and a much greater probability of adult obesity.

The article also states that “conservative estimates suggest that after puberty, 5 million to 10 million girls and women” have eating disorders, but it does not explain how these “conservative estimates” arrive at such a wide range. Even if we accept the most liberal end of the range (10 million), that works out to less than 1 percent of the total U.S. population. It is hard to reconcile this statistic with the assertion expressed in the article that anorexia nervosa is one of the most common psychiatric diagnoses in young women. Most counselors would probably estimate anxiety disorders, oppositional defiant disorders or some sort of affective disorder as being much more common than eating disorders.

Please understand that I am in no way detracting from the seriousness of the diagnosis. I am simply saying that, as counselors, we should be more rigorous in our use of data and not merely use unquestioned statistics as “proof texts” to bolster arguments or favored positions.

In addition, the article takes a purely Western cultural approach toward eating disorders. There is, however, a multicultural component to this issue. We know this from the research that addresses the occurrence of eating disorders in other cultures — including cultures in which the television or other media have not played a prominent role.

The article also takes an allopathic medical approach. The medical model is simple: Look for disease, find the disease, label the disease, then prescribe an intervention (which, in the case of the medical model, is usually medication when it comes to mental, emotional or behavioral problems). This is not a very useful model for counselors, yet it is unfortunately far too often the approach that is taken and encouraged.

Robert Nelson
Corpus Christi, Texas

**Author’s response:** While any individual study can be questioned, the preponderance of research on this subject reaches the same conclusion: There are a lot of unhealthy messages in the media, and they are strongly correlated with unhealthy body image issues in society. This is further backed up by reports from individual clients who are seeking help for body image problems. Even if all of this research is disputed, however, it can’t possibly hurt to teach our clients how to use good critical thinking skills when they encounter ideas that cause them to feel depressed, anxious or inferior. These interventions do not need to be “prepackaged.” There is plenty of room for innovation and creativity in the counseling field.

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**Letters policy**

*Counseling Today* welcomes letters to the editor. Individuals may submit letters as often as they like, but *Counseling Today* will print only one letter per person per topic in each 365-day period. Letters are subject to editing for both length and clarity.

When submitting a letter to be considered for publication, please provide your name and town. If you wish to have your e-mail address listed with your published letter, please note that in the body of your e-mail.

Opinions expressed in letters do not necessarily reflect the views of ACA or the *Counseling Today* staff.

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ACA postelection update: The tide changes

In January, Barack Obama will take office as the nation’s first African American president, following his historic election in November. The election also will usher in a new and increasingly Democratic Congress. With one race yet to be decided as of press time (a recount in Minnesota), the Senate will consist of 56 Democrats, 41 Republicans and two independents who usually caucus with the Democrats. A Republican victory in a Dec. 2 runoff election in Georgia means that the Democrats will come up just short of reaching the 60-vote majority usually required for approving legislation in the Senate. The new House of Representatives will consist of at least 256 Democrats and at least 175 Republicans; the precise party division of the House won’t be known until Dec. 6 at the earliest, when two races in Louisiana will be decided and after recounts in one district apiece in California and Ohio.

Job No. 1 for both President Obama and Congress will be reinvigorating the nation’s economy. Congressional leaders have already announced that in a break with tradition, members of the 111th Congress will be put to work immediately after being sworn in on Jan. 6, with the goal of having an economic recovery plan ready for Obama around the time he takes office on Jan. 20. House and Senate members are likely to be working throughout January instead of beginning work in earnest around the end of the month, as is the norm.

Huge federal government outlays for economic recovery will deplete resources for spending on other issues. At virtually the same time that Obama was discussing the need for major government investments to spur growth and create jobs, he was also stressing the importance of scouring the federal budget to “make meaningful cuts and sacrifices.” Advocates for big increases in public spending on social programs likely will be disappointed.

Nonetheless, 2009 is likely to see much activity concerning health care issues, including major, systemic private sector health care reform and significant upgrades in both Medicare and Medicaid programs. Recently, Democrats have been more receptive to a strong public role in guiding and supporting health care services, and with a Democratic president and larger majorities in Congress, lawmakers are expected to prioritize work in this area. The American Counseling Association will be following this work closely, looking for opportunities to help establish more complete recognition of the counseling profession. As mentioned in last month’s Washington Update, Medicare legislation will be high on the agenda for 2009, with a Jan. 1, 2010, deadline looming for forestalling deep physician pay cuts.

ACA’s policy objectives typically play out within legislative committees and with individual offices. As a result, the full impact of the elections on our work won’t be known until more dust has settled. It is also important to note that the core issues facing the counseling profession are not partisan; both Republicans and Democrats have recently been honored with ACA’s Federal Legislative Service Award. ACA respects and values the diverse spectrum of political ideology among its members and does not — and cannot — explicitly support any single political party.

Communicating with Congress: Lessons from recent research

One certainty regarding 2009 is that for the counseling profession to achieve its policy objectives, counselors will need to increase their level of involvement and advocacy. ACA is working hard to discuss the profession’s needs and how federal programs can more appropriately recognize and utilize counselors in providing services. Members of Congress and agencies within the Obama administration will be much more receptive, however, if they hear from you! There will be staggering demands on lawmakers’ time, energy and money; we will need to advocate strongly and effectively to be heard.

ACA is working to improve the size and strength of our grassroots advocacy efforts, and on Nov. 20, we hosted an hour-long conference call with counselors from across the country. During this call, we heard from an analyst with the Congressional Management Foundation on the current state of communications between constituents and members of Congress.

Thirty years ago, no one e-mailed his or her member of Congress. Today, millions of Americans do. What many people don’t realize is that members of Congress have virtually the same number of staff today as they did in the 1970s, despite the explosion of the telecommunications industry and the growth of the U.S. population by roughly one-third. The flood of communications reaching congressional offices means that form e-mails and letters no longer work. Congress has had enough of them.

The good news is that lawmakers are still hungry for information about what their constituents really think, and on most issues, even a small number of contacts can make a big difference. To be effective, however, contacts need to be individualized. ACA members can learn more by listening to the presentation; files containing the audio of the call and the associated PowerPoint presentation will be posted on the ACA public policy website at counseling.org/publicpolicy.

ACA needs grassroots support to experience success on the policy initiatives we’re pushing on behalf of the counseling profession. We thank those counselors who are already involved and encourage others to join in! •
The six-hour workshops are facilitated by either Catherine Rains, (formerly Catherine Holmes), M.S.; Sherrie Haynie, M.Ed., or Judith Grutter, M.S., NCC, MCC.

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A call to leadership

In my time as a counselor education student, I have met a number of remarkable individuals. At the Rocky Mountain Association for Counselor Education and Supervision conference in Breckenridge, Colo., this past October, I had the pleasure of meeting Carol Bobby. She was most pleasant and warm, and I had hoped to convince her to write an article for The Top Five. Bobby is the embodiment of leadership in the counseling field, and I was thrilled when she agreed to write an installment for us.

As a Licensed Professional Counselor in Virginia, Carol has served as the executive director of the Council for Accreditation of Counseling and Related Educational Programs (CACREP) for an astounding 20 years. An American Counseling Association member and a past Chi Sigma Iota (CSI) president, she has held a multitude of leadership positions within higher education (regrettably, far too many for me to list here). In 2006, Carol was awarded the ACA Arthur A. Hitchcock Distinguished Professional Service Award. What follows is her article providing tips for all of us on becoming more effective leaders.

Carol Bobby

On Nov. 4, 2008, the United States elected a new president. The results of this election have been called historic, and the campaign itself energized American voters in a way not witnessed for many years. The call for leadership that could change the course of our country was undeniable. The job of the candidates was to convince voters that they had the skills to accomplish this.

The importance of good leadership is not limited to the presidency. Businesses, schools and sports teams all need good leaders. The counseling profession is no different. Strong leadership in our profession has given us licensure in 49 of 50 states, a highly respected accrediting organization (CACREP) and a globally recognized credentialing body (the National Board for Certified Counselors). Yet professional challenges still exist with regard to managed care, insurance reimbursements and meeting the counseling needs of a global and multicultural society. Continued leadership is a must, and today's counseling students need to develop leadership skills. So what makes someone a good or effective leader? While there is ample research on leadership styles and qualities, the following five recommendations come from personal experience.

1. Be flexible. Murphy's Law states that if something can go wrong, it will. I learned this in 1993, the year of my CSI presidency. Although the business meeting in Atlanta had been meticulously planned, a blizzard paralyzed the city the day before. Hotel personnel could not get to work. Food could not be served. Presenters were stranded at home. Those who made it to the meeting looked to me to determine the day’s outcome. Mustering my courage, I asked everyone to “go with the flow.” Although we were a small group, business was conducted and awards were presented (albeit without reception food). Those who were at the ACA Conference in Atlanta still talk about the camaraderie that developed among those trapped in the city. If your plans cannot be followed, don’t panic or try to force the plan into action. If you are flexible, others will follow your lead.

2. Know when to follow. Good leaders realize the importance of listening carefully to the ideas and wishes of their constituents — including those constituents who do not support them. As Barack Obama said on election night, “And to those Americans whose support I have yet to earn, I may not have won your vote tonight, but I hear your voices, I need your help, and I will be your president, too.” These are important words to remember.

Several years ago, I was active in an organization for which the board chair had a personal agenda for change. The more she pushed her agenda, the more resistance she encountered. She had great ideas but, sadly, they simply had not been vetted in a manner that allowed for development of group ownership. I suggested she consider a membership retreat with roundtable discussions. A remarkable thing happened. Some of the roundtables came up with the exact ideas previously pushed for by the chair. Once the group owned the need for change and set goals for themselves, the leadership could assist in effecting the change. Learning to listen to the ideas of others can allow leadership to assist in planning for change.

3. Make fairness a priority. In 2008, there were many discussions about how to heal a divided nation. Differing views on key issues can become volatile, especially when one group feels unheard. As chair-elect of a higher education organization, I saw just how divided an association could become as people aligned themselves on opposite sides of the room to argue their side of the issue. The current chair worked hard to facilitate discussion as shots were volleyed across the room. With no resolution in sight, the discussion was tabled to the next meeting.

Dreading the conflict that would be “brought off the table” during my first meeting as chair, I considered ways to provide a fair and open hearing of the members’ concerns. I decided to host a debate. Debate team rules were followed with the assistance of a moderator; however, it was stated up front that no winner would be declared and that the purpose of the debate was to allow thorough and thoughtful discussion from all members. The debate was a success and the membership was reunited. Regardless of how a leader feels about an issue, the leader must ensure that all sides are treated fairly and with integrity.

4. Communicate effectively. Communication requires making a sincere connection with your listeners. Past presidents have attempted to do this through venues such as “fireside chats” and “town hall meetings.” Others have used engaging phrases, such as “My fellow Americans.” Still others have spoken with direct earnestness, as did Ronald Reagan when he said in his 1987 speech in West Berlin,
“Mr. Gorbachev, open this gate! Mr. Gorbachev, tear down this wall.”

At a CACREP Board meeting, I was privileged to see the positive effect of well thought out communication when the chair of an ad hoc committee on board restructuring outlined (ala Dave Letterman) the “top 10 reasons” for CACREP to vote in favor of a new board structure and selection process. The communication was clear, succinct and convincing. Effective communication occurs when you are sincere in your message and engage your listeners as individuals who have an important role in the process.

5. Remember the importance of humor. Dwight Eisenhower once said, “A sense of humor is part of the art of leadership, of getting along with people, of getting things done.” When used appropriately, humor can engage an audience. It can relieve stress. It can allow people to see an issue in a new light.

Over the 20-plus years that I have worked with the CACREP Board, I have seen how humor assists this group of hardworking professionals to complete difficult tasks. Jokes abound regarding the “huge boxes of love” (i.e., self-study reports) that the staff sends to them for review. Humor also helps this group of 14 to get through three full days of meeting together twice per year in often windowless rooms. Finally, I have learned that cartoons can convey important concerns regarding budget, personnel or other business concerns. Inserting these cartoons in the text of my Executive Director’s Report creates interest while making important points. Humor can be an important icebreaker in tense situations. It can allow your audience to identify and laugh with you. It also allows for fresh views of old situations, which may assist you in meeting your goals.

Mark Reiser is the column editor for The Top Five and a doctoral student in the University of Wyoming Counselor Education Department. Contact him at reiser@uwyo.edu to comment on this column or to recommend other counseling professionals he could feature in upcoming issues.

Letters to the editor: ct@counseling.org
The October 2008 edition of *Counselor Career Stories* focused on a counselor who often works with clients affected by rural poverty. Not long after publication, I received a letter from American Counseling Association member Sabina Remmers de Vries expressing appreciation for the article’s subject matter. She went on to write about her own work with the homeless population in San Antonio, adding that she felt America’s homeless were often treated like the “untouchables” in India. The comment saddened and intrigued me so much that I called Sabina to discuss her work. I soon realized her story needed to be told.

**Rebecca Daniel-Burke:** Tell me about your current counseling position.

**Sabina Remmers de Vries:** I work part time for an agency that serves the homeless, and I also have a part-time private practice.

**RDB:** What lead you to serve the homeless population?

**SRDV:** I worked in the medical field for years. I decided to go back to school as I continued working part time in the medical field. I decided to get a master’s degree in counseling and was looking for a practicum. This professor — who became my mentor — knew that I wanted to work someplace where I could have an impact. He suggested this agency that had contracts to serve the homeless. I ended up doing my practicum there, also my internship, and then they hired me. I am still there and have been there since 2003.

We serve all of the homeless in San Antonio, Texas. Most are in some type of shelter. But anyone without a stable residence or in a transitional shelter or in a dual-diagnosis/homeless program can qualify to receive our services.

**RDB:** What is a typical day like for you when you work with the homeless?

**SRDV:** I go to shelters around San Antonio. There are about 20 shelters, and the last count of homeless individuals in the San Antonio area was between 20,000 and 25,000. About 40 percent are families with children.

**RDB:** So first you arrive at one of these shelters. Then what?

**SRDV:** I may visit two to three shelters in a day. Sometimes the shelter calls, and sometimes the homeless person calls. I arrive at a shelter and see if there is a private place to meet, and there never is. We might sit at the dining room table, we might go for a walk, we might go to McDonald’s or go to a park. One woman called and said, “I am going to be down by the river,” so I went there.

**RDB:** So you meet the client where they are?

**SRDV:** Yes, I do.

**RDB:** How does the counseling begin?

**SRDV:** I know I need to connect quickly. These people are not interested in a middle-class or upper-middle-class thing called “counseling”; they want food on the table and a bed tonight.

I am an Adlerian believer. I approach each individual from a level of equality. We are just two human beings talking. I listen, I validate and I show empathy. I might say, “I know everyone else is in power and they are telling you what to do. That is not how we will be. This counseling session is for you. It can be whatever you want it to be.”

I went through my counseling graduate program and thought I was psychodynamic, but these people taught me to use empathic listening. I discovered Rogers through this population.

**RDB:** And it is Rogers who says we have to meet people where they are, right?

**SRDV:** Right. I say, “We are equals here. I am not one of ‘them.’ I am here for you.” That is when they start trusting me and the work begins.

**RDB:** What then?

**SRDV:** Once we get some of the food and shelter concerns resolved for the near future, they might move deeper in our work. They might say, “I can’t sleep. I have these terrible dreams.” That is an opening to move into deeper work. It sounds like an exaggeration, but 95 percent of the homeless individuals I have counseled have experienced some trauma early in life. Often in my beginning work with people in shelters, they are mandated to see me. But sometimes they get a taste for talking when someone is deeply listening. They may then call and ask me to come see them again instead of the shelter calling.

**RDB:** Do you do any groups at the shelters?

**SRDV:** Yes. I used to run a huge group at a shelter, but HUD (the U.S. Department of Housing and Urban Development) became more and more rigorous with the funding, and I had to fill out so much paperwork and have the clients fill out so much paperwork that I finally stopped doing that group. It just feels wrong to hand a traumatized person a pile of paper to fill out before I help them.

**RDB:** It is sad that paperwork has come to this.

**SRDV:** I agree. I know my time is better used counseling people than filling out reams of paperwork. I also teach an 11-week course on conflict resolution at a shelter.

**RDB:** Tell me more about that group.

**SRDV:** Some homeless people have learned that an aggressive tactic works. If they behave in a menacing way, people will leave them alone.

**RDB:** They have created a feedback loop?
SRDV: Exactly, so I work with them on setting boundaries before the aggression kicks in. We ease slowly into topics about anger management and goal setting. I try to set it up so they ask for those topics rather than always dictating what will happen in the group. Again, they have most workers telling them what to do. They need to feel differently in my group — feel like I am listening, not dictating.

RDB: What do our readers need to know about counseling the homeless?

SRDV: First, we all have stereotypes before we meet a homeless individual. “They are dirty, unwashed and living under a bridge” might be our first thought. If you move beyond that stereotype, there is a human being. They are not one group. Rather, it is a very diverse set of groups with many parts. They are mothers and children running away from domestic violence. These mothers would rather be out on the streets than be killed by their abusers. They are homeless adolescents who are survivors of sexual abuse or bullying, or both. There are gay adolescents who have been rejected by their families. A type of interpersonal trauma exists for members of each of the groups. The residue of that trauma gets in the way of functioning in society.

There are some young male homeless single fathers with children, and there is no shelter for that group. There is a large population of homeless people with health issues. They got sick and have lost everything to the illness, and they are trying to get their medical needs met.

RDB: Do you mean HIV/AIDS?

SRDV: No, there are lots of programs for (those cases) and lots of funding for them. But if someone has lost their job and apartment due to cancer or back problems, there is no specific funding for them.

RDB: What about veterans?

SRDV: The VA (Department of Veterans Affairs) takes care of veterans for the most part, although they sometimes have to wait too long for service at the VA. There are also other agencies, both federal and private, with money to treat veterans.

RDB: What about the mentally ill homeless person?

SRDV: Many have a diagnosis of bipolar. I have no specific statistics to back this up, but there is an uncommonly large representation of the bipolar diagnosis among the homeless. This is often discussed at community coalition meetings. I am doing some research at this time with my mentor to gather findings regarding the unusually large representation of this diagnosis among the homeless.

RDB: I wonder if they have done their relationships in — exhausted their significant others through mania and mood swings?

SRDV: Many are in a relationship, but the relationships are stormy. Sometimes I think there is always trauma, and the trauma is very often co-occurring with the bipolar symptoms. I ask myself which came first: the trauma, the homelessness or the bipolar diagnosis?

In the battered women’s shelter, I see many diagnosed with bipolar. I think we are seeing a stress response to trauma and emotional abuse.

RDB: I wonder if the domestic violence outbursts are similar to the out-of-control feeling of the manic mood swing for people with a bipolar diagnosis?

SRDV: That is a very interesting thought. That definitely could be a part of the whole situation.

RDB: What have homeless people taught you?

SRDV: First, they have taught me that they are more vulnerable than most in terms of sensitivities. They are not the criminals. The criminals won’t come to the shelter. They are more exploitive and will take what they need.
The homeless have also taught me how little we actually need. It’s all about relationships. Nothing else matters. That is what they have taught me.

RDB: Was there someone who saw something special in you, who helped you along your career path?

SRDV: That one professor, Dr. Valadez, my mentor. He saw my engagement with homeless people. He always encouraged me and supported me in my work.

RDB: Do you have a theoretical hero, a theorist who inspires you?

SRDV: In my work, and being from Europe, I am inspired by the big three: Freud, Jung and Adler. Everything has a meaning and purpose. But I am mostly inspired by others not in our field.

RDB: Like who?

SRDV: Mother Teresa and the Dalai Lama both inspire me deeply. Mother Teresa had a saying that went something like this: If you love until it hurts, it doesn’t hurt anymore, and the only thing left is love. I believe you have to push beyond the misery, tolerate it and move beyond it; what is left is love and caring for the other.

RDB: Is there anything I have not asked that you want our readers to know about your story?

SRDV: Yes, working with the homeless and sexual abuse survivors today is very difficult because of funding cuts. Also, under the banner of accountability is a continuous increase in paperwork. That is why I had to disband that one group. We are seeing fewer clients and doing more paperwork — so much more paperwork that it decreases our productivity with those who need us. This part needs to be turned around.

RDB: Thank you, Sabina, for doing this important work.

ACA values the opportunity to honor the career paths of working counselors with Counselor Career Stories. The hope is that the career lessons these counselors share each month will be very helpful to working counselors and students alike as they seek employment and career fulfillment. For additional assistance with career and employment issues, visit the ACA Career Center at counseling.org/CareerCenter, where you can also view current online job listings, CareerBuilder and state and federal employment lists.

Rebecca Daniel-Burke is the director of the ACA Career Center. She was a working counselor for many years and went on to oversee, interview and hire counselors in various settings. Contact her at RDanieltBurke@counseling.org if you have questions, feedback or suggestions for future columns.

Letters to the editor:
ct@counseling.org
Now is the time of year when those close to graduation start gearing up for the big transition. It’s the hurdle every counseling student throughout time has faced — becoming a new professional. While the prospects are exciting, it is not always easy saying goodbye to the classroom and hello to “real world” counseling. New graduates often worry about their professional path and where it will lead.

The first New Perspectives column for 2009 focuses on these concerns, featuring tips on getting ahead from mental health professionals at various stages of their career. The January expert responders are:

- Brian Montalvo, a new professional with five years of experience. He is assistant director for career development and career education at Florida Atlantic University and a frequent contributor to National Career Development Association publications.

- Perry C. Francis, a 10-plus-year veteran in counseling education, associate professor of counseling and supervisor of counseling services at Eastern Michigan University. He has published numerous articles and held leadership positions in the American College Counseling Association.

- Robert Wubbolding, professor emeritus at Xavier University, director of the Center for Reality Therapy and director of training at the William Glasser Institute. He has more than 40 years of counseling experience, has written numerous books, including Reality Therapy in the 21st Century, and introduced reality therapy internationally into areas such as Korea, Japan, Singapore and Kuwait.

Q: What should new graduates do to have a successful, long-term career?

Brian Montalvo: There are six steps I would suggest that a new graduate take. First, read everything and anything related to your counseling specialty.

Second, write often for counseling-related journals, magazines, newsletters, blogs and websites. Writing will help you organize your thoughts, which in turn will help you become more lucid with your clients.

Third, don’t be afraid to leave your comfort zone. Challenge yourself regularly. It’s the only way to achieve professional growth and development. For me, this meant presenting at national conferences. If you’re not comfortable with the national stage, start with local and state presentations.

Next, join and be active in professional associations. Network with current members, attend the conferences and read the literature they produce. The counseling profession is similar to a river: It may look like the same body of water, but in reality, it’s constantly changing. Being active with professional associations is one of the best ways to stay afloat.

The fifth suggested step is to begin and nourish relationships with individuals (“mentors”) who have experience and knowledge in your specialty. Mentors are your guiding light. Use them often and wisely! (For more on this topic, read “Making the most of the mentoring relationship” on p. 52.)

Finally, I would recommend staying connected and in tune with the world. Read your local newspaper daily and a national newspaper weekly. Current events can influence our clients’ needs and moods. Absorb information like a newborn. Even information that you perceive to be meaningless, you never know when it will come in handy!

Perry C. Francis: The first of many activities that will help in your success as a counselor following graduation is finding a good supervisor with whom you can work. While you have completed your degree and are now considered able to start practicing as a professional counselor, you do so as a beginner. Depending on your state, you will now be required to complete post-degree supervised hours. Having a good supervisor is paramount because you will work with that person for about two years.

A good supervisor is not just a counselor with experience whom the state recognizes as a supervisor. A good supervisor is someone with the appropriate education (a graduate course and supervised experience in supervision is most desirable) and counseling experience within the specialty in which you are practicing. It does you no good to be practicing in a college setting and to be supervised by someone who has only school counseling experience. Additionally, you need someone whom you can trust and who can trust in you. As in any counseling relationship, this trust builds over time and develops and changes as the counselor develops and changes.

A second activity that will be helpful as you grow both as a counselor and an entrepreneur is developing an “elevator speech” — a very short speech that describes, in a professional manner, who you are and what you do — that can be delivered to anyone who asks, usually as you hand them your business card. In this way, you can advocate for the profession and, at the same time, develop business/client contacts as you grow your practice.

Robert Wubbolding: It is safe to say that every student of counseling or every employed counselor wants a job or wants to keep a job. The question is how to accomplish these goals and, even more, how to have a meaningful career. A more specific goal could be the motto of St. Edward’s School in Romsey, England: “Make yourself necessary.” The following 10 tips aim at achieving these goals.

First, get along with your coworkers. Successful employees have healthy interpersonal relationships.

Next, remember that your job is not to do merely what your salary demands. Your...
Job is to do more than the minimum. In other words, when you find a job, keep looking for work.

Third, realize that in addition to doing good work, your job is to make the school or agency look good in the community, and then give others the credit.

Fourth, develop a specialty. Learn all you can about a specific topic. Someday the world will beat a path to your door to learn from you.

Fifth tip, learn everything there is to know about your school or agency: its history, how it is funded, the clients served, the neighborhood, etc.

Sixth, read the literature in your profession. Good salespeople “know their territory.” You are selling mental health. Learn all you can about it.

Next, read outside your professional field. Develop interests outside your job. For some people, this might be easy — in fact, too easy. Balance this suggestion with the previous tip.

Tip number eight, never, ever, never, ever communicate to your clients that they are victims. They have strengths and opportunities. Help them accept their strengths and use their opportunities. Acceptance of clients does not equal agreement.

The next to last suggestion is to find out what your supervisor, executive director or administrator wants. Help them achieve it. If this violates your ethical values, you have a decision to make.

Finally, each day spend one minute asking yourself, “What did I do well today?” and “What do I need to improve on?” Avoid any hint of self-criticism.

If you’ve read this far, thank you. What human being doesn’t enjoy being asked for his or her opinion? You’ve asked for mine. Oh, yes! One final suggestion: Evaluate the 10 suggestions, take what’s useful, and if any of them doesn’t fit you, simply discard it.

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

Letters to the editor: ct@counseling.org
Q: Do you know how the mental health parity legislation will be implemented with our clients with current group health insurance coverage — i.e. (Blue Cross) annual outpatient session limits or 20 to 50 percent copay when other medical services have $20 copay? Dare we hope it could change?

A: We consulted Scott Barstow, director of public policy and legislation for the American Counseling Association, and Rachel M. Milazzo, manager of provider relations for American Behavioral, a managed care company. They gave us the following report.

Scott Barstow writes: Counselors and their clients took a big stride forward on Oct. 3 with the enactment of a mental health and addictive disorder parity law. The law is expected to improve health insurance coverage of counselors and other mental health professionals because it will prohibit many current aspects of health plan policies that restrict access to care. However, the law does not include any language specifically referencing or affecting any individual type of mental health professional and, consequently, is unlikely to improve recognition of Licensed Professional Counselors relative to other types of health care professionals. It should also be remembered that health plans will continue to be able to utilize standard managed care plan practices to restrict covered services to only those considered to be medically necessary.

If a health plan covers mental and addictive disorder services, it must do so using financial requirements and treatment limitations that are no more restrictive than the predominant financial requirements and treatment limitations applied to substantially all other types of care. In other words, no more insurance policies that require higher copayment rates for mental and addictive disorder care and no more insurance policies that place arbitrary limits on the number of outpatient sessions.

Importantly, the law stipulates that if a health plan covers out-of-network care for medical and surgical services, it must also cover out-of-network care for mental health and addictive disorder services. This should increase health plans’ coverage of out-of-network therapists, improving consumer choice of provider.

For more information on the new parity law, contact Scott Barstow at 800.347.6647 ext. 234 or sbarstow@counseling.org.

Rachel M. Milazzo writes: Someone once said that the two constants in life are death and taxes. I would add a third to that list: change. Change is inevitable, and you either move with it or against it. However, the question remains, is it a change for the worse or better?

In light of the Mental Health Parity Act passing into law, I am interested in getting readers’ take on the changes that are about to come. As head of the Provider Relations Department for American Behavioral, my first thought was that this will cause a huge stir not only among the provider community but, additionally, our provider panel. As I learn more and research the parameters involved with this law, I am becoming increasingly excited about this change and the results it will yield. American Behavioral is an employee assistance program and managed behavioral health care organization (MBHO) and, as such, I foresee a minimal negative impact to our members, client companies and providers. With full consideration that there are exceptions to every rule, I think this will be a change for the better.

Our company has always managed benefits within the limits of medical necessity, and this law just enforces that practice. If this is rolled out accurately and thoughtfully, I think all parties can, and will, be winners.

Patients win because this change will ultimately make it easier for them to access benefits without the stigmas that are attached to mental health and substance abuse treatments. Mental illness has a biological basis and should not have ever been treated differently.

The providers win because this change will allow them more sessions, within medical necessity guidelines, to work toward solution-oriented goals.

The insurance companies/MBHOs win because this change will now allow them to extend these extra benefits to those individuals who are chronically ill and have been the source of exorbitant claims in the past. These extra steps are obviously taken in the patient’s interest, to further their wellness, and in the insurance company’s interest, to maintain costs by avoiding situations such as excessive hospitalizations or unnecessary emergency room visits.

I think we will see an unavoidable shift in the way we treat patients. The counselor will be phenomenally instrumental in the success of this change. I am excited to be a part of it by expanding our provider network to meet these needs, as they will surely come. One could argue that your actions manifest the outcomes of any changing situation, and as an employee of an insurance company, I promise my providers to do my part to ensure that this is a change for the better.

Q: I have always wanted to start a small private practice. Currently, I am working for a social service agency and don’t want to give up the steady income. But as January 2009
approaches, I fear another year will pass and I won’t take the “plunge.” Any advice?

A: Your question brings to mind an old business joke: If you had five frogs on a log and three of them decided to jump, how many frogs would you have left on the log?

The common answer is two, but that answer could be incorrect because there still might be five frogs remaining. You see, there is a big difference between deciding to jump and actually jumping.

Most successful entrepreneurs not only had a vision but a mentor who encouraged them to jump. As we have learned from helping others take the private practice “plunge,” mentors can make a significant difference. Most of us had a mentor or someone we admired who helped us find our way into the counseling profession. Now that you are a professional counselor, find a mentor to help you in starting a limited practice. (For more information about the mentoring relationship, turn to p. 52)

Your mentor could certainly be someone in the helping professions, but it absolutely needs to be someone who has taken a risk and been successful. Seek out respected family members, friends, community members and peers whom you admire and ask them for their keys to success. Do not be afraid to ask others to help mentor you in your new endeavor. In reflecting on my experience, I (Norm) often wonder what would have happened if not for the mentoring of two very special people in my life. Without them, the journey would have been different.

And for those counseling entrepreneurs out there who have benefited from mentoring, give back by finding a beginning counselor to mentor.

We will be presenting “Advanced Private Practice Toolbox: Nuts and Bolts Ideas for Increasing Referrals, Working With Managed Care and Other Tools” at the ACA Annual Conference & Exposition, cosponsored by the North Carolina Counseling Association, on March 20. We will also be presenting a 60-minute Education Session titled “Considering Starting a Private Practice? For Licensed Counselors in Agencies, Schools and Counselor Educators.”

In addition, we will once again be in the exhibit hall at the Walsh and Dasenbrook Consulting booth with copies of our book, *The Complete Guide to Private Practice for Licensed Mental Health Professionals*. Our book will also be available at the ACA Book Store.

And for the first time at the ACA Conference, we will be offering a limited number of free practice consultations. Contact Rebecca Daniel-Burke of ACA at RDanielBurke@counseling.org for more information. Stop by and say hi!

ACA members can e-mail their questions to Robert J. Walsh and Norman C. Dasenbrook at walshgasp@aol.com and access a series of “Private Practice Pointers” on the ACA website at counseling.org.

Letters to the editor: ct@counseling.org

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Empathy Fatigue: Healing the Mind, Body and Spirit of Professional Counselors

Individuals concerned with counselor self-care should examine Mark Stebnicki’s new book *Empathy Fatigue: Healing the Mind, Body and Spirit of Professional Counselors.*

For more than three decades, it has been recognized that mental health practitioners are among a group of professionals who share a vulnerability to fatigue and emotional overload, often referred to by such terms as “burnout” and “compassion fatigue.” With events such as natural disasters and school shootings on the rise, counseling professionals would appear to be at risk as never before of developing symptoms of stress-related disorders. The American Counseling Association’s Task Force on Counselor Wellness has officially recognized “secondary traumatic stress” as a factor leading to counselor impairment. *Empathy Fatigue* helps to fill a critical need for authoritative and useful resources to counter burnout and promote counselor resiliency.

Stebnicki’s previous writing has tended to focus on rehabilitation counseling. However, this work is clearly intended for a wider audience. While often associated with crisis counseling, empathy fatigue may be experienced by counseling professionals across a broad spectrum of settings and specialties. Thus, *Empathy Fatigue* is a potentially valuable resource for all counselors. This highly readable work offers an extensive variety of strategies drawn from many cultural traditions and intended to build resiliency and reduce the likelihood of emotional, physical and spiritual exhaustion. The text delivers insightful presentations of the following:

- Part One, a historical and theoretical review of burnout-related constructs and a definition of empathy fatigue from a holistic emotional, physical and spiritual point of view
- Part Two, a supportive rationale for an integrated approach to self-care from traditional and alternative healing perspectives
- Part Three, protocols and questions for focused self-appraisal, with an eclectic range of self-care practices

Stebnicki developed the concept of empathy fatigue out of his experience as a crisis responder following the Westside Middle School shootings in Jonesboro, Ark. Perhaps for this reason, the text is characterized throughout by a real-world tone. The examples are relevant, the research scholarly and the exercises practical and realistic. Stebnicki’s writing style is uncluttered and smooth, making this an enjoyable reading experience. One of the more interesting features of this book is the author’s comfort dealing with diverse healing traditions. Reviews of East Asian and American Indian healing philosophies are presented along with contemporary Western developments in neuroscience. Many readers will appreciate the clear instructions for how to practice different types of meditation.

*Empathy Fatigue* should enjoy wide usefulness among counseling professionals. Practitioners will find the book valuable as a guide to establish and maintain a personal self-care and resiliency-building program. Clinical supervisors will benefit from the step-by-step recommendations for assessing and supporting overstressed supervisees. Educators might find *Empathy Fatigue* an excellent choice as a text for professional issues courses dealing with the emerging challenges of counselor self-care. Each chapter could serve as the basis for rich classroom discussions and skill-building exercises. I most strongly recommend this book for counselors who practice in settings that provide few resources for support.

Reviewed by Alan Davis, professor of counseling and human resource development, South Dakota State University.

Preventing Boundary Violations in Clinical Practice

In their definitive work on boundary violations, Thomas Gutheil and Archie Brodsky identify a vast spectrum of problems therapists now face. In textbook style, *Preventing Boundary Violations in Clinical Practice* offers specific scenarios in which clinicians are faced with ethical decisions. Of particular interest is the chapter “Understandings and Misunderstandings,” which centers on boundary misunderstandings throughout the past two decades. Early on, boundary violations centered on sexual relations between clients and therapists, but that term has been expanded to “sexual misconduct,” and added to it are violations surrounding self-disclosure, out-of-office contacts, physical contact, gift exchanges, telephone calls and e-mail contact. With attention to detail, the book also focuses on boundary implications surrounding clinicians’ personal attire and how office dimensions can influence the therapeutic relationship.

Gutheil and Brodsky raise readers’ awareness regarding not crossing the fine line between professionally connecting with clients and personally identifying with clients. The authors remind us, “To facilitate growth, the therapist must be able to let go.”

In Chapter 3, we learn that boundary violations are most likely to start in the
By Ruth Harper

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.

**Your Perfect Right: Assertiveness and Equality in Your Life and Relationships, Ninth Edition**


One might think that in today’s entitled society, a new edition of *Your Perfect Right* is the last thing we need. However, as I see students continue to struggle with the differences between appropriately standing up for themselves and “being mean” (to actually quote a recent student comment), I’m reminded that this resource never outgrows its market.

Much of the content of this book will be familiar to those who read earlier versions. The new edition contains updated information that deals with assertive, appropriate behavior via electronic media, including social networks. Cognitive-behavioral techniques are also highlighted, with clear instructions on thought stopping and positive self-statements to increase assertiveness. Management of stress and anxiety is discussed as well. Other new content relates assertiveness to research on the brain, facial expression and social intelligence. Equity and fairness remain themes of this work. Counselors in almost every professional setting will think immediately of clients and students who might benefit from *Your Perfect Right*.

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**The Road to Unity in Psychoanalytic Theory**


Widely published psychoanalytic scholar Leo Rangell tackles the dilemma of factionalism among thinkers that led, he believes, to the marginalization of psychoanalytic thought in recent times. As much an intellectual history as an impassioned call for a more inclusive, integrative approach, this book is for those who value the psychoanalytic perspective and hope for the emergence of a “unitary” theory. While recognizing the effects of external factors such as the advent of psychopharmacology and a preference (and often economic need) for what he calls “the quick fix,” Rangell also points to loss of coherence within the theory itself as problematic. This volume points proudly to the impact and tradition of psychoanalysis while urging forward movement within the field that is open to greater consensus.

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**Leaving It at the Office: A Guide to Psychotherapist Self-Care**


The new year seems an ideal time to offer this book as encouragement to counselors to help them remember to take good care of themselves so they can most effectively care for others. Therapists’ efforts to maintain their own physical, spiritual and mental health often lose out to the immediate needs and concerns of clients. John Norcross and James Guy offer far more than a pep talk on this perennial topic — they build an irresistible case for caring for oneself as a person and go on to describe self-care techniques that are useful, fairly easy to implement and attractive. Sound research backs up their suggestions, and anyone who reads this book will be motivated to act.

Far more practical than preachy, *Leaving It at the Office* is a guide to rejuvenation and reward. Counselors practicing in virtually any venue, including and perhaps especially counselors-in-training, will appreciate the emphasis on self-monitoring and commitment to activities that renew and restore therapeutic energy and ability. As this book indicates, healthy living is a lifelong effort — at times, even a struggle — for mental health professionals. This invaluable resource includes both deep wisdom and quick tips for better self-care and places the issue squarely in the milieu of ethical practice.

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**More Than Miracles: The State of the Art of Solution-Focused Brief Therapy**


Since the publication of this book, both Steve de Shazer (to whom the volume is dedicated) and Insoo Kim Berg have died. Their contributions to the establishment and development of solution-focused brief therapy offer an inspiring and lasting legacy to the field of counseling — a legacy from which therapists will continue to draw insight for many years to come.

In the tradition of other solution-focused resources, *More Than Miracles* offers a brief overview of the evolution and basic tenets of the approach; it then goes into verbatim illustrations of counseling sessions that demonstrate effective use of the techniques. A final chapter on “Questions, Misconceptions and Joys” addresses common misunderstandings regarding solution-focused therapy, such as that it ignores people’s problems, avoids dealing with emotions and assumes that clients know what to do. The themes of “eliciting a rich description of the client’s solution” rather than ... increasingly detailed descriptions of the problem” and getting to “a behavioral indicator of a change in the inner state” provide the foundation for the application of strategies that are demonstrated here. This collection of transcriptions shows rather than tells readers how solution-focused therapy operates in session.

As the authors conclude, “Our job (as therapists) is to create the conditions under which clients find their own solutions, to help clients look into their hearts to find what they truly want and how they might get there.” ♦
Counseling Multiple Heritage Individuals, Couples, and Families

Richard C. Henriksen, Jr. and Derrick A. Paladino

“This informative and all-inclusive text underscores the complex and comprehensive nature of counseling multiple heritage individuals, couples, and families. For the novice as well as the seasoned practitioner, this book offers an opportunity to enhance self-awareness, impact practices, and advocate for those without a voice.”

—Marie A. Wakefield
ACA President, 2006–2007

This book examines the strengths of and the challenges facing multiple heritage individuals, couples, and families and offers a framework for best practice counseling services and interventions specifically designed to meet their needs. Topics covered include historical and current racial classification systems and their effects; identity development; transracial adoptions; and counseling strategies for children, adolescents, college students, adults, couples and families, and GLBT individuals. Poignant case studies illustrate important concepts and techniques throughout the book, and chapter review questions provide a starting point for lively classroom discussion. 2009 • 235 pages

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three areas of role, time and place. By learning to stay in the therapeutic role and setting secure boundaries around time and place, we are more likely to avoid boundary dilemmas.

Readers are guided through vulnerabilities associated with both clients and therapists, such as the boundary confusion often experienced by those with borderline personality disorder and the distance issues that can cause traumatized patients to push against boundaries. We are also reminded of the difficulty incest victims experience when trying to separate sexuality from therapeutic caring.

The text makes it clear that the primary emphasis of this, and any, boundary violation study must be to cause no harm to clients. In addition, the book offers a thorough emphasis on the subject of liabilities and defenses against false accusations, because malpractice suits against mental health professionals stem largely from boundary violation charges. The authors state that “this book is informed … by the fundamental principle that boundary issues are clinical issues first, ethical issues second and legal issues third.”

Gutheil and Brodsky draw from more than 600 professional references for Preventing Boundary Violations in Clinical Practice. They summarize the text as a “supervisor on a bookshelf” and, indeed, it is one book that any clinician would be advised to study and any supervisor wise to consult.

Reviewed by Kim Walen, a private practice therapist in Portland, Ore.

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

Letters to the editor: ct@counseling.org
CounselingToday Quiz – January 2009

Think of it: Every issue you could be eligible for one hour of credit through this program which is approved by the National Board for Certified Counselors and now, also, the Florida Board of Mental Health Counseling. That means you may be able to earn up to 12 credits per year and up to 60 credits in 5 years. That’s potentially more than half the total requirements you currently need to recertify as an NCC—for a remarkably low price! And NBCC approved home-study credits are often acceptable to State Licensing Boards. Check your local rules.

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Behind the Book - By John Lough

Interviews with the authors of books for counseling professionals

Becoming a Counselor: The Light, the Bright and the Serious, Second Edition, by Samuel T. Gladding

Most of us find it difficult to dedicate time to reflecting on the events and influences that have helped us become who we are. Samuel Gladding’s Becoming a Counselor: The Light, the Bright and the Serious includes a broad range of stories that illustrate some of the influences that have helped shape him as a counseling professional. At the same time, the book offers other counselors the opportunity to gain insights into the types of universal experiences and encounters that have influenced their own lives and directed the help they provide to their clients.

Becoming a Counselor is not an autobiography, although it certainly draws on many of Gladding’s personal experiences. Rather, this book provides counseling professionals with material that can help them examine the turning points in their lives and effectively evaluate how those experiences continue to affect their work and the results they achieve. It’s a text that allows counselors to better understand how their successes and failures, their family, friends and colleagues and their interactions with clients help them to move forward in their continuing development as professionals.

Gladding is the chair of and a professor in the Department of Counseling at Wake Forest University in Winston-Salem, N.C. He is a Licensed Professional Counselor, a National Certified Counselor, a Certified Clinical Mental Health Counselor and a member of the North Carolina Board of Licensed Professional Counselors. He has more than 35 years of counseling experience in public and private agencies, has authored more than 100 professional publications and is a former editor of the Journal for Specialists in Group Work and the Association for Specialists in Group Work newsletter. In addition, Gladding is a former president of the American Counseling Association, the Association for Counselor Education and Supervision, ASGW and Chi Sigma Iota.

Counseling Today: Who is the primary audience for this book?

Samuel Gladding: I hope it has value for both experienced counselors and counseling students. It is a series of vignettes that covers a lifetime but focuses on 35 years of development as a counselor. As the subtitle indicates, the book contains stories about all aspects of counseling — the light, the bright and the serious. For individuals just getting into the profession, this book will provide insight. For people already in the field, it will provide prompts for memories they have of their interactions with clients and their own growth as counselors.

CT: What inspired this book?

SG: I believe our lives are made up of many of Gladding’s personal experiences. Rather, this book provides counseling professionals with material that can help them examine the turning points in their lives and effectively evaluate how those experiences continue to affect their work and the results they achieve. It’s a text that allows counselors to better understand how their successes and failures, their family, friends and colleagues and their interactions with clients help them to move forward in their continuing development as professionals.

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CT: What inspired this book?

SG: I believe our lives are made up of stories that inform us about who we are. These stories also moderate our lives with relational and at times a lot of fun! Life is meaningful, purposeful, at its best unpredictable and absurd, yet ultimately life is meaningful, purposeful, at its best relational and at times a lot of fun!

CT: Are there one or two primary lessons or insights that you want readers to derive from this book?

SG: In my youth, I was fortunate enough to have John Claypool as one of the ministers in the church I attended. He always used to say, “People learn from their mistakes. Wise people learn from the mistakes of others.” I think this is true in counseling as well as in other realms of life. Some of the stories in this book — in fact, an entire section of 15 vignettes — contain examples of where I made mistakes and learned from failure. I would hope the average counselor or counseling student would benefit from reading this book and realize that they do not have to be perfect as a professional. We all have feet of clay. We are always becoming.

CT: Was this book more difficult to write because so many of the vignettes are personal?

SG: I have been amazed that as personal as counseling is, there are relatively few professional counselors on the national level who are willing to share the personal side of their lives with others. Usually when I read about other counselors’ lives, I am reading about their successes. That is fine, except most of us struggle before we thrive. It’s important, I believe, that we let others know how we have overcome barriers and setbacks. Thus, some of the material in this book is personal, but personal with a purpose. It is meant to show that life is uneven, unfair and sometimes unpredictable and absurd, yet ultimately life is meaningful, purposeful, at its best relational and at times a lot of fun!

CT: Are there one or two primary lessons or insights that you want readers to derive from this book?

SG: I would like for readers to know that sometimes they can be prepared and yet not successful. I also want them to know how important it is to participate actively in continuous learning and preparation because the better you are equipped to handle situations, the better you will be as a counselor. Finally, I want readers to realize that although we are in a stressful, often toxic and serious profession, there is humor and joy in life. We need to be able to laugh at ourselves as well as empower our clients and help them grow.
CT: At the end of each of the 14 sections there are “Points to Ponder.” What purpose do you see them fulfilling?

SG: “Points to Ponder” are the process parts of each section. They are the questions that help readers see beyond the dialogue and content of the stories. They are the queries that personalize the narratives. Without the “Points,” people might be entertained, but there would be no enlightenment.

CT: Why do you feel the average counselor will be able to relate to your stories and experiences?

SG: While a few of the stories are unique and perhaps difficult to relate to on a surface level, on a deeper level most people can recount when they have had thoughts, behaviors or emotions that are a part of or similar to the ones portrayed in these narratives. Counseling is always changing, but human nature remains somewhat consistent. That’s why we can still relate so well to Shakespeare’s plays. Thus, what is foreign is also common. So it is with some of these vignettes.

CT: Do you feel there is material in this book that has the potential to change a counselor?

SG: Change is a matter of choice, timing and synchronicity. I believe almost any story has the potential to spark a difference in a person’s life. Some of these tales will speak passionately to specific counselors, while some will be read and disappear from consciousness. I suggest reading this book out loud. Hearing words is important. When voiced, words are more powerful and influential than when they are linear. Their potency has a chance to hold of a person’s life and transform it.

Through the use of memorable and often humorous autobiographical vignettes, Dr. Gladding shares his experiences as one of the field’s most beloved and respected leaders. His personal experiences reflect universal themes in becoming a helping professional, and both novice and seasoned counselors will benefit from his knowledge, skill, and the wisdom drawn from more than 30 years in the profession.

Topics addressed include personal growth; finding what works and learning from failure; basic skills and counseling processes; creativity in counseling; multicultural and spiritual considerations; the influences of colleagues, friends, and family; working with groups and families; professional development; leadership; and termination. Each section of the book contains “Points to Ponder” to facilitate classroom discussion and personal reflection.

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few weeks back, while teaching a doctoral course on instructional methods for future counselor educators, I was reviewing with my class what we had already covered and what the students wanted to cover for the remainder of the semester. “Teaching with technology” seemed to be a universal request. The course had exposed students to a variety of instructional technologies throughout, and they desired to learn more about how to develop and use them.

“But Dr. Jencius,” one student lamented, “I am technologically delayed.” Despite working in a variety of counseling practices and having had a successful career as a counseling practitioner, this student said she felt her technology skills were behind the curve. Her self-assessment might have been a little harsh. After all, she had shown an ability to complete all the course assignments that I had requested be turned in electronically and formatted in a particular way.

Still, her observation caused me to reflect. In working with counseling students and colleagues, I have found that the simple things often leave us feeling behind the curve when it comes to using technology in our teaching and practice.

Perhaps you’ve left your technophobia behind and want to begin moving down the path of technological literacy in your practice or teaching. To know where to go, first you have to understand where you are. The following online assessments may be helpful in getting you to think about a variety of computer software tools that could further your professional development.

Once you have an idea of your computer training needs, you can turn to the web for various free online tutorials for much of the basic productivity software. Certain websites can also teach you some basics about computer architecture and how things work in most computers. Remember, you don’t have to be a mechanic to know how to drive a car. Likewise, you don’t need to know how a computer works to master a piece of software, although you may be curious about what is going on under the hood (particularly if your computer breaks).

Some suggestions on how to approach expanding your skills with technology and software:
Your learning should follow the natural evolution of digital technology. First there were text documents, then e-mail, graphics, multimedia, audio, video … If you are looking for a place to start to improve your skills, take a lesson on how digital technology evolved. Begin with text documents and build on your knowledge from there. Once you know the basics of documents, learning other technologies will come easier.

Pick the one tool or technology you would like to learn and focus on that one technology. Avoid trying to “learn everything about everything” all at once. If you want to learn more about presentation software such as PowerPoint, then stick with PowerPoint and try not to complicate things by learning other programs at the same time.

Pick a technology or tool with an outcome in mind. If you have an idea of what you want to do with this skill (for example, developing a product for your counseling practice, school or agency), your learning can be driven by this motivation. Perhaps you have an idea for your website or a presentation that will orient clients to your practice or students to your program. Having a vision of the final product keeps the practicality of the learning at the forefront.

Find someone you can partner with in your learning. This gives you someone to bounce ideas off of, plus you can test each other’s knowledge and skills while learning.

Once you learn it and use it, find a way to share it. Nothing reinforces the learning of new technology like showing off your work. Your work may be on direct display for others in your practice or at a professional conference, or you may indirectly demonstrate your skills by teaching another colleague what you have learned.

Do you have a digital New Year’s resolution? Here are some websites that will help you keep your technology resolution, or resolutions of other kinds.

Tools to Keep Your New Year’s Resolution — lifehacker.com/336991/free-tools-to-manage-new-years-resolutions

Expert Advice for Keeping New Year’s Resolutions — umm.edu/features/prepare.htm

New Year’s Resolution Excel Calendar — vertex42.com/calendars/resolution-checklist.html

Did we miss something? Perhaps you have something to add to our suggested links? Extend the discussion and contribute your Digital Psyway links via the web blog at digitalpsyway.typepad.com.

Marty Jencius is the column editor for The Digital Psyway and an associate professor of counseling and human development services at Kent State University. Contact him at mjencius@kent.edu.

Letters to the editor: ct@counseling.org
Counselors’ biggest influences

Nearly 50 ACA members identify the theories and models that guide them, the people who inspire them and the personal experiences that led them to become counselors.

Compiled by Jonathan Rollins

To kick off a new calendar year, Counseling Today contacted a cross section of American Counseling Association members and leaders and asked them the following questions:

- Which counseling theory or model has most influenced your work?
- Which past counselor or other helping professional has most influenced your work?
- Which contemporary counselor or other helping professional has most influenced your work?
- Is there a person outside of the profession (whether a personal acquaintance or a social/political/historic figure) who influenced your decision to become a counselor?
- What personal experience or historic event most influenced your decision to become a counselor?

While certain names and therapy models did pop up repeatedly, readers might be surprised by some of their colleagues’ “biggest influences.” If nothing else, the answers once again illustrate just how diverse the counseling profession remains as 2009 begins.

Warren Corson III

I’m known as “Doc Warren” to most. I work at Community Counseling of Central Connecticut Inc., a not-for-profit that I designed and founded. I am the clinical and executive director as well as a full-time therapist.

Counseling theory or model

While I am an eclectic therapist, the work of Dr. Albert Ellis and his rational emotive behavior therapy have been very influential in my career. I appreciate the straightforward approach of REBT and the ability to translate its model to clients of varying degrees of education, backgrounds and belief systems. My goal is to help clients find the answers for themselves and to do it in such a way that it is easily applicable to future issues and problems. The best day and the best compliment a therapist can get is when a client looks you right in the eye, shakes your hand and tells you that they do not need you anymore.

Past counselor or other helping professional

The top influences, in no particular order, would be Drs. Albert Ellis and Viktor Frankl — his Man’s Search for Meaning should be assigned reading for all psychology students. Carl Rogers has been a profound influence in the way I work and live. Marianne Corey and Gerald Corey have provided a great breadth of education through their textbooks. Patch Adams, M.D., has influenced me to rethink clinical practice and its normal confines.

Contemporary counselor or other helping professional

My former mentor and current colleague Dr. Nicholas Young has most influenced my work. His influence started during our first meeting in graduate school. He asked me what I wanted to do and then helped me map out the best way to do it. I walked into his office as a 38-credit graduate student and walked out a 60-credit student who would also add two postgraduate programs and then a Ph.D. program to my “to do list.” I now have a wall full of degrees and credentials, but most important, I am able to meet the needs of most populations. I also was prepared to open my own agency, which I designed and direct.
Person outside the profession

JFK and MLK taught me that it was OK to dream and that it was my responsibility to my brothers and sisters with whom I share the world to make a difference. They taught me about sacrifice and about overcoming obstacles and fighting hate and disparities in a peaceful manner. Growing up poor and going without basic necessities could have left me bitter, but my mother taught me to be thankful for what little I had because others were not as fortunate. She inspired me to become the first in my family to graduate from high school and supported my dream of attending college. She taught me to ignore the doubters and to live my dream of becoming a doctor. The death of my sister Wendy at age 35 to “nonlife-threatening illnesses” inspired me to found Community Counseling of Central Connecticut so that I could help ensure that everyone, regardless of his or her ability to pay, has access to high-quality care from a qualified doctor.

Personal experience or historic event

All my life, people have come to me seeking guidance. I really do not know why. I have done many things outside the field (I am a certified welder, have done home repair, been a janitor, etc.), but in every endeavor, people came to me seeking guidance. My last job outside the field was in a factory. My boss approached me one day and advised me that I was in hot water because so many people were gathering around my bench seeking guidance. He advised me that I was not a “shrink” and was not hired to help coworkers; I was hired to be a factory worker. I told him he was right, that I had never offered my services to them and did not know why they were coming. I also told him that I quit. I started taking classes the next semester. I realized the responsibilities that were being thrust upon me and my duty to do no harm.

Kacee O’Connor

Currently, I am in a partnership that is a general counseling practice. We both use sand tray therapy a lot. I use some play therapy, mostly child-centered, although my partner takes most of the younger children. I work with families, couples and many teens. We are in rural Idaho, so we have to be flexible and innovative because of the shortage of practitioners, access to mental health benefits and general resources.

Counseling theory or model

Rogers’ client-centered therapy, Frankl’s logotherapy, Landreth’s child-centered play therapy, occasional cognitive behavior therapy

Past counselor or other helping professional

Adler, Erikson, Rogers, Frankl, Glasser

Contemporary counselor or other helping professional

John Gottman, Eliana Gill, Janine Shelby, Gary Landreth, Janine Shapiro

Personal experience or historic event

I previously taught grades seven through nine, a difficult time for most kids. I felt school counselor training would be helpful and that I might have more opportunity to influence kids as a counselor than as a teacher because I could work with teachers and parents too — a systems approach.

Stephanie Taylor

I am a Licensed Professional Counselor residing in Starkville, Miss., and working for Community Counseling Services. My title is children’s services coordinator.

Counseling theory or model

The person-centered model has most influenced my work.

Past counselor or other helping professional

Carl Rogers, the founder of person-centered therapy, is the counselor of the past who has most influenced my work.

Person outside the profession

Charles Cooper, my academic adviser while in community college, most influenced my decision to become a counselor. He took the time to listen to what I wanted to do with my life, then set me on the right track.

Charles F. Wheeler III

Graduate student, Florida State University, rehabilitation counseling

Counseling theory or model

Cognitive and cognitive behavior therapy, because they are positive both in brief and long-term session time frames and allow merging with other possible resources from other theories.

Personal experience or historic event

I had traumatic brain injury in 2004, so I have been through many states of rehabilitation. Speech therapists have given me the most direct assistance and accommodations. They were the only ones who sought out my goals and beliefs and helped me to try to meet my goals. I have seen the lack of counseling in hospitals and rehabilitation and would like to pro-
vide counseling to others with injury or illness. I would like to assist individuals who have illnesses or injuries to progress and meet their goals. I also would like to assist others who have brain injury.

Connie Elkins
Executive director for Mountain Kids Inc., a nonprofit organization that supports children in Southwest Virginia with mentoring, academic enrichment and health care programs

Counseling theory or model
Solution-focused therapies have proved most beneficial when working in school counseling.

Past counselor or other helping professional
Carl Rogers. His core conditions help me to maintain professionalism and perspective. I especially appreciate his trust in clients to find their own solutions.

Contemporary counselor or other helping professional
Dr. Alan Forrest (Radford University). He provides quality instruction and leadership and is the consummate counselor.

Personal experience or historic event
I have always been interested in principles of psychology and motivation. The counseling profession allows me to pursue my interests, which include developing programs that support underprivileged children.

Rev. Janet M. Harman
LPC, licensed social worker and ordained deacon. I live in Charleston, W.Va., and am employed as the deacon associate at St. Marks United Methodist Church. Here, not only am I the associate minister (doing church work — preaching, teaching, weddings, funerals, visitation), but I have a small counseling practice in which I see about two to three persons weekly.

Counseling theory or model
Rational emotive therapy and rational behavioral therapy. These seem to be tailored for me. I find that my counseling all these years has really been quite cognitive. I encourage my clients to reexamine their thinking patterns, and I teach skills to develop new ways of thinking. I encourage lots of reading outside the therapy session because I believe more gets done outside of session. We can practice it in session and “act,” but the real work is outside in the world.

Past counselor or other helping professional
Dr. Robert Smith, a professor I had at Marshall University (then the West Virginia College of Graduate Studies) who taught me how to incorporate RBT/RET into my thinking and doing and helped me in my interviewing skills. He taught me the “A-B-C” model. I used this a lot with the clientele I was working with at that time — men and women who were on parole or probation and seeking employment in their communities.

Second, Dr. Linda Geronilla, also then at (Marshall) and now in private practice, was my very first professor in graduate school. From her class I learned so much about group dynamics, about being a counselor, about myself. I probably have never thanked her for her assistance in my growth. She was quite influential for me.

Contemporary counselor or other helping professional
Dr. Albert Ellis (founder of RET) and Dr. Maxie Maultsby (founder of RBT)

Person outside the profession
Dr. Donald C. Houts, a United Methodist clergy member. When I knew him, he was a professor of pastoral care and counseling at St. Paul School of Theology in Kansas City, Mo. Through his sharing of pastoral counseling books, personal case notes and articles about counseling, I was hooked. It seemed the right area for me to pursue, and I was just starting undergraduate college at that time. When I was ordained a clergyperson, I sent him a thank-you note to let him know just how much his teaching/persona influenced me.

Kimberly Christopher
LPC candidate and therapeutic foster care counselor, Youth & Family Services Inc., Enid, Okla.

Biggest influences
My decision to become a counselor came on the heels of a diagnosis of a major mental disorder at the age of 18. I was hospitalized for several months in a psychiatric unit. While in this unit, I found I had a natural ability to counsel. I left that experience thinking I would go into psychiatry. I was discouraged by others and changed my major to nursing. Not thinking it was a good fit, I dropped out and later returned to school as a psychology major. At that point, I was influenced most by a Christian psychologist who helped me to see that my energies and natural motivations were indeed directed toward counseling.

I am naturally drawn to Adlerian therapy as a predominant theoretical orientation. I have personally lived out most of the aspects of this theory. A contemporary counselor who has most influenced me is a counseling psychologist who was a professor in my graduate school (master’s level) and is currently my clinical supervisor at the agency where I work. He encouraged us to stay with our natural bent and excel in the theoretical persuasion that is closest to our personal philosophies.

Today, in the footsteps of my mentors, I am pursuing a Ed.D. in counseling psychology. I can only hope that I will be as effective as I am passionate about my profession.

Deborah Walsh
I work as a school counselor at Biddeford High School in Biddeford, Maine. In this capacity, I do academic, career and personal/social counseling with 300-plus students in grades 9 through 12. I recently began a limited private practice doing individual and small-group career counseling and college planning.

Counseling theory or model
I am familiar with a broad range of interpretive and therapeutic techniques and believe in an integrated approach to counseling, incorporating the most appropriate approaches from various theories to address the unique needs of my clients. That being said, the primary counseling theory that most influences my work is Carl Rogers’ person-centered approach to counseling. I also frequently incorporate solution-focused brief therapy when appropriate. In career counseling, I draw heavily on Super’s life span theory of career development as my foundation.
Contemporary counselor or other helping professional

Professor Marijane Fall, now retired from the University of Southern Maine, played a major role in shaping who I am as a counselor. She taught me how to be with a student or client and to trust my instincts. She is always genuine, accepting and present, putting one at ease, yet able to get directly to the heart of the matter in a way that is meaningful to the client. I continue to learn from Marijane’s quiet, compassionate and skillful manner.

Personal experience or historic event

I spent 20-plus years in some form of management and systems consulting, problem solving with any combination of people, processes and technologies in business settings. It was a rewarding career in many ways. The parts that I liked best, and that most contributed to my success, were building relationships and problem solving. At the same time, I raised a son with learning disabilities who was also exceptionally bright — a challenging combination for both of us. These experiences, and my work as a Boy Scout leader, resulted in my desire to become a guidance counselor when I retired.

“Retirement” came early in the form of a layoff in the aftermath of September 11. My “retirement” goal was looking brighter, even though I was only 44 years old.

Joanna Refvem
LPC, Mount Airy, N.C., Choices Counseling & Resource Center. My first seven years, I was a school counselor at middle and high school levels, and I still hold an active license. Since 2006, I have owned and operated a private practice. My primary focus is mental health for adolescents, adults, couples and families.

Counseling theory or model

Reality therapy and choice theory by William Glasser. He utilizes a nonmedical approach with clients, focusing on the ways we seek to have successful relationships with others, the unsuccessful solutions we employ (particularly attempting to control others through criticizing, blaming, complaining, nagging, threatening, punishing or bribing) and habits we can adopt to live healthy lives (supporting, encouraging, listening, accepting,
In this book, David Capuzzi, a renowned expert on suicide, encourages suicide prevention in schools through the use of a clear and effective crisis management plan designed to identify and serve at-risk youth. His concise, step-by-step framework provides essential information for school counselors, administrators, and faculty on suicide assessment, faculty roles and responsibilities, and instructions on how to implement a building- or district-wide prevention program that includes faculty training and preparation of crisis teams.

Key Features
- Discussion of risk and protective factors
- Specific components of school- and district-wide prevention programs
- Content for faculty training and preparation of crisis teams
- Postvention after a suicide attempt or completion
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In particular, focusing on the fact that we can only control our own behavior has brought about visible changes in the lives of those I treat.

Past counselor or other helping professional

From the beginning, my own school counselor from years ago challenged me to think beyond my borders and seek more than I had dreamed was possible. Without her, I may have chosen not to attend university. All these years later, I am still grateful, and I hope during my tenure as a school counselor that I proved helpful to others.

Contemporary counselor or other helping professional

My friend and mentor for years has been Vicki Carr (an LPC in Winston-Salem, N.C.). We trained together. She has always been in private practice and has mentored me through these two and a half years of my own private practice. Kaye McCormick (an LPC and school counselor, Mount Airy City Schools) was my first supervisor out of grad school. She helped me attain my LPC and settled me into school counseling. Tricia Ridge-way (a private practitioner in Mount Airy) has offered me valuable insights into effective practice with practical tools and guidelines.

Person outside the profession

My relationship with Jesus Christ has formed my worldview, and I truly believe He has navigated me to this place in my life. Through His power, I am able to be present with my clients — never judging but ever ready to share the hope that is within me. I do not have a Christian practice per se, but I am a Christian who is in the practice of counseling.

Personal experience or historic event

As my fifth child entered school, I contemplated returning to school to get a teaching credential. With guidance from my local university, I decided my social work undergrad degree would work well with a master’s degree in counseling, which I could then use in the school system.
Jane Goodman

Professor emerita, counseling, and director of the Adult Career Counseling Center, Oakland University. I am a past president of ACA and the National Career Development Association as well as a past chair of the ACA Foundation.

Counseling theory or model

Nancy Schlossberg's transition theory. I have experienced so many transitions in my personal life and with clients that this theory resonates with me. I have also been fortunate to write with and work with Dr. Schlossberg, so the theory has special meaning. If I get to pick two theories, I would choose Don Super's career development theories, especially as modified by Mark Savickas and others to include adaptability.

Past counselor or other helping professional

See above. Also John Krumboltz and H.B. Gelatt with their theories relating to happenstance and uncertainty.

Contemporary counselor or other helping professional

I would also add Elly Waters, role model extraordinaire!

Personal experience or historic event

I had a commitment to social justice that led me into education as a field. I was led into counseling by teaching elementary school and realizing that was not how I wanted to relate to kids, as well as my first job doing college placement, which I adored.

Colette Dollarhide

Past president of the Counseling Association for Humanistic Education and Development. I am a visiting assistant professor in counselor education at The Ohio State University, where I specialize in school counseling.

Counseling theory or model

Humanistic approaches, primarily Adlerian and existentialism. I also believe that creativity and spirituality inform the foundation of how I connect with clients and with my students.

Past counselor or other helping professional

That past counselor was Adler. His work was the first to address phenomenology, influence of the family and the affect/behavior/cognition connection that is the basis of all contemporary theories.

Contemporary counselor or other helping professional

The works of Sam Gladding on creativity and of Myers and Sweeney on wellness and spirituality have a profound effect on the relationships I form with students.

Person outside the profession

As I was searching for the right “fit” relative to my values and how I wanted to be as a professional working in a postsecondary or university setting, I took a class in administration of education. The professor said I reminded him of a counselor educator he knew, and he suggested that I contact Dr. Mary Maples of the University of Nevada, Reno (now retired). The rest, as they say, is history.

Personal experience or historic event

As an educator and administrator for a private college, I was working individually with many second-career adults who were struggling with career transitions. I realized it was impossible to teach them until they were ready to learn — until their mourning for their lost profession was resolved. So the connection with counseling emerged as I discovered that I needed skills to help them on a personal level before I could help them as a teacher/instructor. As a result, my initial counseling emphasis was career counseling and college student development. After getting into the profession, my interests expanded into school counseling.

Cirecie West-Olatunji

Immediate past president, Association for Multicultural Counseling and Development, and assistant professor, University of Florida. I conduct research focusing on systemic oppression and traumatic stress and the impact those variables have on the academic achievement of culturally diverse and other socially marginalized children.

Counseling theory or model

Culture-centered counseling theory has most influenced my clinical work, instructional practices and research endeavors. While it was Paul Pedersen’s foundational work that was initially published in the Journal of Counseling & Development, many counseling scholars of culturally diverse backgrounds have also contributed to this area. In particular, African-centered counselor educators and psychologists have presented a spectrum of culture-centered approaches to counseling and psychotherapy. Additionally, Michael Garrett has provided our discipline with a solid foundation for use of indigenous frameworks and interventions from the Native American traditions.
Past counselor or other helping professional

By far, the late Dr. Asa Hilliard has been most influential in shaping my perspective on transformational counseling and liberation ideology in clinical practice. Dr. Hilliard impacted a variety of disciplines and functioned beyond the superficial academic silos that we often impose in the academy. His brilliant mind and relentless quest for social justice provided counselors and other mental health professionals with forward and critical thinking. His untimely death has left a gaping hole for all behavioral scientists.

Contemporary counselor or other helping professional

It is perhaps Derald Wing Sue’s work that has most influenced my thinking today. His steadfast exploration into racial/cultural identity that reflects his own movement and growth as a person is inspirational. I often marvel at his ability to continue this work despite the resistance from colleagues and students who frequently project their own fears and uncertainties onto him. In future decades, we will be able to look back on his work and acknowledge his full contribution to the counseling profession.

Personal experience or historic event

When I took my first counseling course, I was working as an administrator at Albert Einstein College of Medicine, where I encountered very bright and intelligent students who were having difficulties with the course work. That very first course in counseling not only answered my questions about the medical students but really spoke to my soul. The fundamental tenets of counseling match my personal philosophy on life.

I had always loved multicultural theory and Asian American psychology, but this model allowed me to acknowledge that there are feminists in every culture in the world. Paulo Freire (Pedagogy of the Oppressed), Martin-Baro (liberation psychology), Derrick Bell (critical race theory), Audre Lorde (Black lesbian theory), Vijay Prasad (South Asian theory) and bell hooks (feminist theory) have been instrumental influences as well. I am thankful to Dana Comstock, who continues to teach me about relational-cultural therapy.

Past counselor or other helping professional

Y. Barry Chung (now at Northeastern University) has been a mentor of mine for the past eight years. His commitment to the highest standards of scholarship, mentorship and integrity as a counselor-scholar-advocate inspires me consistently. I carry his influence — gentle encouragement and empowerment — in my heart in all my work. When I get “stuck” and struggle, I am reminded of the many gifts he shared with me during my training, including permission to be myself, do the work I care about most in the world and never slice off the cultural parts of myself as a queer counselor of color.

Contemporary counselor or other helping professional

Grace Poore, a South Asian activist and comrade, made a documentary called The Children We Sacrifice about child sexual abuse in the South Asian community. I was coleading a support group for South Asian immigrant women who had survived intimate partner violence when I first watched her documentary. Her work reminded me to have courage and never forget that adulthood — the oppression of children — is a core aspect of all other oppressions. Grace works on international lesbian, gay, bisexual, transgender and queer issues as well, and she reminds me of the community liberation that is possible when we recognize that counseling itself is an empowerment process.

Person outside the profession

My friends and family would make comments about how I gave good advice and was a good listener — all counselors-to-be hear that feedback! I would also say that the civil rights leaders of Atlanta really influenced me to be a counselor. I remember listening to John Lewis talk about beloved community and Coretta Scott King say things like, “Homophobia is as morally wrong as racism.” They both talked about manifesting our individual skills in the world to make it a better place, and counseling seemed like the best way I could use my skills.

Personal experience or historic event

When my father died, I had been working as a community organizer in the reproductive justice and HIV/AIDS movements for about 10 years. His death made me reconsider how I had been working on issues of privilege and oppression from primarily a group or community model. I knew issues such as racism and heterosexism hurt people’s individual well-being as well, and counseling seemed like the best way to learn how to address these wounds.

Bob Chope

President, National Employment Counseling Association, and professor and former chair of the Department of Counseling at San Francisco State University. I am a semiretired professor and continue in my consulting practice at the Career and Personal Development Institute in San Francisco.

Counseling theory or model

Andres Consoli and I have created our own theory titled contextual integrative psychotherapy, which can be accessed through the American Psychological Association publication on integrative psychotherapies. That theory has been guiding my work for the past few years. We have shown counselors how to integrate both theory and multicultural understanding into one framework. It can be compared, to some extent, with Wendy Patton’s systems theory framework from Australia.

Past counselor or other helping professional

My adviser, David P. Campbell, was greatly influential to me. Epson and White, the founders of narrative therapy, and Cochran, who operationalized this material for career counselors, were also very influential.
Contemporary counselor or other helping professional

I appreciate the contributions of Mark Savickas to my work and to career and employment counseling in general.

Person outside the profession

B.F. Skinner was a very positive mentor and role model for me while I was an undergraduate at Harvard. Erik Erikson also played a role in my becoming a counselor and psychologist, but Skinner had the most impact. Actually, Skinner wanted me to be more of a researcher than a clinician and told me much later that he was disappointed that I did not follow the track he had suggested. Not enough positive reinforcement?

Personal experience or historic event

I was a conscientious objector during the Vietnam era, and I worked with delinquent adolescents for four years as my alternate service. Thereafter, I was hooked on counseling and pursued my Ph.D. at Minnesota after my duty time was completed.

Shawn Dunn
Junior/senior counselor at Bossier High School, Bossier City, La.

Counseling theory or model
William Glasser’s reality therapy

Past counselor or other helping professional

Dr. Nichter was one of my professors at Sam Houston State University while I was working on my master’s degree in counseling. I can recall several real-life examples she gave us that inspired me. When I am working with students, I try to think, “What would Dr. Nichter do?”

Personal experience or historic event

My parents got divorced when I was in elementary school. I didn’t quite “feel the effects” until I was in high school because I don’t think I let myself. At that point, my high school guidance counselor was there to keep me on track and to help me determine what I wanted for my future.

Elliott Ingersoll
President-elect, Association for Spiritual, Ethical and Religious Values in Counseling

Counseling theory or model

Ken Wilber’s integral model, which I use as an organizing framework for my counseling practice. I’ve worked with Integral Institute for six years developing the integral counseling model, and we did a special issue of Counseling and Values on the model.

Past counselor or other helping professional

Jan Gill Wigle, who taught at Youngstown State University. She and Chris Faiver were incredibly encouraging and tolerant of my somewhat oppositional nature.

Contemporary counselor or other helping professional

Judy Miranti, Ansel Woldt and Chris Faiver. All three have been incredibly generous with their time and wisdom in helping me throughout my journey.

Person outside the profession

My philosophy professor, Dr. Martin Greenman, also of Youngstown State University. He was chair of philosophy in the 1980s and directed me away from psychology and toward applied psychology and counseling. He thought I would have more fun (and he was right).

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Brooke B. Collison
Professor emeritus, Oregon State University, and past president of ACA

Counseling theory or model
I did most of my graduate work in counseling in the 1960s at the height of the Rogers-Skinner debates. For me, Rogers came out the winner, and there is still a great deal of the philosophical orientation toward people, interaction and change from that era that guides my day-to-day living. As grad students, we had many long and passionate discussions about theoretical orientations and techniques. Over the years, the core set of beliefs has remained the same, has probably been reduced in number and remain a constant in my life.

Past counselor or other helping professional
E. Gordon Collister was a faculty member in the counseling program at the University of Kansas. He had an enormous impact on me in class and in personal interaction. He saw me outside his office one day when I looked rather despondent. I had been working with some adolescents and felt I was not having any impact on their lives. He said, “Collison, get in here and sit down.” He asked what was going on. After I voiced my concern that I was not being effective, he asked, “What makes you think you can ‘fix’ everything for everybody?” I left his office after a lengthy discussion with a new perspective on my work — a perspective that remains with me today.

Person outside the profession
The major influence on the way I teach, work with others, conduct groups or counsel came from a group of very bright high school students where I began my teaching career. It didn’t take me long to discover that they knew more about the subject at hand than I did. Among the group were students who wrote better than I could, spelled better than I could, knew more about state government than I did and had read more than I had. My confidence was shaken to the core, and the thought of going to school and trying to give that group information actually made me ill. In a moment of insight, I realized I didn’t have to know more than they did and I didn’t have to teach by “providing information.” I could help them manage what they knew and find ways to expand beyond their knowledge base. My teaching philosophy changed immediately. It resembles my counseling philosophy.

Graham L. Peveller
I run an established worldwide online service that provides an essential facility for the transgender community, in particular those requiring assistance and assessment of gender-related issues and transition. I provide support, counseling and assessment of gender-identity issues, readiness for hormones and, if desired, sex reassignment and/or related surgeries for both trans men and women.

Counseling theory or model
Overall, I take a Rogerian and generic approach (if one thing fails, try something different) in my work, which, with gender-related issues, is not about therapy (change) but counseling.

Contemporary counselor or other helping professional
I would have to answer generic social work in the United Kingdom and my then involvement with both individual and family therapy.

Person outside the profession
John Byng-Hall and David Campbell, Tavistock Institute, London

Personal experience or historic event
Working with the above people in the early 1970s at the onset of my social work career in the United Kingdom.

Justin Galloway
I am the clinical supervisor for the Richmond, Va., office of Youth Villages. I offer clinical guidance to a team of in-home counselors who work with families involved with social services or court services.

Counseling theory or model
I work from a combination of family systems, solution-focused and multi-systemic therapies. In graduate school, I felt that family systems was a good theory base, but most of my therapy looked more solution-focused. Currently, I work from a systems model on which my employer bases its approach.

Contemporary counselor or other helping professional
Dr. Tom Smith at Auburn University encouraged me to get into family therapy and into the counseling field. He helped guide me in the right direction and into the right area of the field that would best suit my career and life goals.

Person outside the profession
Randy Tyner is a pharmacist and owns his own pharmacy in Birmingham, Ala. I worked for him through high school and the early part of college. He is a tremendous leader and someone I would label as being successful. Randy taught me much of what I know when it comes to leadership skills, customer service and meeting your clients at their level. Although he’s not in the counseling field, he is in the helping profession, and much of what I learned from him has carried over into my career.

Kia Sanford
Kailo Counseling and Nutrition, Ashland, Ore.

Counseling theory or model
Really, the fact that there are so many foundations from which to work is the biggest influence of all. It has freed me to see that my hybrid style will help the clients with whom I build rapport, and that it really is the rapport that holds the most weight in any counseling relationship more so than any particular framework or model.

Past counselor or other helping professional
I have learned much from Anne Wilson Schaef’s work as well as Charlotte Kasl, Jon Kabat-Zinn, David Sobel and Robert Ornstein. I have incorporated teachings
from Rumi and the Dalai Lama and the quantum viewpoints of Larry Dossey and Deepak Chopra. Most influential by far, however, are my clients themselves. I learn something new from each individual I see.

Personal experience or historic event

It finally clicked for me when a friend I was helping through a very difficult and abusive breakup with a significant other turned to me one day and said, "It’s a shame you aren’t doing this for a living. You’d be a great counselor." It was then that I realized I had essentially been doing lay counseling naturally my whole life. I went back to school to make it official.

Sunny Sundal Hansen
Past president of ACA and NCDA; professor emerita, counseling and student personnel psychology, University of Minnesota; founder and director of BORN FREE Program

Counseling theory or model
Donald Super's developmental stages and life roles

Past counselor or other helping professional
Professor Henry Borow and professor emerita Helen Farmer

Contemporary counselor or other helping professional
Professor Nancy Betz on women's career development

Person outside the profession
My father

My chaotic childhood and family of origin inspired me to enter the field of counseling.

Joanne M. Wholey
Psychotherapist and LPC. I live and work in Bloomfield, Conn. My practice is focused on adults. I work with individuals experiencing mood disorders and work/life issues. I have particular expertise in the areas of trauma recovery, eye movement desensitization and reprocessing, and pet loss/bereavement support groups.

Counseling theory or model
My counseling practice is eclectic and has been most influenced by the humanistic and transpersonal theories.

Past counselor or other helping professional
Carl Rogers and his unique ability to empathize and be with the client in the moment. On a more personal level, I had the privilege of working with a therapist in my late 30s who walked with me through a terrifying and difficult journey related to some significant childhood trauma. She is the inspiration for my work with trauma clients today.

Contemporary counselor or other helping professional
I would have to say Richard C. Schwartz, founder of the Center for Self Leadership and the internal family systems model. I am toward the end of the first of three levels of training in this model.

Personal experience or historic event
For most of my professional career, I was in the field of human resources with a prominent insurance company. It satisfied some of my desire to help others, but it had its constraints. My passion had always been to relate to people on a more intense and personal level. In the

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Jesus Roberto Martinez

Medical case manager/ liaison, Opportunity Center for the Homeless, El Paso, Texas; earned a master's of education with highest honors in guidance and counseling from the University of Texas at El Paso

Counseling theory or model

Gestalt therapy and its emphasis on addressing unfinished business from the past in the here and now. Gestalt therapy has allowed me to help clients who were stuck with an array of unfinished business such as unresolved grief, rage, hatred and resentments. I consider gestalt therapy's techniques, such as the empty chair, letter writing, role playing, psychodrama and re-enactments, to be extremely valuable tools and assets to have at my disposal. However, I would not venture directly into gestalt therapy without first engaging a client for at least four sessions with person-centered therapy to establish a working, collaborative client-counselor relationship.

Contemporary counselor or other helping professional

While doing my social work field experience at a private psychiatric facility, I had the good fortune of being supervised by a master's-level social worker who taught me how to facilitate groups. His name is Sam Nunez, and he continues his private practice.

Person outside the profession

My mother wanted me to become an educator, and in the long run, things have worked out because I believe that as a counselor, I motivate, teach, guide and counsel.

Personal experience or historic event

When I was honorably discharged from the military in 1972, I had a real tough period of adjustment for about 12 years. After being in therapy for several years with clinicians from the Department of Veterans Affairs, I made a decision to go back to school and earn a degree in counseling.

Samuel T. Gladding

Past president of ACA; chair and professor of counseling, Department of Counseling, Wake Forest University, Winston-Salem, N.C.

Counseling theory or model

Existential therapy is the model that has most influenced my work. I love the emphasis existentialism gives to the importance of discovering meaning and purpose in life. I also like systems theory as a model for examining interpersonal dynamics.

Past counselor or other helping professional

The work of Rollo May and Viktor Frankl have influenced me the most. I once took a course under Rollo May at the New School in New York City, commuting in for four weeks when I was a graduate student at Yale. The Frankl influence comes from teaching a summer graduate course in Vienna, Austria, for Wake Forest on the Vienna theorists. Frankl's grandson, Alex Vesely, a logotherapist in his own right, has helped facilitate this course. Alex has made Frankl come alive for me.

Contemporary counselor or other helping professional

Dick Hackney. I like his modesty and his ability to write and speak in such a way that knowledge and insight is gleaned in an inspirational and sometimes humorous, but always clear way. Mark Young has been equally dynamic and influential in my life and work.

Person outside the profession

As a teen, I remember being intrigued with Dag Hammarskjöld, the second secretary-general of the United Nations. I thought he was an altruistic figure and a deep thinker.

In more modern times, I have been influenced by the lives of Mother Teresa, John Claypool and my grandfather, after whom I was named.

Personal experience or historic event

Initially, I planned to be a minister. However, at Yale Divinity School, I realized my passion was more in the counseling than the theological arena. Tom Elmore, who began the counseling program at Wake Forest, was instrumental in helping me make the change, and my parents supported me unconditionally.

Yahaya Lasiele Alabi

Lecturing and counseling, Department of Counsellor Education, University of Ilorin, Nigeria

Counseling theory or model

Rational emotive behavior therapy

Past counselor or other helping professional

Albert Ellis

Contemporary counselor or other helping professional

Professor A. I. Idowu, University of Ilorin, Nigeria

Person outside the profession

Mrs. Aminat Yahaya (my mum)

Personal experience or historic event

A secondary school lesson in 1979 on causes of deviant behaviors among adolescents

Bob Schmidt

Chair-elect of the ACA North Atlantic Region and clinical coordinator of the Fairfield University Counselor Education Department

Person outside the profession

When I attended the Don't Laugh at Me training in Columbus, Ohio, in 2001, one of the trainers was Peter Yarrow (of Peter, Paul and Mary fame). Peter was one of the creators of the antibullying program that has been used in schools all around the country. I saw how Peter used music to touch people's hearts and minds. As a musician, I was inspired, and I began to use music more both as a counselor and as a counselor educator. Although Peter is not a counselor, he has the sensitivity, compassion and understanding that all great counselors have.
Jane Myers
Past president of ACA, the Association for Adult Development and Aging, and the Association for Assessment in Counseling and Education; professor, University of North Carolina at Greensboro Department of Counseling and Educational Development. I teach graduate counseling students at the entry and doctoral levels.

Counseling theory or model
Alfred Adler’s individual psychology. It has been more helpful than any other approach in contributing to my understanding of human behavior and change processes.

Past counselor or other helping professional
Dr. C. Gilbert Wrenn, widely known as the “father” of multicultural counseling. Dr. Wrenn’s personal presence was inspiring—he truly was a “humanitarian and caring person” and a “mensch.”

Contemporary counselor or other helping professional
Dr. Tom Sweeney, an Adlerian counselor, and Dr. Allen Ivey, whose work in developmental counseling and therapy has influenced my teaching and counseling.

Person outside the profession
My mother, who taught special education and had guidance counselor credentials. Albert Schweitzer, whose humanitarian work and reverence for life made their mark on my work.

Personal experience or historic event
Growing up with a brother who had a profound hearing loss and severe developmental disability; having him institutionalized at age 17 through a court order because the neighbors signed a petition asking that he be removed from the neighborhood, as they found him objectionable.

Brian S. Canfield
Immediate past president of ACA. I have been a practicing counselor and counselor educator for three decades and currently serve as vice president for academic affairs at Southern Arkansas University.

Counseling theory or model
My initial influence was the work of Carl Rogers, which continues to be the core of my relationship with clients. Later, this was expanded with a knowledge of structural-strategic family therapy and family of origin theory. More recently, in the past several decades, my approach to counseling has been refined by cybernetics and social constructionist theory.

Past counselor or other helping professional
My eighth-grade school counselor at Midway Middle School in Shreveport, La.—whose name I unfortunately do not recall—provided my first exposure to counseling, assisting in my adjustment to a new school. This was a very positive experience that shaped my expectations of counseling as a “helping” profession.

Contemporary counselor or other helping professional
Too many to mention by name—all of the professors, supervisors and colleagues with whom I have interacted have made their mark on my work.

Person outside the profession
My parents instilled a strong value of respecting all persons and the importance of helping others—regardless of the nature of one’s work.

Personal experience or historic event
Recognizing that most aspects of the human condition are universal. My decision to become a counselor was based on a desire to earn a living and help others at the same time.

Jamie Cross-Lee
I am an LPC in Georgia. I am a play therapist and continue to work with children/adolescents through my private practice, Patchworks Counseling Center Inc., located in Stone Mountain, Ga., and as an adolescent substance abuse prevention specialist with the Department of Juvenile Justice. I also counsel adults, families and couples.

Biggest influences
I use several different theories whenever I feel they are appropriate for the client. Adlerian for adolescents and cognitive behavioral theory are used most. I had a supervisor named Karen Nash who specialized in treating traumatized children. She was very knowledgeable, patient and had a natural talent for providing families what was needed. I aspired to be like her. Also, my minister, who I call my spiritual father, Bishop Melvin Mosley, has always shown love to everyone, helping them tirelessly. He has done missionary work in Haiti and Africa for 40 years and continues to be dedicated. Bishop Mosley recruited me and other college students to work with the youth at the church. I realized the kids and their families had issues I wasn’t prepared to handle, and Bishop Mosley was unable to counsel them all.

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My mentor, Beverly Farrow-White, was teaching at Marshall University Graduate College and told me of a scholarship to apply for in the counseling department where she taught. I was accepted and started school the next semester. I continued working with the kids and families until I graduated and relocated to Georgia.

Eric J. Green
President of Counselors for Social Justice. I am an assistant professor and coordinate the play therapy program at Johns Hopkins University. I maintain a part-time private practice in analytical child psychotherapy with elementary school-aged children and their families.

Counseling theory or model
Jungian psychology has predominantly influenced my clinical practice and the way I view the world.

Past counselor or other helping professional
Reese House was a significant past counselor who heavily influenced my worldview and the mechanism I use to help children through advocacy. His words of wisdom on ensuring equitable services for every child in school systems are still with me today.

Contemporary counselor or other helping professional
Three strong, independent women/leaders in the counseling profession: Drs. Theresa Christensen, Vivian McCollum and, especially, Barbara Herlihy.

Person outside the profession
Rev. Paul Metrejean, a Catholic priest and counselor in south Louisiana, influenced my decision to become a counselor. He also is the individual who introduced me to Jung’s theory.

Personal experience or historic event
I have known since I was 17 years old and beginning my undergraduate studies at Louisiana State University that I was meant to be a counselor. Not until I was midway through the master’s degree did I realize that I also wanted to help children. Rev. Paul Metrejean is the person who encouraged me to work with children, and I am forever indebted.

Judy Maris
I am in private practice in Bozeman, Mont., working with individual adults. I work with anxiety, depression and psychological trauma. I have extensive experience working with survivors of domestic abuse. I enjoy doing depth work, which does not necessarily have to take a long time, when the client is ready.

Counseling theory or model
Psychodynamic psychotherapy was what made sense to me from the beginning of my graduate studies. The richness and complexity with which it views human experience and relationship has formed the core of my work. Even though I work primarily with adults, the model frequently helps make sense of both intrapsychic and relationship patterns. It has also been invaluable in helping me to understand my own attachment issues and how they travel with me into the consultation room.

Past counselor or other helping professional
Unquestionably, the person who has impacted my personal life and clinical work to the greatest degree is Dr. John Christopher, my supervisor, professor and mentor at Montana State University. Christopher teaches a class called Mind-Body Medicine and the Art of Self-Care (see Counseling Today, November 2006.) Through his class, I was introduced to the concept of mindfulness — awareness of the present moment without judgment. In the class, we were invited to experience both ourselves and the phenomenological world in ways that involved emptying more than filling up; letting go rather than accumulating; being rather than doing.

Contemporary counselor or other helping professional
I struggled to find a theoretical and therapeutic model that would incorporate my passions for psychodynamic theory, attachment theory and mind-body awareness. I found that model in Hakomi, developed by Ron Kurtz. Hakomi postulates that it is not necessary to engage in long, speculative conversations about our past because our psychological histories and core beliefs are visible in the way we arrange our bodies to meet the world. Based on qualities in the therapist that include mindfulness and what Kurtz calls “loving presence,” Hakomi provides the means for accessing our deepest, usually unconscious beliefs about ourselves, the nature of the world and what we expect from relationships.

Person outside the profession
The last major influence I want to mention is not outside the profession. My partner and best friend, Dr. Barton Evans, freely shares his 32 years of training and experience in psychotherapy, assessment and forensic psychology with me. As an unofficial supervisor, he has provided unerring guidance with both challenging clients and challenges arising from my own psychological history. He helps me to think about clients in greater depth and breadth, correcting my sometimes hasty reach for an easy interpretation. He is a model of the best our profession has to offer.

Personal experience or historic event
In my early fifties, I read an interview with Carlos Castaneda in which he said, “Death is your truest friend and your most reliable adviser. If you have doubts about the course of your life, you have only to consult your death. Death will never lie to you.” The moment I read those words, I thought, “I want to become a counselor.”

Sylvester C.K. Lim
I reside in Kuala Lumpur, Malaysia, and run my own Wellness Center, providing “treatment” (which we refer to as “consultations”) to individuals, groups and families. We also offer public workshops to help people understand themselves better and for self-development and growth. I recently accepted the position of CEO for Pride Foundation, a charity organization that enhances awareness efforts and improves accessibility to treatment for breast cancer at all levels of society.

Counseling theory or model
I remember my professor asking this question when I was in grad school at East Tennessee State University. I said I felt my answer was a cop-out because it seemed like the easy way out to say I was “eclectic.” She kindly assured me, “That’s not a cop-out answer,” and this has stayed with me. I sometimes think I rely a lot on psychodynamic approach, but truly, in practice, I am a mixture of everything.
We really do have to be “intuitive” and rely on our inner instincts to guide us. But we also are led by our clients, and our approaches are “made” to fit our clients’ needs rather than our own unyielding style.

Contemporary counselor or other helping professional
The two people in the field who most influenced me are the professor I mentioned above, Dr. Peggy Cantrell, whom I had the utmost respect for, and Rhonda, a supervisor of mine many years later when I joined the working folks out in the “real world.” I truly learned a lot from these two women and up until this day, I still hold them in high esteem and talk about the influence they had on me.

Personal experience or historic event
I remember very clearly one day when I felt I had to choose between computer science (and programming) and the study of psychology. I had gone to the U.S. to study computer science initially, though I always had a fascination for psychology. In my junior year, I was going through one of our computer-generated sheets that listed hundreds of our “compilation” errors when it occurred to me that doing computer programming was kind of like dealing with human “challenges” in that the presented symptoms may seem to be in the hundreds. But if we could find the one source (or a handful), then the hundreds of “symptoms” (or error messages in the computer programming sheet) would seemingly disappear. While I enjoyed both, I asked myself which would be more significant. I am where I am today because of that “turning point.”

E.T. “Moe” Briggs
I serve as clinical director for the Kolmac Clinic in Washington, D.C. I am responsible for the day-to-day operation of an intensive outpatient clinic serving the treatment needs of persons with addictive and co-occurring disorders.

Counseling theory or model
The centerpiece of my work is cognitive behavioral therapy, especially as expressed by Aaron Beck in *Cognitive Therapy of Substance Abuse*. Interestingly enough, it fits well with elements of my person-centered practice as expressed by Carl Rogers.

Past counselor or other helping professional
Lynne, my supervisor, introduced me to the importance of being trained to work with patients with co-occurring disorders. She made the notion of “do no harm” critical to my development and my desire to continue my education.

Contemporary counselor or other helping professional
George, who teaches me to use the science of our field and our collective experience to improve our service delivery. We must find ways to adapt to changes in our practice to meet the ever-changing needs of our patients.

Person outside the profession
My mother who, without knowing or planning it, gave a lifetime of service to others, demonstrating care, concern and perseverance when things did not go as she expected.

Personal experience or historic event
The most significant experiences were attending trainings and seminars to obtain certification as an addiction counselor. I understood from the experienced counselors that it takes more than a desire to help others get better. I learned that the counseling profession is a special calling that requires a good balance between desire, compassion and training.

Cheryl Smith
I have a private counseling practice in Charleston, S.C. I accept rotational contract assignments to do consultant work counseling at U.S. military installations around the world.

Biggest influences
The following individuals, experiences and perceptions have exerted relevant influence over my professional development:
1. Parents who supported self-expression in writing and reading activities and validated my self-worth.
2. Psychologists who early on supported my fledgling efforts to “apprentice” with them while counseling psychologically and physically wounded veterans in VA hospitals.
3. Valuable family role models who demonstrated generosity and humor.
4. Multiple geographic relocations as a young person and learning to develop and maintain friendships.
5. Summer camp counseling, guiding eight to 10 young girls to become a cooperative team while allowing for individual differences.
6. The humility that comes with having children.
7. Divorce, with successful networking and readjustment.

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8. Good health and valuing exercise and leisure skills.

9. Curiosity and fascination regarding the deviations in human perception and their impact on behavior and outcomes.

10. Deriving pleasure and satisfaction from research and increased knowledge and the capacity to be of service to others, because ...

11. There but for the grace of God go I.

David Capuzzi

Chair, ACA Insurance Trust, and past president of ACA. I reside in Oregon but work for Penn State University. I commute periodically to teach intensively formatted counselor education courses and conceptualize and implement Summer Institutes for counselors and other helping professionals. I am a professor emeritus of Portland State University in Oregon.

Counseling theory or model

I have studied all the mainstream models that are usually taught in counselor education programs as well as a number of Eastern and alternative models. The most important ingredient in a helping relationship is the counselor’s ability to create a safe “holding environment” for the client. If the counselor has the innate capacity to make the client feel affirmed and safe, a number of models can be effective with many (not all) presenting problems.

Past counselor or other helping professional

Harold F. Cottingham, a past president of APGA (the American Personnel and Guidance Association, now ACA), was my adviser and mentor during my doctoral work at Florida State University. I was 23 when I began my doctorate, and he predicted that I would become president of what is now ACA. I could not understand what he saw in me. He continued to mentor and support me (e.g., he called me twice a year every year until he died) for almost 20 years after I completed my Ph.D by providing support, affirmation and advice. He was certainly a major influence.

Contemporary counselor or other helping professional

A number of contemporary counselors have influenced my work. A characteristic they all have in common is that their professional identity is that of a professional counselor and their affiliation is primarily with ACA. They don’t need to identify themselves with other professions because they understand the power and impact of the strength-based approach members of our profession use when counseling or consulting with those seeking assistance.

Person outside the profession

At the time I began my graduate work, there was a great deal of momentum in this country to place the needs of others before our own and to make the “community” a kinder, gentler, more affirming place in which people of all creeds, colors and ideologies could reside. A number of national figures symbolized this hope for the future and inspired others to work for the betterment of the less fortunate. My decision to enter the profession of counseling was, in many ways, my approach to contributing to this movement.

Personal experience or historic event

As I grew up, I was surrounded by a number of adult role models who helped me develop a resilient, mostly positive and direct approach to communication and problem solving. I always found joy and excitement in the people and things around me and a myriad of opportunities for developing interests and involvements. These characteristics have worked well for me in the process of counseling and mentoring others.

Mary R. Rudberg

Rehabilitation counselor, Pennsylvania Office of Vocational Rehabilitation

Counseling theory or model

As a rehabilitation counselor, I rely on choice theory by assisting clients with choices and options. However, the theory that has influenced me the most is the Rogerian theory. Establishing a relationship through rapport building is by far most essential to the counseling process.

Past counselor or other helping professional

Don Angelone, retired district administrator of the Pennsylvania Office of Vocational Rehabilitation (OVR), has influenced the way I work with clients. It did not matter how busy Don was; if I had a problem and needed his support in the field, he was there. No matter how busy his day was, he took time to really listen. Particularly, he taught me to “stay in the room” with clients, to be present and attentive with them.

Contemporary counselor or other helping professional

My first assignment at OVR was a caseload that consisted of individuals with drug and alcohol (D&A) disabilities. Ron, the counselor who had the caseload before me, was referred to as the “god of D&A,” partly because he had developed a D&A program where there had not been one previously. His initiative and drive to provide services for D&A clients in achieving their life goals was impressive. I modeled his initiative and drive in assisting clients. Through Ron, I learned how to encourage clients to be the best they could be. Ron taught me to look at the clients’ abilities, not their disabilities. (Incidentally, Ron Rudberg is now my husband.)

Person outside the profession

My dear friend Donna is one person who has supported me throughout my entire life. Donna was there not only during the fun times, but also paid witness to some of the darker periods of my life. It was during these darker periods that Donna would say, “You can do this. With your past experience, this is a cakewalk for you.” Her support, encouragement and sense of humor truly influenced my decision. When combined with my desire to instill hope in others, it sealed my decision to enter the field of counseling.

Personal experience or historic event

My mother and father both had disabilities. My father had heart disease, secondary to alcoholism, and passed away at age 56. When my mother was 56, she had a stroke, secondary to drug addiction. I took care of her in my home. My mother’s illness was the catalyst to revisit my education. I decided to cash my G.E.D. in and take some classes at the local community college. One step led to another, and I earned a master’s degree in rehabilitation counseling. Currently, I am a doctoral student at Duquesne University, and my plan is to someday teach at a university. The environment in which I
was raised influenced me to strive to better myself and to help others believe and better themselves.

Fr. Kevin Conroy
Maryknoll associate priest, Maryknoll “Little Sprouts” project and professor of psychology, Royal University of Phnom Penh, Cambodia

Biggest influences
I might have a different perspective on the profession of counseling and psychology because Cambodia has few mental health professionals. One of the “biggest influences” in my life as a counselor flows out of the needs of the hundreds of orphans and other people living with HIV/AIDS we serve in our projects here in Phnom Penh. Another “biggest influence” includes the M.A. students in clinical psychology/counseling I am currently teaching at the Royal University of Phnom Penh. This program is the first master’s-level training in Cambodia in any of the mental health-related fields. There are so many needs here in Cambodia because of the trauma of the Khmer Rouge era and the ongoing poverty.

Personal experience or historic event
I became interested in the profession of counseling while working in El Salvador from 1989 to 1995. During those years, I saw the effects of trauma caused by the civil war. The impact of the trauma on the poor villagers and communities we worked with in the countryside was profound. During those years, I also saw people with tremendous resilience. I wanted to learn more about how counseling could help the poor of El Salvador deal with the trauma of war.

Another experience that has influenced my decision to enter the counseling profession is my many years of pastoral counseling as a Catholic priest. Whether serving in the inner city of Lorain, Ohio, or the countryside of El Salvador, people want to be able to share their joys, hopes and sorrows in a confidential and caring manner. The counseling field has given me additional resources that help me listen to the needs of the people.

Person outside the profession
During my years in El Salvador, I became acquainted with the work of Martin-Baro, a Jesuit social psychologist. He was murdered in 1989 with five other Jesuits, their housekeeper and her daughter. His “psicología de la liberación” and research into the effects of political violence and torture on poor communities are important areas that can be used in the formation of counselors and psychologists throughout the developing world. I felt that the skills of counseling could assist my pastoral response to people living in poverty.

Martin-Baro’s work was an important reference for my dissertation and informs my current desire to help people in Cambodia. While my work with our Little Sprouts (270 children who are orphaned and HIV positive) has precluded more extensive work with the traumatized communities of Cambodia, I am trying to be a “bridge” for Western counseling in this country. My work with Cambodian children who are orphaned and living with HIV/AIDS requires that we implement basic counseling skills on a regular basis.

Mariah Emond
Child and family therapist, The Center for Mental Health, Delta, Colo. We provide functional family therapy, juvenile justice program work, individual therapy and behavioral interventions.

Counseling theory or model
Functional family therapy, an approach to high-risk families that doesn’t blame or shame, but rather offers insight into the reasons why we do “bad things” and what families can do differently. It builds hope and skills.

Past counselor or other helping professional
Marsha Linehan and her dialectical behavioral therapy. It’s like a toolbox every person can utilize to enhance their relationships, build better boundaries and be aware of their unique selves. I use her tools often with clients who are struggling and wanting to know what to do better for themselves.

Personal experience or historic event
Two events have been influential. In college, I had an episode of major depressive disorder. I remember thinking, “I’m healthy and adjusted. Why is this happening to me?” That question led me to seek out why mental health issues happen and how I could take better care of myself so that others wouldn’t have to go through the same experience without support. Now I have a greater empathy for clients experiencing depressive symptoms and who have a connection to my own mental health issue.

Second, I was working in the challenge course industry with a high-ropes course at a children’s psychiatric hospital when I realized I didn’t have the skills to work with the emotional side of teambuilding and self-actualization. I wanted to be able to talk with people about their reaction to high-ropes climbing (30 feet in the air on a secure belay) — especially their fear! I went back to school for my master’s in counseling shortly thereafter.

Jim Bierma
I am currently the American School Counselor Association president and previously was the middle school level vice president. In real life, I provide districtwide school counseling supervision for Minneapolis Public Schools, and I am a school counselor at Phoenix Alternative High School in Minneapolis.

Counseling theory or model
The ASCA National Model has transformed our school counseling team’s comprehensive program. The ASCA National Model helps our team identify what main things we need to work on, develop a plan to accomplish our goals and evaluate our interventions. I use humanistic underpinnings with solution-focused techniques. It is important for me to give my students unconditional positive regard and empathy. I try to be genuine with my students and give them realistic hope.

Past counselor or other helping professional
Irvin Yalom’s work made me more effective in group settings. I use his techniques every day. His ideas on how to use process helped my group members be more successful. He is one of my favorite authors; his books give me insight on how I can help my students with their personal/social issues.

Contemporary counselor or other helping professional
Norm Gysbers has had a huge impact on how I set up a comprehensive school...
counseling program. He emphasizes that an effective school counseling program should address the academic, career and personal/social domains. His work had profound influence on the ASCA National Model development.

Carolyn Stone has also influenced me a lot. She helped me understand how to implement ethical standards into my daily work and is my main mentor on how to be an effective leader.

Trish Hatch and Judy Bowers also have influenced how I set up a comprehensive school counseling program.

**Person outside the profession**

I am a Gandhi nut. I have read every book he wrote and every book about him that I could find. He has so many admirable qualities. He always tried to work with people he had differences with and worked hard to make things better for his people.

I also really like Mother Teresa. She is such a great role model on how to provide service for others. She dedicated her life to assisting others who had the most need. Even though I will never be a Gandhi or Mother Teresa, they influenced me to go into a field where I can help others.

**Personal experience or historic event**

Mrs. Wallace was my seventh-grade school counselor. I was making bad decisions and getting into trouble. In our first meeting, she said she cared about me, she knew I could do better and she wanted to see improvement. With her support and help, I started doing better in school and made more positive choices in the community. My life would be much different if it weren’t for her. I always remember thinking that Mrs. Wallace had a cool job.

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**Mary Finn Maples**

Past president of ACA and the Association for Spiritual, Ethical and Religious Values in Counseling; professor emerita, University of Nevada, Reno; president, TLC Inc. (Transition Life Coaching)

**Counseling theory or model**

My theory, which has been questioned as “an oxymoron” by my students, is Christian existential humanism — not to be confused with secular humanism.

**Past counselor or other helping professional**

The greatest influence on my counseling career was C. Gilbert Wrenn, whom I met in 1979, when we did workshops together for Search Institute in Minnesota. Earlier, I had read his *Counselor in a Changing World* and knew there was no other path for me. Then I read *The World of the Contemporary Counselor*, which sent me on for my Ph.D. So meeting him was the professional highlight of my life, until he and Kathleen presented me with the Gilbert and Kathleen Wrenn Award for a Caring Person in St. Louis in 1981.

Because of Gilbert’s influence, there has been no one to take his place. His work is as timely today as it was when he began his career at Western Oregon College in 1926.

**Person outside the profession**

The other greatest and most profound influence in choosing a counseling career was my own father. He was my hero, and I wanted to do something that would make him proud of me. He was so tough that when I received my Ph.D., his only response was, “OK, Mary, what next?”

**Personal experience or historic event**

Back in 1958, I was a P.E. teacher in Burns, Ore., and one of my most talented student-athletes attempted suicide. I felt so helpless and knew then that I had to learn more about human behavior and how to help. So I started my master’s degree in counseling to help people like Marilyn.

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**Charles Pemberton**

Licensed Professional Clinical Counselor and principal therapist, Dimensions Family Therapy. Besides my practice, I am an adjunct professor at the University of Louisville School of Education and Human Development and at Jefferson Community College. I am also currently president of the Kentucky Counseling Association.

**Counseling theory or model**

I report in my initial session with a client that I am a cognitive-behaviorist. Depending upon the specific problem and developmental level of the client, I lean toward behavioral or cognitive therapy. Specifically, I follow much more of Ellis’ rational emotive behavior theory than any other cognitive model, although I do use Beck’s terms more than Ellis’ due to the fact that clients tend not to like the term “irrational.” On the behaviorism side, I focus on the ABC approach, with extensive time spent on teaching a behavior modification model to parents.

**Past counselor or other helping professional**

Dr. Kathleen Kirby continues to ground me in assessment issues. Dr. Bill Braden models a client-centered approach that I often lack. I refer to other therapists as well due to their specific attitudes and approaches.

**Contemporary counselor or other helping professional**

Dr. Robert Wubbolding. While many may not consider reality therapy contemporary, I have found all of his books and workshops extremely useful due to his focus on tools and interventions rather than theory. In my day-to-day practice, I always need more tools to reach people and refreshers on those tools that I haven’t pulled out in awhile.

**Person outside the profession**

My father had to be the biggest influence but not necessarily in the way most think. I was choosing my undergraduate major, and upon telling my parents that I was choosing psychology, my father said, “There is only one thing you can do with a bachelor’s in psychology; get a doctorate.” With that, the gauntlet was thrown down, and several years later, I received my Ed.D.

**Personal experience or historic event**

I knew for several years that I wanted to be in private practice, but I took a strange path to get here. Besides working in the education field, residential facilities and the community mental health setting, I worked in the business field for over five years. I was part of a small company that spun off another division, opened an office on the other side of the country, tried to go public and was sold to a multinational competitor. I worked in all areas, from marketing/sales to human resources and contract negotiations. This provided me hands-on experience in business that many in private practice never get. I was able to learn from others’ business mistakes and see the high points of owning a business, all while learning about technol-
ogy. These opportunities paved the way for me to open a multi-therapist, multidimensional fee-for-service practice.

Tom Sweeney
Past president of ACA and the Association for Counselor Education and Supervision; founding president of the International Association of Marriage and Family Counselors and Chi Sigma Iota; founding chair of CACREP; professor emeritus in counselor education at Ohio University; executive director of Chi Sigma Iota Counseling Academic and Professional Honor Society International headquartered in North Carolina.

Counseling theory or model
I have found Adlerian theory and practice to be the most compatible with both my philosophy of counseling and need for pragmatism. It is what we refer to as a “psychology of use.” As a former public school teacher and school counselor, I learned that theory will only take you so far. Plain-speaking, commonsense methods that both challenge and encourage others will win them over to cooperation and respect for self and others.

Past counselor or other helping professional
Dr. Rudolf Dreikurs has had the most profound effect on my approach to not only counseling, but life in general. I had the privilege of getting a little time to visit with him and to appreciate that he lived what he taught. His work and example from articulate writing, lectures and counseling demonstrations have been a great inspiration to me.

Contemporary counselor or other helping professional
Initially it was Dr. J. Melvin Witmer (Ohio University) through our writing on wellness and counseling. Mel’s earlier work on Pathways to Personal Growth preceded our Wheel of Wellness model for counseling. Since our early work together with Mel, Dr. Jane E. Myers has laid a foundation for decades to come in counseling while still teaching.

Person outside the profession
I remember being invited as a high school student to meet with a bank president who had witnessed me messing up the start of a song I was solo performing for an audience. I had asked the pianist to please start over after only a few bars. She did, and I went on with the performance without a further hitch. His message was direct and simple: “You have great promise for the future. Hold on to that idea.” I took his advice and have tried to encourage others as he encouraged me.

Personal experience or historic event
As a high school student, we had “deans of men and women” who were ostensibly there to “counsel” us. I recollect nothing of the sort. They issued hall passes from their offices and were quasi-administrators. When it was time for me to talk about my college plans, the principal met with me and shared that in spite of my favorable grades, my promise for college was none too good! When I was teaching junior high school students, I realized I wanted to help my students in ways that classroom schedules did not permit. I entered a master’s program in counseling while still teaching.

Mark Pope
Past president of ACA and the National Career Development Association; professor and chair, Division of Counseling and Family Therapy, College of Education, University of Missouri-Saint Louis

Counseling theory or model
Albert Ellis (rational emotive behavior therapy), Frank Parsons (trait-factor), Carl Jung (Jungian psychology)

Past counselor or other helping professional
Donald Super and Anne Roe

Contemporary counselor or other helping professional
Mark Savickas (developer of career construction theory), Patricia Arredondo (for her leadership in developing multicultural counseling in our profession) and Victor Adams (my high school counselor, principal and Sunday School teacher).

Person outside the profession
“It does not require many words to speak the truth.” — Chief Joseph, Nez Perce Tribe

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Audrey Wyatt
Therapy 4 Mind & Body Clinic, Tamworth, New South Wales, Australia

Biggest influences
I am very happy running my own successful and extremely busy clinic, which deals with a great diversity of conditions. On a daily basis, I will counsel clients who suffer from post-traumatic stress, sexual abuse, drug and alcohol addiction, obsessive-compulsive disorder and grief. I offer family and marriage therapy as well as a lot of work with children and indigenous clients.

What inspired me to leave my previous careers of nursing and journalism to follow my true calling? It was always there. I was influenced by my father to follow in my deceased mother’s footsteps and become a nurse. But it did not fully fulfill me, and I confess to spending some rather unpleasant moments with unhappy nursing matrons who found me too involved with my patients’ problems. I chose to leave, went into journalism and had a great career with lots of good memories and traveled the world.

It wasn’t until I had a nasty car accident that I was forcefully given time to think about “What now?” during a long rehabilitation. Limited physically, I read and read. Books by Dr. Wayne Dyer, Richard Carlson, the Dalai Lama … the list is too long.

Who has influenced my work the most? I would say Drs. Courtland Lee and Wayne Dyer. Dr. Lee is the author, editor or coeditor of four books on multicultural counseling and the author of three books on counseling African American males. In addition, he has published numerous book chapters and articles on counseling across cultures.

Wayne W. Dyer is an internationally renowned author and speaker in the field of self-development. He’s the author of 30 books, has created many audio programs and videos, and has appeared on thousands of television and radio shows.

I find that I use different therapies that may apply to the individual I am counseling and how they communicate. These therapies include person-centered and psychodynamic, cognitive behavior therapy and gestalt. But there are more options out there that I find very beneficial to clients, such as emotional freedom therapy and NLP (neuro-linguistic programming therapy), which is a fantastic tool for phobias and many other conditions. Focus therapy is another great tool for individual and couple therapy.

Carolyn Rollins
President-elect of the American Rehabilitation Counseling Association; associate professor and program coordinator, Albany State University, Albany, Ga.

Counseling theory or model
Person-centered

Past counselor or other helping professional
Alfred Adler

Contemporary counselor or other helping professional
Derald Wing Sue

Person outside the profession
M. Geneva S. Wade

Personal experience or historic event
I had planned to enter a career in public administration, but when I applied for my fellowship, that department had lost the paperwork. Later, I met Dr. John Pancrazio, who encouraged me to apply to the counseling program.

Loretta Bradley
Past president of ACA and the Association for Counselor Education and Supervision; Paul Whitfield Horn professor and coordinator, Counselor Education Program, Texas Tech University, Lubbock, Texas

Counseling theory or model
I have been influenced by cognitive behavior theory. In addition, I have been

influenced by the model proposed in the advocacy competencies and the multicultural counseling competencies.

Past counselor or other helping professional
Initially, I was influenced by Dr. Emmett Burkeen, a counselor educator at the University of Kentucky. It was Dr. Burkeen who suggested that I take a counseling course as an undergraduate elective. I was also influenced by my major professor, Dr. Bruce Shertzer, who was a counselor educator at Purdue University.

Person outside the profession
I believe there were at least three persons who influenced my decision to become a counselor: my mother (Edith), my aunt (Clara) and my husband (Charles).

Personal experience or historic event
I was always a good listener who liked people and wanted to see them succeed. I was both interested in and fascinated by the counseling process. Collectively, my desire to study counseling, my inclination to be in a career that placed me in contact with people and my receiving a full scholarship combined to influence my decision to enter the counseling profession.

M. Angela Smith
Licensed Mental Health Counselor and Certified Substance Abuse Counselor, Hawaii

Biggest influences
On March 7, 1985, I had a spiritual experience by divine intervention that changed my life 180 degrees. At that point, I feel I was called to the profession of counseling. After reading Carl Rogers’ biography, I realized he was a man after my own heart. Thus, my orientation became Rogerian. By a process I realized the need to be eclectic.

Over the past 20 years, I have worked in diverse settings. I recently resumed my private practice, Oahu Counseling Services, doing business as M. Angela Smith Counseling Service, in Hawaii. I work primarily with military families after having worked on bases in the United States and Europe over the past two years. My
goal is to continue to help others cope with the stressors of everyday life that can rob them of the freedom of peace of mind.

Beverly J. O’Bryant
Past president of ACA; dean, School of Professional Studies, Coppin State University, Baltimore

Counseling theory or model
I am a behavioral cognitivist, but Bill Cross’ identity concepts and multicultural counseling theory probably influenced me the most and provided an integration mechanism for my own personal growth.

Past counselor or other helping professional
Dr. Thomas Parham helped shaped the direction I ultimately took toward merging my interest in politics with my love for the counseling profession. He was then president of the Association for Multicultural Counseling and Development, and I was the president-elect of the American School Counselor Association. These focused conversations ultimately led to one of my goals during my presidential tenure at ASCA to sponsor the first legislative weekend. This event brought state school counselor presidents, president-elects and government relations chairs to Washington, D.C., to learn the legislative process and lobby for the then Elementary School Counseling Demonstration Bill.

Person outside the profession
My mother, the late Mrs. Gertrude Robb Jones, was the most influential person in my life. I always had an interest in working with and advocating for others. My mother told me there was nothing I couldn’t do, to follow my heart and to surround myself with individuals who possessed similar positive energies.

My husband, attorney Michael T. O’Bryant, was most influential in encouraging me to enter national leadership within my chosen counseling profession.

Personal experience or historic event
As president-elect-elect of ACA, I attended the ACA legislative workshop for leaders. That workshop completely changed my direction as a counselor. It made me acutely aware of the need for counselors to be legislatively astute and ever cognizant of public image and persona. As a result, my focus during my tenure in leadership through ASCA, ACA and AMCD became more concentrated in professional development for colleagues and training for students in counselor advocacy and engagement in the political process.

Due to space limitations, some of the respondents’ answers were shortened. For an unabridged look at this cover story, visit the CT Online section of the ACA website (counseling.org) under “Publications.”

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

Letters to the editor: ct@counseling.org
When Kim Mapp left the jail where she counseled women in Bergen County, N.J., four years ago, something unexpected happened. Women inmates gave her handmade cards and gifts made from their pillowcases. “It was rewarding to me, and it was a chance for them to tap into their artistic skills, to give back and to work together,” says Mapp, who today works for the Center for Alcohol and Drug Resources and as a student assistance counselor in East Rutherford, N.J. While some people may question whether counselors can have much of an effect working with prison populations, Mapp says she was encouraged to see not only that she could help, but that this population of women actually desired help.

About 10 years ago, the state of Texas fired all of its prison counselors as part of a cost-cutting measure, recalls Joycelyn M. Pollock, professor of criminal justice at Texas State University-San Marcos. Yet Pollock believes that counseling is actually a very effective and necessary process in prisons. “Of course, you can run a prison without counselors, but I’m not sure what you are accomplishing besides incapacitation. Women in prison respond to treatment,” says Pollock, the author of Counseling Women in Prison. “In fact, they plead for it, and they give high marks to any kind of group or treatment program.” While counseling does have a positive effect on incarcerated women, she says that effect is often hard to measure right away. “The treatment may not take effect until years later when they are ready to put it into action,” she says, “but that doesn’t mean that they didn’t listen and remember.”

According to recent incarceration data published by the U.S. Department of Justice Bureau of Justice Statistics, an estimated 1.8 percent of women will serve time in prison (compared with 11.3 percent of men). Many experts believe that women end up in prison based on issues and experiences that distinguish them from most of their male counterparts. As explained by Pollock, the pathways model, a model developed in the criminology field, contends that women commit crime as a result of different life pathways, specifically histories of sexual and physical victimization as children, drug issues and the effect of having children. In addition, she says, the pathways model teaches that relationships have a much greater influence on women’s psychological development. According to Pollock, about 40 percent of women offenders have been victimized sexually or physically. In addition, she says, “More women offenders have drug dependencies than men do in prison populations. It seems to be more of a salient issue for women. Drug use for women may have stemmed from earlier life experiences” that differ from those of men. For example, she says, women may use drugs as self-medication to get over childhood abuse or for a mental health issue.

An “inside” look
As most counselors would anticipate, the therapeutic environment in prison is drastically different from that of the “outside” world. Even so, counselors might be surprised by some of the distinctions. For example, counselors, prisoners and prison officials won’t necessarily have the same goals. “All prison employees are expected to promote and protect security,” Pollock says. “Issues of confidentiality may come up if there is a security threat.” If a client reveals confidential information that could affect the security of the prison, the counselor must tell prison authorities. She says some counselors have also reported that prisons expect mental health professionals to make prisoners more docile through the use of prescription drugs rather than focusing on improving the inmates’ mental health.

The challenge of optimizing the mental health of women prisoners is further
complicated by the fact that many inmates bring significant problems with them from the outside. These problems might include a lack of life skills, sexual victimization, codependency, serious mental health issues, drug addiction and high-risk sexual behavior. “All these are impossible to treat in isolation, and all are difficult to address in prison,” Pollock says. “I think it is a perfectly acceptable goal (for counselors) to help a woman deal with the prison experience itself and learn to have healthier relationships in prison rather than reduce the possibility of recidivism.”

Dianne Barber, a counselor for the Hillsborough County Department of Corrections in Londonderry, N.H., points out there is long-term value in beginning the process of counseling in prison because it increases the likelihood that these women will also seek treatment after their release. “In addition to problems with prior abuse, there is a significant percentage of women (prisoners) diagnosed with personality disorders that are very difficult to manage,” says Barber, a member of the American Counseling Association. “It can be a long and tedious process. These women benefit greatly from weekly counseling.”

Another consideration when working with incarcerated women is that, in many instances, their needs and concerns aren’t just individual. Whatever happens to them is likely to have a powerful impact on their families, says Vanessa Alleyne, associate professor and coordinator of the addictions studies program in the Montclair State University Department of Counseling and Educational Leadership. “Because women occupy a central and organizing role in so many families, incarceration then has a major disruptive effect on families in ways that are unique to women,” she says. “That’s not to say that men don’t play an important role, because they do, but women are the primary caregivers in families.” Children are especially affected when someone is removed from the role of primary caregiver, she asserts.

In many instances in which the mother goes to prison, families are dissolved and children go to foster care. At that point, there is often a domino effect. “Children who are put into foster care are not always able to stay connected to their mom who is incarcerated” because prisoner contact with the outside world is limited, Alleyne says. “Contact is seen as a privilege, not a right, in the correctional world. If there are any infractions, that is the first privilege to go. You lose your visitation rights or phone rights, or you get put in lockdown or solitary confinement.”

Women who are more verbal and assertive about needing help are more likely to receive counseling assistance, Alleyne says. “It is very much a squeaky wheel environment,” she asserts. On the other hand, “There are counseling avenues. Most prisons and jails are required to have health networks in place. Help may come through a nurse or physician who is treating something physical and who then may make a referral for counseling as well.”

There are also certain populations of women prisoners which counselors are unlikely to hear from or see, Alleyne says. These include illegal immigrants who have been picked up for immigration charges. “Many women cannot speak English, and translation is very limited, so they are cut off in ways that are unimaginable,” she says. “In theory, translating services are provided by the INS (Immigration and Naturalization Service), but they are not at the level that they need.”

**Areas of need**

While prisons aren’t the first place most counselors think about when expressing their desire to better society, the needs and opportunities are plentiful. “If you are interested in doing clinical work, jails and prisons are ideal places to do that kind of work,” Alleyne says. “There is a tremendous need for short-term counseling, crisis counseling and group counseling. Certainly, this is one of the best places to get solid experience in drug and alcohol counseling.” She adds that direct service in prison humanizes a very dehumanizing environment. In addition, she says, well-trained counselors can provide models and learning opportunities for correctional staff, potentially making a positive difference in how incarcerated women are treated.

“There’s lots to do for incarcerated women,” Alleyne notes. “Talented counselors and academics are needed to bring their expertise to the forefront. These are environments where one can truly get involved and make a real difference for good.”

Alleyne is a member of ACA, the International Association of Addictions and Offender Counselors and the Association for Counselor Education and Supervision. After graduating, she gained an in-depth knowledge of women’s issues while running groups in the women’s unit of the Bergen County jail in New Jersey. At the request of the sheriff, Alleyne also produced a needs assessment, which led to a collaboration between the jail, the Council on Alcohol and Drug Abuse (under the leadership of Ellen Rocca) and the master’s counseling students at Montclair State. A report produced by the team provided the evidence needed to develop an in-house women’s drug treatment program.

“A counselor goes to counteract all the negative effects of prison life,” Pollock says, adding that therapeutic groups, in particular, can have a positive effect on inmates. She cites an example in which an art teacher ran a group for five women prisoners who had committed multiple infractions during their incarcerations. During the entire time the group was running, the women stayed out of trouble with prison authorities. When asked why, the inmates said they looked forward to the group and knew the art teacher wasn’t going to judge them. That provided enough support for the women to make good choices and maintain themselves. After the teacher left and the group ended, Pollock says, the women started getting into trouble again.

Another area in need of more counselors is case management, Alleyne says, particularly in terms of helping people connect with services outside of jails and prisons after they are released. “People usually get released at 12:01 midnight, with just enough money for a bus ticket and what they came with,” she says, “so their life is out of sync. What are they supposed to do? There is lots of help needed with linking people up to viable services.”

According to Barber, counseling women in prison can also reduce recidivism rates by addressing some of the problems people had before entering prison. “Education on mental illness, where applicable, and drug and alcohol addiction is so key to creating awareness and insight into their individual diseases,” Barber says. “Empowerment is also important because
the majority of incarcerated women were never taught healthy functioning and appropriate coping skills. If they had more insight into all the contributing factors that bring them back to jail or prison, the recidivism rate would decrease."

Alleyne says the biggest challenge counselors must overcome to counsel incarcerated women is probably just facing personal fears — "the fear of getting hurt, the fear of being locked in. It is very intimidating to go behind bars and have your movements monitored so closely. It takes some appreciation and adjusting. People have a fear of working with incarcerated people that starts to diminish once they do it. But (women prisoners) are the same people as you and me. They have the same fears, joys and desires as everyone else. As long as you are genuine and professional and offer appropriate assistance, you’re going to have a good experience and be able to help.”

Counselors may also find that their own struggles come up in the process of interacting with women inmates, Mapp says. For example, issues of rape, abandonment and not receiving the care one needed while growing up might be issues that both inmates and counselors have in common. Having appropriate supervision in their work with incarcerated women can help counselors in these situations, says Mapp, who was supervised by Alleyne.

Alleyne suggests that counseling students interested in working with people who are incarcerated take coursework on substance abuse and treatment, as well as learn more about co-occurring disorders and the impact of trauma on women. Adds Barber, "Training in criminal justice as well as mental health and psychology is important, as well as having general knowledge of the psychological nature of those who have been incarcerated more than once or twice.” (See sidebar above for more suggestions.)

In preparing to work with incarcerated women, Mapp suggests that counselors pay attention to their own biases. For example, she says, most women prisoners are not what society regards as "hardened criminals"; roughly 80 percent are there for drug-related offenses. "In many ways, those women were like me,” Mapp says. “They just made a lot of different choices along the way. But many of the women I encountered were educated, were mothers, daughters.”

Vanessa Alleyne, associate professor and coordinator of the addictions studies program in the Montclair State University Department of Counseling and Educational Leadership, offers the following recommendations for students considering a counseling career in the criminal justice system.

1. Take coursework to become more knowledgeable about substance abuse and treatment. This is particularly important in forensic settings.

2. Learn more about co-occurring disorders, as well as the impact of trauma on women.

3. The best way to overcome fear of this environment is by being exposed to it. Utilize opportunities to speak to and visit with counselors in criminal justice settings as well as with people who have been incarcerated. If you are in a prison or jail setting, make sure that you have good supervision from clinical staff who have appropriate experience, authority and credibility to work effectively with you as you negotiate the environment.

4. Raise your level of awareness about the far-reaching impact of criminal justice issues. Now more than ever, counseling students are likely to have contact with a student or parent who is dealing with or has dealt with the criminal justice system, either through arrest, incarceration, adjudication, parole or probation.

5. Consider an area in which you currently have an interest, and see if you can apply it to forensic settings. Grief, trauma, substance abuse, people of color, group work, juvenile justice and other areas of counseling are all found in forensic settings.

Jenny Christenson is a staff writer for Counseling Today. Contact her at jchristenson@counseling.org.

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Making the most of the mentoring relationship

ACA members discuss how mentoring helps to build better counselors

By Jenny Christenson

"Overwhelmed" is how Rachel Hoffman describes feeling when she started her master’s program in counseling. In fact, she remembers, the idea of becoming a professional counselor just didn’t seem real to her at the time. Then, she says, “one of my counseling teachers helped me to map that out and told me the steps to take. That really broadened my horizons.” The professor became Hoffman’s mentor, encouraging her to expand her idea of what it meant to be a professional counselor by joining associations and advocating for the profession. Today, Hoffman is a doctoral candidate at Kent State University and serves as a mentoring liaison herself.

Hoffman isn’t alone in her experience. Because of the complex role they play in clients’ lives, many counselors and counselors-in-training find that they can use extra assistance in the form of mentorships. “Mentoring is a matter of working with somebody to help them become more grounded in the practice of their profession,” explains Bret Hendricks, an associate professor of counselor education at Texas Tech University and a member of the American Counseling Association. This most often involves someone with longevity in the profession figuratively walking beside a less experienced colleague — usually a student — to help that person with his or her professional development or scholarly work. “As far as the student goes, we try to impart to them what it means to be a professional counselor, what it means to practice ethically and, looking at the macro level, things such as social justice and advocacy,” says Hendricks, immediate past president of the International Association of Marriage and Family Counselors, a division of ACA. Hendricks has helped to establish mentoring relationships between students at Texas Tech and professional counselors in the community and has also worked as a mentoring advocate, encouraging the Texas Counseling Association to involve counselors-in-training at all levels of the state association.

“Mentoring is so integral to being a counselor that it is hard to extricate it,” Hendricks says. “It is just part of who you are as a counselor to connect not just with clients, but with the profession.” He believes counselors have an ethical responsibility first to seek out good mentors for themselves and then to return the favor later by serving as mentors to others. “Whatever mentoring we do helps the counselor and, ultimately, the client,” he points out.

Angela Shores, a doctoral student in counselor education at North Carolina State University and assistant director of academic advising at Meredith College, both in Raleigh, N.C., has a similar perspective. “Mentoring provides an opportunity to serve and teach the next generation of counselors, thereby providing service to one’s profession,” she says. Shores has participated in a formal mentoring program through the Association for Counselor Education and Supervision, a division of ACA, and served as a mentor herself in a more informal setting.

Mentoring in the counseling profession is both different from and similar to mentoring in other professions. Says Hoffman, “I think it is different than counseling a teacher, for example. The day-to-day activities are different. Sometimes mentoring in the counseling profession includes more clinical skills,
and sometimes mentoring covers more administrative skills. It becomes more situational."

While mentoring at the micro level is influenced by counseling’s theories of practice, the overall mentoring processes and concepts are generally the same across all professions, Hendricks adds.

Some of the benefits of mentoring seem obvious in a profession as challenging as counseling. “It is important for people to feel supported. It was valuable to have many people along the way giving me feedback, both in my doctoral program and in the process of looking for jobs in academia. I think it is beneficial that we have others who help us along the way,” says Hoffman, who as president of the Kappa Sigma Iota Chapter of Chi Sigma Iota spearheaded development of a mentorship program for doctoral students called FLASH (Forming, Linking, Achieving, Succeeding, Helping).

But mentoring relationships can also offer other less recognized, though equally important, benefits to mentees, including opening doors to networking and research opportunities and assisting in the development of a wider perspective of the profession and the professional role of counselors. Mentoring can also provide strategies for successfully navigating graduate school, writing a thesis or dissertation, or pursuing licensure.

Having a mentor can also help mentees navigate a system that is governed in part by unspoken rules, says ACA member Valerie Schwiebert, author of Mentoring: Creating Connected, Empowered Relationships and a professor of counseling at Western Carolina University. “Mentors provide support to their protégés in an effort to remove organizational barriers, to assist protégés in negotiating the ‘system’ and to provide protégés with opportunities for upward mobility,” she explains. Because they have already experienced some aspect of the system, mentors can offer guidance concerning what mentees need to do to succeed in an organization.

Finding a mentor

Mentoring relationships often begin informally. “There’s such a loose definition of mentoring,” Hendricks says. “It could be teaching a class, or it could be sitting down and having coffee. I would say most of us in the (counseling) field have been mentored, whether we’d call it that or not. Engaging in those sorts of relationships is mentoring.”

Many relationships are initiated by would-be mentees simply approaching a professional colleague and asking that person to be their mentor. But, as Hendricks points out, “You can recruit in either direction. A mentor can go to a mentee and say, ‘I can make myself available.’”

More formal mentoring relationships are often established by an intermediary, such as a graduate school or a professional association. “Joining your ACA branch is a great way to share experiences with other counselors in your area,” says ACA Chief Professional Officer David Kaplan.

In certain counseling programs, senior students serve as mentors for beginning students. While these mentorships typically end when students graduate, other mentoring relationships last indefinitely. “It’s almost like a family,” Hendricks says. “Once you have this mentor relationship, it goes on. You still have that bond 10 years down the road,” even if the mentor and mentee don’t see each other for several years. Although there may be times when the mentoring relationship isn’t as strong and the dialogue isn’t so frequent, ideally, he says, the mentor should feel that he or she can still seek out the mentor at any time.

Guidelines are often helpful when it comes to maintaining ethical mentoring relationships, Schwiebert says. “When a power differential exists that governs my behavior, I need to make sure that I am operating ethically, particularly in dual-role relationships,” she explains. One benefit of formally established mentoring relationships is that they are more likely to be conducted under the ACA Code of Ethics, Schwiebert adds. (In particular, refer to Standards C.6.d., “Exploitation of Others”; F.3.a., “Relationship Boundaries With Supervisees”; F.3.e., “Potentially Beneficial Relationships”; and F.10.d., “Nonprofessional Relationships.”)

Power differentials aside, the mentor should invite the mentee to engage in a conversation about what he or she wants out of the relationship, Hoffman says. “The mentoring relationship is more a creative adventure,” Hendricks says. “Once you have this bond 10 years down the road,”

Each mentoring relationship should be unique, Shores adds. “Mentoring is defined by the mentee and the mentor, so based on their needs, expectations and interests, mentoring can be quite a creative adventure.”

Hendricks says the mentoring relationship should play itself out on two levels. At the micro level, the relationship focuses on how mentees can grow in their understanding and application of counseling theories. At the macro level, mentors should teach their mentees that they will be at their best only if they take care of themselves properly, participate in wellness activities and set appropriate boundaries. The wellness aspect of mentoring can help mentees successfully integrate their many facets of life, including work, family and school.

Schwiebert has introduced another perspective on mentoring, creating the word “womentoring.” She explains that womentoring is the more feminine-driven aspect of mentoring, whereby women use their inherent strengths in building relationships to teach their mentees

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how to create connected, empowered relationships without sacrificing other people as they move up the ladder of success. This community-building take on mentoring can be applied to both men and women, Schwiebert says, and can be used by all groups of people, both in counseling and other professions.

Challenges in mentoring

While few counselors would deny the potential benefits of mentoring, making the time to establish or nurture a mentoring relationship is often a challenge. “We, as counselors, get tunnel vision about what we are doing because we are so busy,” Hendricks says. “Too many times, mentoring gets pushed to the back seat because it is not a pressing issue.”

One of the best ways for counselors and counseling students to minimize the challenges of time constraints and the sometimes spotty availability of mentors is to get involved in their professional organizations and take advantage of formal mentoring programs. The Texas Counseling Association has encouraged students to become a part of the organization and reap the benefits of membership, including participation in a mentoring program, Hendricks says. “Mentoring is a self-perpetuating process,” he says. “If you are well mentored, then you will become a good mentor.”

Another often unforeseen challenge is allowing the mentoring relationship to remain fluid enough to accommodate changes in the mentee’s role as their careers advance to the level of their mentors or beyond, Schwiebert says. One solution is to “make mentoring more formalized between the mentor and protégé, because then the protégé can explain his or her specific needs, and the mentor can tell if they can help them,” she says. With each change in the mentee’s career, the mentoring relationship has to be renegotiated. But even when mentees and mentors become professional equals, Schwiebert says the relationship can remain beneficial because each participant has specific strengths and skills that can be shared with and taught to the other.

Developing trust in the relationship is another common challenge, Hoffman says. Mentees can alleviate some of these trust issues before they even enter into a mentoring relationship by developing clear expectations for what they want from a mentor. Then, Hoffman advises, mentees should actively try to engage someone who will be a good fit for them.

Finding this good mentoring match is another challenge, of course. Shores suggests mentees look for someone who is engaged in the same kinds of research, advocacy or counseling techniques that they are interested in or want to learn more about.

But don’t let a slightly imperfect fit ruin the potential to have a genuinely beneficial relationship, Hendricks advises. Oftentimes, he says, dedication and commitment within the mentoring relationship can overcome differences in personality. “Some of the people with whom I have the best relationships don’t have personality types anywhere close to mine,” he says, “but they know the value of commitment.” And in the big picture, Hendricks says, commitment is more important than personality type.

Finding a good mentor-mentee match can be even more difficult for counselors from minority or subdominant cultures. “There are so few role models out there for them,” Hendricks says. “It is so important for minorities to find mentors, and yet there is no clear road map for that.” The counseling profession generally acknowledges that finding a mentor of the same race, gender or socioeconomic background is ideal, in large part because the mentor can relate to many of the challenges the mentee is facing, which helps to build a higher level of trust. But while “it would ultimately be best if people could be mentored by someone from the same cultural group,” Hendricks adds, “I think it is most important to have a mentor, period.”

Regardless of the mentee’s background, an important tool in finding a good mentor match is networking. “Most people who are successful are so because they have relationships and networks that provided opportunities in their lives,” Schwiebert says. “Most giants in the counseling field have multiple mentors.”

In her book, Schwiebert states that “mentoring is most effective when the individuals share similar values, attitudes, goals and worldviews.” However, she goes on to say that both parties can benefit from cross-cultural mentoring relationships because they can “expand their awareness and understanding of individuals from different backgrounds.”

These relationships can also be very powerful because the participants demonstrate unity and acceptance — two of the very principles most counselors advocate.

Effective mentors

Many of the qualities and skills needed to become an effective mentor are already second nature to counselors. “Being available and listening and encouraging people, especially on the wellness aspects, are important,” Hendricks says, adding that if mentees are not taking care of themselves properly, they cannot be effective counselors. “Don’t concentrate so much on theory and technique that you ignore the bigger picture of wellness,” he says.

Having an open dialogue with mentees is also important. This involves helping mentees to determine what is best for them instead of making decisions for them. As Hoffman points out, this often means “not just providing quick answers.”

As counselors mature as professionals in the field or in academia, they can give back to the profession and to society by becoming mentors. “As we find our own places in life, we can assist others in negotiating their own journeys toward shared goals, visions and attainment of personal and professional accomplishments,” Schwiebert says.

Adds Hendricks, “I think that the counseling profession is one that needs advocacy. For us to present a united front, to present consistent messages to the public, we must be mentoring one another. We must be talking to one another.”

Jenny Christenson is a staff writer for Counseling Today. Contact her at jchristenson@counseling.org.

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Charlotte: A gem of the South
Residents proudly share their favorite things about the host city of the 2009 ACA Annual Conference & Exposition

Compiled By Jenny Christenson

Charlotte, N.C., has many attributes, but the first thing attendees of the American Counseling Association Annual Conference & Exposition may notice is the city’s beautiful skyline. Counselors who converge on the Queen City from March 19 to 23 will also likely be enchanted by the charming nightlife taking place beneath that skyline.

Aside from the nightlife this financial center is known for today, Charlotte also boasts a world-class outdoor recreation and environmental education center, the U.S. National Whitewater Center, just 10 minutes from downtown. Charlotte is also home to many noted museums, including the Mint Museum of Art and the Levine Museum of the New South.

Have an eye for the old? ACA member Sara Graham dubs Charlotte “one of the best places in the Southeast to go antiquing.” And a look into Charlotte’s history reveals that it was a hotbed of military action during the Revolutionary War. It also became a central location for the nation’s first gold rush in the early 1800s.

Today, Charlotte exists as a cultural and dining destination for residents and visitors alike. ACA members who live and work in and around Charlotte were only too happy to sing the praises of the Queen City, so follow their advice and share in their appreciation of this gem of the South before, during and after the upcoming ACA Conference, which is being cosponsored by the North Carolina Counseling Association.

Your tour guide
Michael E. Hall has been a member of ACA since 1988 and has lived in Charlotte since 2001. Hall is in private practice in Charlotte.

“Must-see” list
Don’t leave without sampling, in some form or another, traditional Southern charm:

- Tour downtown, known as Uptown or Center City, on Gold Rush, a free bus service available weekdays
- Levine Museum of the New South: Learn more about the region (museumoffthenewsouth.org)
- Johnson C. Smith University, one of the designated Historically Black Colleges and Universities (HBCUs)
- Seventh Street Station: People-gaze; access light rail public transportation
- Light rail: easy access to trendy shops NoDa, South End, Dilworth, Fourth Ward (fisw.webexone.com)
- Children’s Theatre of Charlotte
- Discovery Place
- North Carolina Blumenthal Performing Arts Center, EpiCentre, NC Music Factory
- Mint Museum of Art: Recently opened a location Uptown
- Uptown pro sports: Carolina Panthers (football) and Charlotte Bobcats (basketball)

Favorite places to eat, drink and be merry

- Reid’s Fine Foods/Seventh Street Station: Casual dining, specialty grocer, people-watch (reids.com)
- Bentley’s on 27: Upscale/fine dining restaurant on 27th floor of the Charlotte Plaza Building (bentleyson27.com)
First-time visitors will be surprised to learn
- While in transition, Charlotte maintains its Southern charm
- Street names and flow are “unconventional” (e.g., the intersection of Queens, Queens and Queens)

What makes Charlotte unique
Home of the NASCAR Hall of Fame (opening in 2010)

Charlotte’s most overlooked treasure
Growing international communities:
- Pura Vida World Art: A folk art store/cafè/art gallery at Plaza Midwood
- International House in Elizabeth: Free conversation hour in many languages, including French, German, Italian
- Approximately 70 ethnic festivals annually

Your tour guide
Vickie Nichols has been a member of ACA since 1994 and has lived in Charlotte since 1985. “I originally moved to Charlotte to attend graduate school and stay for only two years, but I have been here 23 years now,” she says. “Charlotte grows on a person quickly.”

“Must-see” list
- Calvary Church for its architectural design, located on 5801 Pineville Matthew Road

Favorite places to eat, drink and be merry
- Maggiano’s and the Cheesecake Factory at SouthPark. One restaurant that everyone enjoys is Mert’s (College Street in Uptown). Everyone seems impressed that they serve “Low Country and Gullah” favorites.
- Jazz Café in southwest Charlotte. The Double Door has live blues near Uptown. There are so many nightspots in Uptown Charlotte.

Best nightclubs and bars
- Savanah Red and Villa Francesca. Brio Tuscan Grill is located in the SouthPark area and is very good.

First-time visitors will be surprised to learn
- While in transition, Charlotte maintains its Southern charm
- Street names and flow are “unconventional” (e.g., the intersection of Queens, Queens and Queens)

Charlotte’s most overlooked treasure
The family friendliness of Uptown. ImaginOn for kids and teens and Discovery Place for the family, all located in Uptown. There are sporting events year-round, and the Whitewater Center is an exciting challenge for the adventurous individual. One can drive two hours and ski in the mountains of Boone or Sugar Mountain, N.C., or drive three-and-a-half hours to the North Carolina beaches.

Charlotte’s most overlooked treasure
The parks and biking trails. Some parks allow fishing without a license.

Your tour guide
Frankie Tack has been a member of ACA for 14 years and has lived in Charlotte for 10 years. Tack is the assistant director of clinical services for the Anuvia Prevention & Recovery Center in Charlotte.

“Must-see” list
- The Mint Museum of Art and its little sister, the Mint Museum of Craft + Design (mintmuseum.org)
- Levine Museum of the New South (museumofthenewsouth.org)
- Blumenthal Performing Arts Center (national touring productions of major Broadway shows and plays)
- Charlotte Bobcats Arena, home of the Charlotte Bobcats
- Bank of America Stadium, home of the Carolina Panthers

Favorite places to eat, drink and be merry
Bonterra, known for its unique structure/architecture (a renovated old church) and its extensive wine list. From their website (bonterradining.com): “Bonterra Dining & Wine Room boasts an elegant, casual setting. Located in the heart of the historic Southend District near Uptown Charlotte, Bonterra is a unique establishment rich with ambience and flavor. … Bonterra was selected as one of the country’s ‘Hot New Wine Bars’ by Wine Spectator Magazine and has received the AAA Four Diamond Award & DiRoNA Award of Excellence.” You can ride the LYNX, our new light rail train, down South Boulevard and then walk over a few blocks to Bonterra.

We also love Mert’s Heart & Soul, a great soul food restaurant on College Street in Uptown. Mert’s is known for their cornbread, sweet and hot out of the oven, served with honeyed butter. The collard greens and fried chicken are also awesome. The ambiance is funky with lots of African American photos/art and many Broadway posters signed by the casts who have performed in Charlotte.

First-time visitors will be surprised to learn
- Though Charlotte is a big city, it is very friendly and accessible. It is a small town that has grown up but still offers much Southern hospitality.

Charlotte’s most overlooked treasure
Probably its fine arts. There are gallery crawls and art shows year-round. Many artists call Charlotte home, including the American Van Gogh, Stefan Duncan.

Your tour guide
Christine S. Patterson has been an ACA member for 14 years and has lived in Charlotte for 50 years. Patterson currently works in a private school and is working on her teaching license for elementary education.

“Must-see” list
- I would suggest that first-time visitors see the Mint Museum of Craft + Design downtown as well as the Mint Museum, which is located on Randolph Road. Visitors may also enjoy one of our art districts, NoDa, which is short for North Davidson. This area is located north of downtown and is a short distance away.

Favorite places to eat, drink and be merry
- One of my favorite restaurants is Upstream, which is located at Phillips Place. Phillips Place is a great place for high-end shopping. Upstream is a seafood restaurant, and it is known for its exceptional service. The McNinch House is located downtown and has a somewhat continental menu. It is located on a historic property that is wonderful.

Several other good restaurants include Bonterra Restaurant in Dilworth, Primos Italian Grill, Zio, Fenwicks (on Providence Road), Lavechios, Blue, Savannah Red and Villa Francesca. Brio Tuscan Grill is located in the SouthPark area and is very good.
Best nightclubs and bars
I would suggest Buckhead Saloon, Whisky River, Howl at the Moon and CW Fins downtown. Providence Café has a small bar area and attracts crowds in the 30- to 50-year-old range. The Palm Restaurant has great food, and the bar also accommodates older patrons.

First-time visitors will be surprised to learn
That we love barbecue. One of the best places to eat barbecue is Mac's on South Boulevard.

What makes Charlotte unique
Charlotte is unique because it is a city of old neighborhoods and longtime residents who welcome new developments as well as newcomers.

Charlotte's most overlooked treasure
Wing Haven, a beautiful bird refuge in Myers Park. It is open part time.

Your tour guide
Michael Kahn has been a member of ACA for 12 years and has lived in Charlotte since 1994. Kahn lectures and facilitates workshops on grief, self-care and ethics in the United States and internationally.

“Must-see” list
- National Whitewater Center
- Asheville, N.C., road trip to the mountains (2.5 hours)
- Crowder’s Mountain for hiking (45 minutes away)
- Mint Museum of Art (15 minutes outside of town) and Mint Museum of Craft + Design (Uptown)
- Discovery Place (IMAX Theater) and ImaginOn (if you have kids with you)
- Theatre Charlotte and CAST Theater for plays
- Manor Theater (10 minutes outside of Charlotte) or Ballantyne Village Theatre (south Charlotte) for artsy and foreign films
- The Light Factory (photography and film exhibitions)
- Plaza Midwood and Dilworth neighborhoods for food and shops

Favorite places to eat, drink and be merry
- Dolce (authentic Italian) in Dilworth: Best Italian food in Charlotte
- Cabo Fish Taco in NoDa neighborhood
- The Penguin and Dish on Thomas Street in Plaza Midwood neighborhood
- Alexander Michael’s in Fourth Ward of Uptown Charlotte (bar food)
- Zada Jane’s in Plaza Midwood, especially for breakfast and vegetarians
- Amelie’s bakery in NoDa
- 300 East in Dilworth (American bistro)
- McIntosh’s (ask for Stephanie; steak)
- Lang Van (excellent Vietnamese)
- Berry Brook Farms in Dilworth (locally owned health food store with homemade soups and sandwiches)
- Dilworth Coffee

Best nightclubs and bars
- Thomas Street Tavern (bar food, good outside seating if weather permits)
- Therapy in Uptown (gotta recommend this one of course)
- Intermezzos (unique beer selection and good Italian/Serbian food)
- Ri Ra Irish Pub in Uptown

First-time visitors will be surprised to learn
It’s a very transient city. It can be difficult to find someone who was born here. Among other nicknames, like the Queen City, it is also known as the City of Trees. It’s “Uptown,” not “downtown.”

What makes Charlotte unique
- Banking center
- NASCAR
- Trees

Your tour guide
Howard Winokuer has been a member of ACA since 1999 and has lived in Charlotte since 1960. Winokuer is in private practice in Charlotte.

“Must-see” list
For people who like to shop, SouthPark Mall is a wonderful, upscale shopping center. The anchor stores in the mall include Nordstrom, Neiman Marcus, Macy’s, Dillard’s and Belk. There are also many specialty shops. There are a lot of wonderful restaurants in that area as well. For the moviegoer, there is an IMAX theatre at Discovery Place, which is one of the leading hands-on science museums in the country (only a few blocks from the ACA Conference site).

For the outdoorsy type, the U.S. National Whitewater Center is here in Charlotte. People can go whitewater rafting and hiking in a very beautiful venue. For the history buff, taking a walking tour around Fourth Ward would be lovely.

Fourth Ward has homes that were built in the early 1900s and, like Discovery Place, is within walking distance of the conference site. There is also a light rail train line (the LYNX Blue Line) that can take people to some wonderful restaurants and galleries in the South End/Dilworth area. The fare on the train is currently $3 round-trip.

Favorite places to eat, drink and be merry
Charlotte has reached a point where there are lots of wonderful restaurants. My favorite restaurant is Café Monte, a European-style restaurant in the SouthPark area with wonderful food, comfortable ambiance and a great wine list. The center of the city is filled with many wonderful dining establishments. Some of the better-known restaurants include Morton’s, McCormick & Schmick’s, Blue, Brix Pizza, Alexander Michael’s and Capital Grille. Just outside of downtown in the South End/Dilworth area (accessible by train) include Sullivan’s Steak House, Copper (Indian), Bonterra, Cantina 1511 and Thai Cuisine.

Best nightclubs and bars
There are many bars in downtown Charlotte, although most appear to cater to a younger crowd in their 20s and 30s. There are three new clubs at the new EpiCentre: Howl at the Moon, Whisky
Charlotte's most overlooked treasure

I'd say that Charlotte's most overlooked treasure is its spirit of openness and communication. Charlotte is where the busing laws passed in the 1970s and where the community came together to work through the difficulties. Charlotte has always seemed to have a can-do attitude, and the people of Charlotte make it so.

Your tour guide

Lorelei Lindow has been a member of ACA since 1998 and has lived in Charlotte since 1977. Lindow has a private practice in Charlotte as well as a clinical counseling position at Johnson & Wales University.

“Must-see” list

In the Uptown area where the ACA Conference will be held, there are several places to consider, including Discovery Place with an IMAX Theatre, the Mint Museum of Craft + Design, ImaginOn, Time Warner Cable Arena (where the Charlotte Bobcats NBA team will be having a home game!), Bank of America Stadium (where the Carolina Panthers NFL team plays), Spirit Square, Actor's Theater, Blumenthal Performing Arts Center (where Broadway plays are offered), Levine Museum of the New South and Johnson & Wales University.

Favorite places to eat, drink and be merry

I am a “foodies,” so this is a difficult question to answer! In Uptown, guests have a huge number of restaurants to try. Some moderately priced places include Brixx, Zink, Ri Ra, Mimosa Grill or Pic Town. For a more indulgent meal, try Morton’s, Capital Grille, Blue, LaVecchia’s or HOM. Some of my favorite restaurants are just outside of the Uptown area and include Pike’s Soda Shop (which has an amazing brunch on Sundays), Mert’s (Southern “soul” food), La Paz (Mexican), Cajun Queen and Boudreaux’s (both with New Orleans-style food), Lupie’s (the best sweet tea, macaroni and cheese, and banana pudding around!), Nikko (sushi), Zada Jane’s (breakfast), Mac’s Speed Shop (barbecue), The Penguin (greatest burgers!), Thai Taste, Copper (Indian) or 300 East (beautiful and cozy environment).

Charlotte's most overlooked treasure

I am a “foodie,” so this is a difficult question to answer! In Uptown, guests have a huge number of restaurants to try. Some moderately priced places include Brixx, Zink, Ri Ra, Mimosa Grill or Pic Town. For a more indulgent meal, try Morton’s, Capital Grille, Blue, LaVecchia’s or HOM. Some of my favorite restaurants are just outside of the Uptown area and include Pike’s Soda Shop (which has an amazing brunch on Sundays), Mert’s (Southern “soul” food), La Paz (Mexican), Cajun Queen and Boudreaux’s (both with New Orleans-style food), Lupie’s (the best sweet tea, macaroni and cheese, and banana pudding around!), Nikko (sushi), Zada Jane’s (breakfast), Mac’s Speed Shop (barbecue), The Penguin (greatest burgers!), Thai Taste, Copper (Indian) or 300 East (beautiful and cozy environment).

Best nightclubs and bars

In the center of Uptown is a new area called the Pavilion at EpiCentre where there are several new restaurants and bars: Black Finn (upscale sports bar), Suite, Howl at the Moon (who doesn’t enjoy dueling pianos?!) and Whisky River. Other places are due to open by March at the EpiCentre. In other areas of Uptown, dance clubs to visit include the Breakfast Club, Forum, Crush or Velocity, and bars to explore are Connolly’s or Cans. If you’re feeling adventurous, just outside of the Uptown area are places for live music: Visualite, Neighborhood Theater, Amos’ Southend or the Double Door Inn.

First-time visitors will be surprised to learn

Charlotte recently added a light rail called LYNX! It can help you get around Uptown and beyond. Also, the trolleys in Uptown are free.

What makes Charlotte unique

Charlotte is a clean city with Southern charm and a church on every corner. The residents are friendly and can help you get around the very confusing street name changes that start just outside the Uptown area.

Charlotte’s most overlooked treasure

I love going to the art gallery crawls — one in the Southend area and the other on North Davidson Street (and 36th Street). They are usually offered on the first and third Fridays of the month.

Your tour guide

Sara Graham has been a member of ACA for three years and has lived in Charlotte for 30 years. Graham works at Central Piedmont Community College as the program director of a TRIO Student Support Services program.

“Must-see” list

- Levine Museum of the New South
- Mint Museum
- Lowe’s Motor Speedway
- Discovery Place
- The Blumenthal Performing Arts Center
- Bank of America Stadium and Time-Warner Arena
Charlotte tours

ACA Conference attendees and their families can take advantage of several great tours while staying in the Queen City. ACA has arranged for the following tours:

- **Yadkin Valley Winery Tour**: Visit five wineries in the heart of North Carolina wine country.
- **A Visit With the “Queen”**: Includes stops at the Billy Graham Library, Uptown Charlotte, the financial district, Independence Square and the Levine Museum of the New South as well as a drive through the historic Fourth Ward.

Favorite places to eat, drink and be merry

There are many interesting places to eat in the center city area, so I would suggest that people just explore.

First-time visitors will be surprised to learn

- The Confederacy had a navy depot located here.
- The city’s connection to banking goes back to pre-revolutionary times with the mining of gold and the establishment of a federal mint.
- Mecklenburg County had its own declaration of independence a year before the rest of the nation.
- Charlotte is the largest Southern city between Richmond, Va., and Atlanta.

What makes Charlotte unique

- Banking headquarters
- NASCAR
- Antique stores — one of the best places in the Southeast to go antiquing.

Charlotte’s most overlooked treasure

Any of the arts venues are good choices. This is also a very sports-oriented area. If the Atlantic Coast Conference or NCAA tournaments are playing their games and one of the North Carolina colleges is involved, then you will find packed bars and no one at the theater.

Your tour guide

Barbara Birge has been a member of ACA since 1990 and has lived in Charlotte since 1986. Birge is in private practice in Charlotte.

“Must-see” list

- The Mint Museum of Craft + Design
- Levine Museum of the New South
- The murals in the lobby of Bank of America’s headquarters
- Discovery Place museum and IMAX theatre
- Blumenthal Performing Arts Center and Spirit Square
- NASCAR
- Antique stores — one of the best places in the Southeast to go antiquing.

Favorite places to eat, drink and be merry

Uptown: Capital Grille, Blue, GW Finn’s, Coco Osteria and Zinc are all good, but relatively expensive. Ri Ra and Connelly’s are two fun, affordable Irish pubs.

Best nightclubs and bars

- Suite and Blackfin, both in the EpiCentre; Howl at the Moon and Buckhead Saloon.

First-time visitors will be surprised to learn

The major intersection of Trade and Tryon, right where the major banks are sited, was a Native American trading post.

What makes Charlotte unique

Incredible friendliness

Charlotte’s most overlooked treasure

Wing Haven bird sanctuary and garden in the Myers Park neighborhood (some Sunday hours).

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Letters to the editor: ct@counseling.org
The counseling profession is in need of guidelines to educate counselors, supervisors and counseling students on the issues of transgender individuals and their loved ones. Indeed, the February 2008 Counseling Today article on transgender youth, "Counseling transgender youth: Education, advocacy and resilience," prompted over 50 inquiries for more information from the Transgender Committee of the Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling.

As members of the Transgender Committee, we are excited counselors are interested in and want more information about working with transgender clients. The word transgender is an "umbrella term for persons whose gender identity and expression do not conform to norms and expectations traditionally associated with their sex assigned at birth" (Lambda Legal, 2008). Gender identity is a person's internal experience of being a woman, man or another gender, whereas a person's biological state of "female" or "male" refers to one's genetic sex, and gender is a social construction referring to society's expectations of individuals as men or women. A full discussion of language and definitions appropriate for use with transgender people is beyond the scope of this article. However, counselors should be aware that many transgender people do not want to have body modifications, or may select some body modifications (for example, hormone treatment) but not others (for example, surgery). Essentially, because there is such a wide variety of gender identity and expression within the transgender community, counselors should seek to explore and affirm the gender identity and expression that feels most congruent for their clients.

Because transgender adults experience extensive discrimination, counselors should be well versed on advocacy issues for this group. The number of hate crimes documented by the National Center for Transgender Equality suggests that 2008 was one of the most violent years on record. Transgender individuals and their significant others routinely describe instances of discrimination in the workplace, inadequate and disrespectful medical and mental health care, and transphobia by family members and society. These stressors may put transgender adults at higher risk for experiencing depression, anxiety and substance use. While counseling programs prepare counselors to address mental health and psychosocial issues such as family issues and anxiety disorders, many counselors are quite unprepared to work with gender-variant transgender individuals because of deficient training regarding gender identity and expression. One area that is particularly lacking is helping transgender people navigate through the medical system should they desire medical interventions involving body modifications.
Diagnosis, medical and nonmedical treatment

Currently, gender variance is labeled as a mental health disorder (Gender Identity Disorder or GID) in the *Diagnostic and Statistical Manual of Mental Disorders*. Because this diagnosis pathologizes their gender identity, transgender people may feel that living in their identified gender socially and physically is contingent on engaging in the medical system — namely with counselors, psychologists, psychiatrists and other physical and mental health professionals. There is a wide-ranging debate on this issue, with some advocating for GID to be removed from the *DSM* and viewed as primarily a medical issue, while others assert the importance of counseling and psychological professionals as gatekeepers for transgender people who transition from one gender to another. Counselors should be aware of this debate and be able to clearly communicate to potential clients their approach to diagnosis as a part of the informed consent process.

We believe counselors can play a unique role in the lives of transgender clients by taking a strengths-based approach that acknowledges their resilience and weaves advocacy into the counseling process. Counselors should also be aware that the World Professional Association for Transgender Health (formerly known as the Harry Benjamin International Gender Dysphoria Association) created Standards of Care (SOC) that helping professionals should follow when assisting transgender clients with body modifications or other aspects of living their lives in their identified gender. These guidelines are intended to be flexible rather than dictates of treatment. Because of the SOC, many surgeons and physicians require documentation from a mental health professional before they will allow transgender clients to modify their bodies with surgical and/or hormonal treatment. Depending on client goals, counselors may help transgender individuals navigate an often overwhelming system, while also recognizing that clients are ultimately the primary experts on their own gender identity.

It is also important for counselors to know that not all individuals will undergo the same process if they choose to transition from their gender assigned at birth to a gender in which they feel more congruent. Thus, one of the goals of counseling may be to support a client in exploring congruence between her or his gender identity and physical body, reminding clients that they can define for themselves what this congruence “looks like” regardless of which medical and/or surgical options they select or do not select.

Because counseling goals can be wide ranging for transgender clients, counselors should be familiar with the social or medical changes clients may want to make. These changes may include obtaining a legal name change, changing gender designation on official documents (driver’s license, Social Security card, birth certificate, passport), hormone treatment and “top” or “bottom” surgeries. A transgender man may undergo chest surgery, a hysterectomy and/or genital reconstruction, while a transgender woman may have electrolysis (hair removal), breast augmentation and various types of plastic surgery.

Importantly, other transgender people may make few or no physical changes but elect to have a name change and/or begin using pronouns consistent with their gender identity. Furthermore, the decision regarding how to proceed during transition is influenced by many factors, including the availability of financial resources (many of these procedures are costly and not covered by insurance), overall health, societal or familial pressure and personal preference. For some transgender people, body modifications are not a priority or something desired. In these cases, counselors should support transgender persons in defining what is best for them.

Career counseling

Whether transgender people choose medical or nonmedical treatment, counseling issues often include attention to career concerns and professional development, especially because this population often faces systemic barriers to realizing their career aspirations. Transgender people often experience discrimination at work, as evidenced by the case of Vândeur Elizabeth Glenn, who was fired from her job as a legislative editor when she began her transition from male to female. There are currently no federal legal protections for transgender people in the workplace. An initiative designed to protect LGBTQ people — ENDA (Employment Non-Discrimination Act) — failed to pass Congress in 2007. Counselors may draw upon their unique training in career counseling to assist transgender clients by providing them with legal resources and knowledge about the lack of current federal protections.

Because of employment discrimination, transgender people may be tracked into a limited spectrum of jobs that are not a good match for their interests, skills and personality. In these cases, counselors may share the rich career development literature and assessments with their clients and provide them with knowledge of job search skills (informational interviewing, writing résumés and cover letters) and assistance with identifying safe environments in which to work. Counselors will often find themselves using their role as advocates in working with transgender adults on career concerns, from offering to speak with the client’s employer about providing transgender-affirmative training to connecting transgender clients with community resources designed for them. For instance, some university and local LGBTQ centers plan transgender career fairs developed to connect transgender people with affirmative employers and different career paths.

Counseling issues with families

When a transgender adult discloses her/his gender identity, family members may experience a wide variety of reactions. Members of the same family may even have disparate reactions vacillating between being accepting and unsupportive. While there are differences in the degrees of family support and understanding, Arlene Istar Lev (2004) identified four common stages family members experience: discovery and disclosure of gender identity, turmoil, negotiation and finding balance.

During the first stage, family members learn of the transgender person’s gender identity either directly or indirectly, which often launches them into a stage of confusion and distress. Subsequently, they typically attempt to reach a compromise with their transgender
relative about their gender expression but hopefully are eventually able to accept and integrate the transgender person’s gender identity/expression. These stages are not meant to be strictly linear, but it is important that counselors know that transgender clients’ family members may cycle through certain stages.

Initially, some parents and siblings may experience intense anger, confusion or grief when a transgender person shares about her/his gender identity. They may have a difficult time accepting that they have lost the daughter/sister or son/brother whom they thought they knew so well. Other family members may have an easier time accepting the gender identity early on because they have access to more transgender-positive information. In these cases, family members may even become advocates for their loved ones who are transgender.

In other cases, partners struggle to renegotiate their marriage. Some spouses are not prepared to be in a relationship with a same-sex partner, while gay/lesbian partners may not be prepared to be in a relationship that is perceived as heterosexual. Furthermore, some spouses cannot handle the social stigma of being in relationship with a transgender partner. However, other partners are able to embrace the transgender person’s identity within the ongoing couple relationship.

Transgender adults who are parents may have social and emotional concerns related to sharing their gender identity with their children. In particular, the parent may grapple with addressing children’s concerns about introducing their friends to the family and helping their children understand negative community attitudes toward transgender people. When coming out to children, it is important to tell children in a private space, allow the conversation to continue over time and explain the parent’s gender identity in a developmentally appropriate way while communicating that the children’s thoughts, feelings and questions are important. An emerging body of resources for children who have transgender-identified parents can be accessed through the Internet (see gender.org).

Finally, transgender people have multiple identities, so in addition to their gender identity, counselors should assess for the salience of their other identities as well. For instance, transgender adults of color may want to connect with other people in their community who understand their experiences of gender and race/ethnicity. Counselors should not separate how the cultural backgrounds of transgender adults shape their experiences of family, values, traditions and other important aspects of their daily lives. Therefore, counselors who work with transgender clients and their family members must be aware of family, cultural and societal biases and assumptions about sexual and gender diversity as well as psychopathology. Competent counselors will comfortably and compassionately validate all forms of gender expression and sexuality while being sensitive to the multiple layers of the responses of parents, siblings, partners and children. Moreover, they will affirm the resilience and determination of transgender people who must confront transphobia and more subtle invalidation as they actualize their true selves.

To contact the Transgender Committee of ALGBTIC, e-mail Theodore Burnes at burnes@gse.upenn.edu or Anneliese Singh at asingh@uga.edu.

Letters to the editor: ct@counseling.org

**Recommended reading list**


e methodically steps behind the center, alert eyes darting left and right, analyzing subtle alignments in the defense and determining the best course of action for his team. Quickly and aggressively, he starts pointing and shouting out directions, detailing each of his teammates’ imminent responsibilities. Simultaneously, the defense, led by its middle linebacker, is making adjustments of its own, compensating for possible weaknesses and trying to anticipate the intentions of the offense.

This is the intellectual chess game that you will witness prior to every play, mere seconds before hulking men collide, helmets and pads crashing into one another, on any given Sunday in the National Football League. Indianapolis Colts quarterback Peyton Manning and his coaches have seemingly perfected the art of the spontaneous offense in football, scoring almost at will in recent years. It has struck me that watching Manning assess and exploit his opponents’ weaknesses is not unlike watching a master counselor cut through a difficult client’s mundane chatter and fortified resistance.

Experience and training allow counselors to anticipate their clients’ reactions and direct the course of therapy to efficiently and effectively help clients think, feel and behave in new ways that improve their quality of life, even if they are often initially resistant to such change. The quarterback metaphor has grown especially meaningful to me over the past year as I have transitioned from an elementary school counselor, comfortably working with primarily white children in a rural area, to a counselor education doctoral program, where I counsel diverse clients from a myriad of cultural backgrounds. Time and again, my initial self-doubt and anxiety have been diminished by the relative success I have experienced in working with each new population and replaced by a reflective curiosity concerning how I was able to adapt my approach for such different clients.

While I am still a rookie in many ways — and far from the master counselor described earlier — I believe I have stumbled upon a series of pointers that might help others who appreciate interpreting the counseling of diverse populations through the lens of a football quarterback. I hold the following list of six self-guiding instructions mindful each time I meet with a client of a different age, gender, ability, race, ethnicity, class or sexual orientation than my previous experience has allowed.

1. Be flexible and trust your instincts. I imagine Peyton Manning experiences a sense of flow when his abilities and the challenge of his circumstances coincide and climax in one moment. As an elementary school counselor, I too have often felt a flow experience when working with children. This happens when my mental and emotional abilities are met with the sometimes daunting yet manageable challenges that my clients bring to session. Both the master quarterback and the master counselor are alertly prepared to modify their actions based on what he or she is seeing, hearing and sensing in the moment. I imagine that I am not alone in experiencing this thrilling occurrence while counseling, and I can say that, for me, it is truly one of the most exhilarating and satisfying elements of being a professional counselor.

2. Have a game plan and believe in it. As a former collegiate athlete and high school football coach, I know the importance of proper preparation. What fans see in the game is actually the product of weeks of hard work and planning. Many football teams now script their first 10 or 20 offensive plays so that their players know what to expect and can prepare themselves to have immediate success. Likewise, when I am preparing to meet with a new client whose background is different from that which I am accustomed, I am certain to have my goals, objectives and strategies for my first session or series of sessions outlined. This preparation gives me the confidence I need to be successful and helps to instill my clients with confidence in me, creating expectancy for success. This second point might seem counterintuitive to the first, but I don’t believe that it is. Flexibility and spontaneity are most successful when utilized as an extension of a well-conceived game plan.

3. Don’t let one or two mistakes ruin your game. In football, almost every coach tells his quarterback that he has to have a terrible memory. Future Hall of Fame quarterback Brett Favre holds the all-time NFL record for the most interceptions thrown in a career (not a good thing). He also happens to hold the NFL record for most career touchdown passes. Counseling is an inexact science and may be better understood as an inexact art. Mistakes will be made, and I’ve certainly made my share. But if I let each poorly worded observation or occasionally clumsy interpretation ruin an entire session, I’ve not only let myself down, I’ve let my client down as well. When I make a mistake, I own it, apologize if appropriate and move on toward success. Counselors, just like quarterbacks, are human too.

4. Don’t be afraid to take a time-out. Even star quarterbacks such as Peyton Manning sometimes need to take a time-out to slow things down or to discuss the current circumstances with their coaches. Similarly, in counseling, I have occasionally found myself in situations or discussing topics for which I was unprepared. In other instances, I have felt conversations or emotions accelerating a little out of control. One of the best courses of action I have taken in these situations is to invite my client to take a few moments with me to think about where we are at in the moment and what we are experiencing. In football, they call
it a time-out. In counseling, we call it mindfulness.

5. Sometimes, the best thing you can do is hand the ball off. If you watch a Colts game, you’ll undoubtedly see the following scenario unfold. At least once or twice each game, Manning will go through a long series of loud commands and animated signals that, one might assume, are surely designed to orchestrate one of the most intricate and glorious schemes in football history … only to simply hand the ball off to his running back. That’s because when Manning sees a weak spot in the defense, he calls a play to exploit it, and it doesn’t seem to matter if the spotlight is on him or his teammate.

I have found the same simple approach especially useful when engaged in team meetings with parents, teachers and administrators. I believe counselors should have a good understanding of their own strengths and insights, as well as the strengths and insights of each of the other individuals in the meeting. In situations when I am asked a question that is in someone else’s area of expertise, I am more than happy to defer or hand the ball off to that person. In fact, I’d go so far as to say that counselors’ unique experiences and distinctive skill sets often provide them with key insight into the complex dynamics in such meetings. As such, counselors have a corresponding responsibility to help direct the course of the conversation to efficiently and effectively utilize the unique strengths of each group member.

6. If all else fails, go back to the basics. As a scholastic football coach, I have repeatedly told my athletes that although we design each play to score a touchdown, the reality is that only a select few will actually accomplish that goal each game. Often, the team that executes the basic fundamentals of the game will dictate the contest’s ultimate outcome rather than the team with the flashier trick plays.

When I’m stuck in a counseling session, I try to be mindful that my basic active listening skills — reflecting, paraphrasing and summarizing — are often the best tools I have at my disposal. Whether in football or in counseling, I have found that the three simple p’s of persistence, perseverance and patience usually cultivate the most success.

So whether you are an experienced master counselor or, like me, just beginning your long journey toward multicultural and counseling competence, I wish you much success in experiencing the thrill of tapping into the potential that each session with your client holds.

Oh, and one more piece of advice: Don’t forget your celebration dance in the end zone! Experiencing success with a client is a truly special happening and should always be celebrated. ♦

Richard Albright is a doctoral student in counselor education at Penn State University and a part-time substance abuse counselor with Counseling Alternatives Group in State College, Pa. Contact him at rga107@psu.edu.

Letters to the editor: ct@counseling.org
What is outcome research, and how do we get more of it?

We founded the National Center for School Counseling Outcome Research to be a resource for the profession. The Center provides practitioners access to practical information from outcome research that they can use to have greater impact in their work. We also conduct outcome research and work with the research community to promote more and better outcome research.

During times of economic distress, we typically receive a number of e-mails and phone calls from school counselors in districts that are considering eliminating counseling positions. These counselors are often seeking references to research that proves school counselors are effective. Unfortunately, we anticipate having to field these difficult questions much more frequently this year.

To be helpful, we usually start by asking callers what they are doing that has already been demonstrated to be effective by research. Typically, callers draw a blank. So we go down a list of programs, interventions and practices that have good research support. With that prompt, callers can sometimes identify things they are doing that are supported by research; too often, they cannot. We then have to explain that no research exists to prove that school counselors are effective (nor will there ever be). Effectiveness depends mostly on what school counselors choose to do; outcome research tests the effectiveness of things that school counselors do. Counselors who choose to base their practice on this literature can sometimes identify things they are doing that are supported by research; too often, they cannot. We then have to explain that no research exists to prove that school counselors are effective (nor will there ever be). Effectiveness depends mostly on what school counselors choose to do; outcome research tests the effectiveness of things that school counselors do. Counselors who choose to base their practice on this literature can justifyably use it to advocate for their positions and their programs. Counselors who both ground their practice in outcome research and evaluate the effectiveness of their work locally are in an even stronger position for advocacy.

Not all research is outcome research. Outcome research is intended to test whether a specific practice, intervention or program reliably results in important benefits for our clients. Good outcome research produces critically important information on effectiveness that practitioners need in order to decide what to do and what not to do. Outcome research can improve the effectiveness of a school counseling program by influencing the decisions that counselors make. Choosing to implement an intervention that has proved to be effective (rather than one that has no evidence for effectiveness) is likely to result in greater benefits for students.

Using outcome research to guide practice also has some practical utility in terms of local accountability initiatives. Counselors who need to demonstrate their effectiveness locally can at least argue that they are making sound professional decisions and doing the right things to benefit their students. Local evaluation of interventions with good outcome research can be expected to result in more positive findings because these interventions tend to have a larger impact. Also, these practices are typically easier to evaluate because many of the needed dependent measures can be found within the original research studies.

Stumbling blocks

If outcome research is so important, why aren’t more school counselors using it? We have identified several major problems within the counseling profession that hamper a stronger connection between practice and outcome research. First, the preparation of counselors is not strongly rooted in outcome research. Decisions about what to teach (and what not to teach) in counselor education programs are often based more on theoretical models and personal preferences than on sound evidence for effectiveness. As the American Counseling Association increases its focus on strengthening counselor education, more attention needs to be paid to the important issue of how we use research evidence to decide what to teach in the counseling curriculum.

Second, practitioners have limited access to the full range of outcome research that would be helpful in guiding their practical decisions. Many potentially useful studies are published outside the mainstream counseling journals, and most articles published in counseling journals are written more for researchers than for practitioners. Our Center is helping to address this access issue by using the Internet to distribute research briefs that summarize the practical implications of a wide range of outcome research studies. More efforts of this nature are needed within the profession.

Third, it is sad to say that within the school counseling profession, not enough good outcome research is being conducted. This very fundamental problem needs immediate and sustained attention if the profession is to gain strength and continue to grow. The origins of this problem are complex and multifaceted and need to be addressed comprehensively. Good outcome research is expensive, and grants to support research in counseling are limited. Professional advocacy is needed to influence government entities such as the Institute of Education Sciences to increase support for outcome research in areas central to school counseling practice.

Additionally, this problem is complicated by the fact that not enough researchers are interested in and/or capable of conducting high-quality school counseling outcome research. Counselor education doctoral programs need to focus their efforts on producing a professional cadre of outcome researchers. ACA and the Council for Accreditation of Counseling and Related Educational Programs (CACREP) can be instrumental in providing the help and encouragement needed as standards for doctoral programs are reconsidered.

Finally, not enough researchable interventions are designed to achieve
important counseling-related outcomes. The profession must mobilize to develop a wider range of research-based interventions that impact important career, personal/social and academic outcomes. These interventions will need to be standardized so different individuals in different settings can deliver them with reasonable fidelity. These interventions also need to supply a strong enough “dose” of active education ingredients so they can be expected to have a strong impact on students. Collaborations between teams of practitioners and counselor educators and the creation of a national center to provide leadership, direction and coordination would be very helpful.

Model of success

While we have too few researchable interventions, we do have some good models for their development — for example, Greg Brigman’s work on the development of Student Success Skills (SSS). Brigman started his design work by reviewing the educational psychology research literature to identify specific cognitive and personal-social skills demonstrated to be strongly related to increases in achievement. Then he developed the SSS school counseling curriculum to teach these skills. SSS can truly be said to be research-based. Brigman also designed the curriculum to be reasonably standardized. Furthermore, a series of outcome research studies by Brigman and Linda Webb have demonstrated that the SSS curriculum reliably results in gains in achievement that are reflected in state achievement test scores.

Enhancing outcome research is a powerful and important long-term strategy for increasing the capacity of school counselors to impact clients’ lives. The profession, however, must make a sustained investment in activities that will support the development of researchable interventions and the use of outcome research to guide professional decisions.

John C. Carey is director of the National Center for School Counseling Outcome Research. Contact him at jcarey@educ.umass.edu. Ian Martin is a research assistant at the National Center for School Counseling Outcome Research.

Letters to the editor: ct@counseling.org

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North Atlantic Region looking to fill position of treasurer  
Submitted by Bob Schmidt  
serenitysh@aol.com

Want to get more involved in your association on a regional level? The American Counseling Association North Atlantic Region is looking for a treasurer to serve a three-year term with lots of support and help from ACA.

What do you get for your hard work? Hotel, transportation and registration are covered when you attend the ACA Conference and NAR Assembly. Individuals interested in the position should submit a letter and résumé to NAR Chair-Elect Bob Schmidt at serenitysh@aol.com.

CSJ journal aids in social change efforts  
Submitted by Rebecca L. Toporek  
rtoporek@sfsu.edu

Counselors have an important role in creating and fostering social change toward human rights, access to education and health care, and human dignity. Through counseling, teaching, leading groups, facilitating community dialogue, advocacy and program development, counselors are transforming society.

The Journal for Social Action in Counseling and Psychology was created, in part, to assist counselors and psychologists in contributing to the positive work of social change by publishing articles and essays that address complex systemic problems faced by clients and communities and that focus on positive action and interventions. As the official journal of Counselors for Social Justice and Psychologists for Social Responsibility, JSACP stands on the principle of open access; therefore, it is published electronically and is available free online to anyone in the world. The first two issues have been published and are available at psysr.org/jsacp.

JSACP strives to provide readers with articles that promote reflection on community change and system transformation in which counselors and psychologists play a role. Articles published thus far have focused on such topics as social action research, theory, transformative practice, social justice training and community empowerment and collaboration. While the majority of articles reflect scholarship, JSACP also publishes forums titled “Community Voices” and “Student Voices,” respectively, as well as personal reflection pieces that promote social action and critical reflection. This electronic journal upholds the highest academic and professional standards and is available in PDF format with articles in either English or Spanish. Manuscripts are reviewed through a masked, peer-review process. JSACP is seeking manuscripts year round. For editorial policy and other information, visit psysr.org/social-action.htm. Potential authors may also contact editors Tod Sloan and Rebecca Toporek to discuss creative ideas that reflect the principles of the journal. JSACP is hosted by the Department of Counseling Psychology at Lewis and Clark Graduate School of Education and Counseling.

ACC seeking nominations to honor outstanding counselors  
Submitted by Stella Kerl-McClain  
sbk@lclark.edu

The Association for Creativity in Counseling is pleased to announce this year’s nomination and selection process for honoring outstanding contributions to the profession. The various awards will be presented at the ACA Conference in Charlotte, N.C. For more information on the awards criteria, visit our website at acc-acc.org or contact Stella Kerl-McClain at sbk@lclark.edu.

The Thelma Duffey Vision and Innovation Award, established at the 2008 ACA Conference, recognizes an individual whose example, encouragement and inclusive practice inspire and motivate others to use creativity in its various forms in counselor education and clinical practice. The recipient of this award will:

- Recognize humility as a virtue
- Collaborate with others to build bridges
- Recognize that creativity is a universal quality experienced by everyone
- Invite others to share their creativity in the service of the greater good
- Facilitate creative expression through growth-fostering connections and cooperation

The ACC Professional Service Award honors outstanding service to ACC and to the promotion of creativity in counseling practice. Consistent with the mission of ACC, the nominee must promote greater awareness, advocacy and understanding of creativity in counseling and advance creative, diverse and relational approaches to counseling within the profession.

The ACC Research Award recognizes a research project that addresses issues related to creative, diverse and relational approaches to counseling. When sending in a nomination, attach a summary of the research and its relevance to the profession related to creativity in counseling. Nominees must be current members of ACC.

The ACC Graduate Student Award recognizes an outstanding ACC graduate student member at the master’s or doctoral level who has participated in promoting creative, diverse and relational approaches to counseling or whose scholarship promotes creative, diverse and relational expression in counseling.
Service members will be focus of ACEG Professional Development Institute

Submitted by Linda Parker
Linda.Parker8@va.gov

The Association for Counselors and Educators in Government welcomes David Fenell, Greg Garcia and Ben Noah to our preconference Professional Development Institute (PDI) in Charlotte, N.C., on March 19-20. Themed “Supporting and Advocating for Our Service Members: Pre, In and Post Service,” the PDI focuses on the range of services available for our service members and veterans.

A professor of counselor education and chair of the Department of Counseling and Human Services at the University of Colorado at Colorado Springs, Fenell will be our keynote speaker at the March 19 PDI Awards Lunch. His presentation will examine “Combat Stressors Affecting Military Personnel and Their Families: How Counselors Can Help.”

Retired Air Force and now academic dean of military programs and outreach at Grantham University, Garcia has served as an education and training noncommissioned officer, a guidance counselor, an education officer and major command director of education and training. He shares his expertise in his presentation “The Small ‘c’ counselor — The Commander’s Primary Resource for Military Effectiveness.”

Noah, who began his counseling career while on active duty with the U.S. Air Force, continues to provide counseling services to active duty and transitioning military members and their families. Currently a core faculty member with Capella, he will provide insight into the effects of post-traumatic stress disorder with his presentation on “The Long Separation: Deployment, PTSD and Its Effect on Service Members and Their Families.”

Our sponsorship includes Capella University and the U.S. Military Entrance Processing Command (USMEPCOM). Capella has a dedicated military support services team and offers programs geared toward active duty, reservists, guard and veterans. More information is available at capella.edu/armed_forces/armed_forces_index.aspx.

USMEPCOM determines whether applicants are qualified for enlistment based on standards set by each of the services. Further information about USMEPCOM can be found at mepcom.army.mil.

Contact Janet Wall at jw4aac@earthlink.net for further details. For more information about the program, go to dantes.doded.mil/dantes_web/organizations/aceg/PDI.htm.

NECA to hold Awards Luncheon and Social Justice Institute

Submitted by Kay Brawley
kbrawley@mindspring.com

The National Employment Counseling Association is seeking nominations for its 43rd Annual Awards Luncheon, which will be followed by its Social Justice Institute. The event will take place March 20 from 11:45 a.m. to 4:30 p.m. in the Harris Room of the Westin Hotel in Charlotte, N.C.

To nominate a deserving employment counselor, career service provider/agency or employer (including yourself or your employer), refer to the awards categories on the NECA website at employmentcounseling.org.

Nominations must be received by Jan. 31. Send your nomination and support documentation to the attention of Chair Lauri Mills at lmills@pacific.edu or University of the Pacific, Stockton, CA 95211.

Why attend the NECA Awards Luncheon and Social Justice Institute? Every day the news talks about new layoffs, mergers and buyouts. Now more than ever, we need the most effective methods to help our job seekers overcome the demoralization of unemployment (for whatever reason) and make the transition to employment with confidence for success.

NECA President Robert Chope, the lead presenter at the Institute, states, “Social justice in employment and career counseling is not only the practice of alleviating injustice and oppression for all people, but particularly for those who may be marginalized.”

Other presenters with expertise in social justice and employment include Rebecca Toporek, Felicia Tripp, Robin Gluck, Michael Lazarchick, Sue Pressman, Kimberly Key, Carolyn Kalil, Karol Taylor and Carolyn Greer. These presenters will cover four areas of concern: social justice awareness and advocacy in individual counseling, social justice program development, supporting social entrepreneurship and targeted strategic training.

Registration for this training being offered by NECA leadership is now open and available online at the ACA website (counseling.org under “division luncheon”) or at the NECA website. The $75 fee includes the opening Awards Luncheon.

For more information, contact NECA Professional Development Director Kay Brawley at kbrawley@mindspring.com. ♦

The European Branch of ACA held its 49th Annual Conference in Wiesbaden-Niedernhausen, Germany, from Nov. 6-9, 2008. Attending the 41 mini-sessions and four Learning Institutes were 150 counseling professionals and students from nine different countries. Pictured are keynote speakers Jane E. Myers and Thomas J. Sweeney (left) with EB-ACA President Rick Sidley.
In your career as a counseling professional, you touch thousands of lives every day. You help people with personal, social, educational and career concerns. You help them make decisions, solve problems, and adjust to change. Membership in ACA can help you do it all. At every stage of your career – student to seasoned professional – ACA will help you be your very best.

Maximize your potential — Professional Development
- ACA offers FREE ethics consultation FIVE days a week with a 72-hour inquiry response time by Licensed Professional Counselors with a PERSONAL TOUCH.
- ACA Career Services not only provides information about careers in counseling, but it also gives you access to specially-selected counseling jobs through our alliance with Career Builder.
- Private Practice Resources - ACA offers a variety of books and online courses specific to private practice.
- The ACA Insurance Trust (ACAIT) promotes and administers quality insurance and services at competitive rates. Your livelihood is protected with ACA's professional liability policy.
- The ACA Foundation, the philanthropic arm of the association, supports counselors through the Counselors Care Fund, Foundation publications and programs such as Growing Happy and Confident Kids, and grants and competitions offering awards as well as financial assistance to ACA members.

Stay Ahead of the Learning Curve — Education
- The ACA Annual Conference & Exposition is an annual event featuring a treasure trove of programs that provide continuing education and ensure your life-long learning.
- ACA Online Learning provides professional development courses (post-degree for licensure or certification renewal credit) designed to help you fulfill your ethical responsibility to stay current in the field.
- ACA's monthly magazine, Counseling Today, quarterly journal of counseling research and practical articles, Journal of Counseling & Development, bi-weekly e-news bulletin, ACA-E-News plus four new special focus e-newsletters; website, counseling.org, Research Center and Online Library of resources are all designed to expand your knowledge, increase your skills and provide you with up-to-date information on the counseling profession.

Make an impact on the counseling care of tomorrow and your job today — Advocacy
- As an ACA member, you’re part of a powerful force. A highly effective advocate for counseling, ACA leads the legislative charge on every contemporary issue facing the profession. ACA provides the latest information on legislation that directly affects you and those who you serve, as well as updates on funding and program support at the national and state levels.
- The ACA Government Relations listserve provides you with free up-to-date alerts on new legislation affecting the counseling profession at the national and state level.

Expand your connections — Networking
- As an ACA member, you have access to numerous networking opportunities and a wide range of resources guaranteed to keep you in the loop professionally.
- The ACA Annual Conference & Exposition is the biggest networking opportunity of the year for approximately 3,000 counseling professionals. Meet colleagues from around the world and in your hometown! Rub elbows with well-known authors—whose books you had to read in college—as well as successful practitioners and ACA leaders.
- ACA interest networks and listerves link you to your area of interest or specialty.
- Division and Branch memberships provide an opportunity to be more closely connected with your colleagues working in your specific interest and practice areas, and in your state.

Wait, there’s more — Discounts
- Members receive exclusive discounts on all ACA resources and services, as well as discounts from outside organizations.
- ACA has created partnerships with industry leaders in insurance, credit, travel, identity theft and much more! Membership in ACA saves you time and money; provides you with professional development and continuing education opportunities; helps protect your future through legislative and public policy advocacy; provides prestige and credibility; and increases your personal network. Your endorsement is the best way to introduce other counseling professionals to the resources essential in advancing their success.
ACA Is Where You Belong… Join Us Today!

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   (e.g., "Robert" not "Bob"
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   E-mail ___________________________ Fax ( ) ___________________________

[2. Select Your ACA Membership]
    [ ] $155 Professional: Individuals who hold a master’s degree or higher in counseling or a closely related field from a college or university accredited by the Council for Higher Education Accreditation. Proof of academic credentials may be requested.
    [ ] $155 Regular: Individuals whose interests and activities are consistent with those of ACA, but who are not qualified for Professional membership.
    [ ] $89 New Professional: Individuals who have graduated with a masters or a doctorate within the past 12 months. Status is good for one year. Please indicate date of graduation (month/year) ______/____ and institution ____________________________________________.
    [ ] $89 *Student: Individuals who are enrolled at least half-time in a college or university program. *Please select current student status:
      [ ] Master’s Level [ ] Doctoral Level [ ] Other
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[3. Make A Voluntary Contribution (Tax Deductible)]
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    [ ] David K. Brooks Jr. Distinguished Mentor Award $_____________________
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    [ ] Professional Advocacy Fund $_____________________
    [ ] Gilbert & Kathleen Wrenn Award $_____________________

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COMING EVENTS

ICBH Hypnotherapy Training
Jan. 22-24 and Feb. 19-21
Tampa, Fla.
Counselors in Florida who offer hypnotherapy services are required to complete a state board-approved 50 CEU curriculum. Join the International Certification Board of Clinical Hypnotherapy for its annual Florida certification class.
ICBCH is approved to offer this training to Florida mental health counselors, social workers and marriage and family therapy professionals. NBCC and NAADAC credit are also available. The program instructor is Richard K. Rosenberg, who presented on hypnotherapy at the 2008 ACA Conference & Exposition in Hawaii and is a popular author and keynote speaker.
For more information or to register, call 800.390.9536 or visit LearnClinicalHypnosis.com.

EB-ACA Weekend Learning Institute
Jan. 31-Feb.1
Neuenkirchen, Germany
The European Branch of the American Counseling Association will hold a Weekend Learning Institute focused on the theme “An Integrated Approach to Relapse Prevention for People With Substance-Related Problems,” featuring David Defrancesco.
For more information, contact Derrick Copper at derrick.copper@eur.army.mil or Peggy Krauss at peggy.krauss@eur.army.mil.

Southeast Conference on Addictive Disorders
Atlanta
Feb. 9-11
Registration is open for the Southeast Conference on Addictive Disorders, an event that will instruct and inform those in the industry to prevent, intervene and treat addictive disorders. SECAD 2009 will include a full range of educational opportunities, including panel discussions, preconference workshops and knowledge track sessions. For program inquiries, contact Michael Goff at 603.836.0332 or mgoff@vendomegrp.com; for registration inquiries, contact Whitney Dean at 603.836.0326 or wdean@vendomegrp.com.

ACA Annual Conference & Exposition
March 19-23
Charlotte, N.C.
Join thousands of your colleagues for the largest conference in the world dedicated to the counseling profession. This is your opportunity to grow through professional development and to network with your colleagues. For more information about ACA’s Annual Conference and to register, visit counseling.org/conference or call 800.347.6647 ext. 222.

FYI

Call for proposals
The Association for Multicultural Counseling and Development and the Association for Counselor Education and Supervision jointly invite ACA members to participate in the second international conference to be held in Gabarone, Botswana, located in southern Africa from July 8-11. Conference proposals are welcomed, especially pertaining to systemic oppression and social marginalization as they affect individuals, families, and communities. The deadline for proposals is Jan. 21. For more information, go to education.ufl.edu/Faculty/WestOlutunji/amcd_tour.html.

Grad student manuscript contest
The editorial board of The Journal of Counseling Research and Practice announces its first graduate student manuscript contest. Students are encouraged to submit manuscripts in the areas of theory, research or practice. Entries can be submitted by single or multiple authors. Faculty members may coauthor a paper, but students must be the first author.
All submissions should be mailed to Carl J. Sheperis at cs12@msstate.edu by March 15. The award-winning manuscript will be published in the October 2009 edition of The Journal of Counseling Research and Practice.

Call for submissions
The Journal for Specialists in Group Work invites research and practice-based submissions for a special issue on social justice issues in group work. Emphasis is on interventions conducted in school, university, activist and other community-based settings as well as those that attend to inequities in power, privilege and access to resources experienced by diverse populations.
The deadline for proposal submissions is Jan. 8. Questions and submissions may be sent to Anneliese Singh at asingh@uga.edu and Carmen Salazar at Carmen_Salazar@tamu-commerce.edu.

The Journal of Counseling Research and Practice is a new peer-reviewed national publication. The editorial board invites original manuscripts related to theory, research or practice in professional counseling. We anticipate publishing six manuscripts in each annual edition. The deadline for our seminal edition is May 1.
Manuscript style and format must conform to the guidelines in the latest edition of the Publication Manual of the American Psychological Association. Please direct any questions to Carl J. Sheperis at 662.325.9840 or cs12@msstate.edu.

The Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling, a division of ACA, is inviting submissions for The Journal of LGBT Issues in Counseling. The intent of this journal is to publish articles relevant to working with sexual minorities and that will be of interest to counselors, counselor educators and other counseling-related professionals who work across diverse fields, including in schools, mental health settings, family agencies and colleges/universities.
The journal is distributed quarterly. For detailed submission guidelines and areas of focus, contact editor Ned Farley at nfarley@antiochseattle.edu.
Labor Department launches initiative to support injured vets

The U.S. Department of Labor (DOL) recently unveiled America’s Heroes at Work, a program designed to help employers support veterans who are coping with two increasingly common battle-field injuries — traumatic brain injury (TBI) and post-traumatic stress disorder (PTSD). The initiative equips businesses and the workforce development system with tools to help those affected by TBI and/or PTSD succeed in the workplace.

Although their injuries may not be visible, veterans experiencing combat stress or a brain injury may face difficulties, especially with respect to employment. They may struggle with headaches, vertigo, balance problems, anxiety and sleep disturbance, among other symptoms. They also may experience cognitive symptoms such as short-term memory deficits, poor concentration and decision-making difficulties that can interfere with everyday activities, both inside and outside the workplace.

DOL wants employers to know that simple workplace supports often can help individuals with TBI and/or PTSD succeed in their jobs and that employment can play a major role in their recovery. A comprehensive website, AmericasHeroesAtWork.gov, offers support and education concerning ways to assist returning service members with TBI and PTSD in their transition into the workplace. Specifically, it educates employers, human resources professionals, the workforce development system and vocational rehabilitation professionals on accommodations they can make for employees living with a brain injury or combat stress. It also provides a toll-free phone number (800.526.7234) that employers can call for personalized assistance related to accommodations for veterans with disabilities.

Examples of accommodations for people with TBI or PTSD include lighting adjustments to prevent headaches, tape recorders to help with memory or a quiet workspace to support concentration. Other promising practices include job sharing, job coaching, flexible schedules and workplace mentoring.

People to People counseling delegation headed to China, Tibet

Jane Goodman, a past president of the American Counseling Association, invites counselors to take part in a unique overseas cultural and professional exchange opportunity. People to People Citizen Ambassador Programs is coordinating a delegation of professionals specializing in counseling that will travel to China and Tibet from May 25 to June 6.

The delegation will combine educational activities and meetings centered on counseling in both China and Tibet with cultural activities highlighting the sights and sounds of each country. Delegates will enjoy insider views of the counseling system in China and experience the culture in ways that most travelers never do, from climbing the Great Wall and seeing the amazing temples in Tibet to observing professional counterparts in their element.

Program details and an application form are available by calling 877.787.2000 or e-mailing professionals@citizenambassadors.org. A link to the planned itinerary can be found online at citizenambassadors.org.

ACA Foundation to sponsor student attendees at conference

The ACA Foundation Student Grant program again will be sponsoring the participation of 20 students at the ACA 2009 Annual Conference & Exposition in Charlotte, N.C. Each grant covers student member registration for the conference, but recipients are personally responsible for their transportation and lodging expenses.

Applicants must be ACA student members currently enrolled at a university or college in the field of counseling or a related course of study and attending the ACA Conference for the first time. Applications must be received by Jan. 23, and recipients will be notified by Feb. 18. Obtain applications and direct all questions to the ACA Foundation office at 800.347.6647 ext. 350 or acaf@counseling.org.

ACA joins in celebration of mental health parity law

On Nov. 17, mental health advocates, including representatives of ACA, held an event on Capitol Hill to celebrate the recent passage of the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008. The event featured remarks by former first lady and longtime mental health advocate Rosalynn Carter, who told the audience, “I hope this will be the beginning of the end of stigma and discrimination against people with mental illnesses.”

In addition, several members of Congress who were instrumental in passing the parity bill were presented with awards in recognition of their efforts. Awardees included Sen. Pete Domenici (R-N.M.), Sen. Mike Enzi (R-Wyo.), Sen. Edward Kennedy (D-Mass.), Rep. Patrick Kennedy (D-R.I.) and Rep. Jim Ramstad (R-Minn.). David Wellstone, son of the late Sen. Paul Wellstone (D-Minn.), also made remarks, stating, “This bill is a major achievement — one I know my dad would be proud of.”

Representing ACA at the event were President-Elect Lynn Linde, Executive Director Richard Yep, Director of Public Policy Scott Barstow, Associate Director of Public Policy Christopher Campbell and legislative representative Peter Atlee.

After many long years of effort by ACA and other mental health advocates, President George W. Bush signed the Mental Health Parity and Addiction Equity Act of 2008 into law on Oct. 3. The new law will require most private sector health plans to provide insurance coverage for mental and addictive disorder services on the same terms and conditions as other types of care.

Former first lady Rosalynn Carter and Christopher Campbell of ACA were among those who gathered on Capitol Hill to celebrate passage of mental health parity legislation.
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Relationship 911 is the revolutionary new website for people experiencing relationship difficulties. Post your profile in our “Find a Professional” section & the major search engines. Promote yourself thru our “Events Calendar” and “Ask The Experts” forum...All Free! www.relationship911.com/promote_practice.aspx (800) 717-0881 or email at mark@relationship911.com

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Catonsville, MD

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BUSINESS OPPORTUNITIES


EMPLOYMENT CLASSIFIEDS

ARIZONA

SOUTHEASTERN ARIZONA BEHAVIORAL HEALTH SERVICES, INC.

SEABHS, Inc. offers a variety of opportunities related to new program initiatives, best practices and community capacity building. Bilingual (Spanish) ability highly valued, Arizona Board of Behavioral Health Examiners License and working knowledge of family-centered therapy preferred. Clinical positions available throughout southeastern Arizona including Nogales, Benson, Sierra Vista, Bisbee, Willcox, Safford, Douglas and Clifton for MA, MSW, LCP & LISAC. SEABHS offers a rewarding work experience, flexible schedule and provides employer paid health, dental, vision, life, short- & long-term disability insurance and 401(k) matching plan. 23 days of PTO first year, 12 days reserved sick leave and 401(k) matching plan. To apply, fax your resume to (860) 793-3369 or send an e-mail to employment@wheelerclinic.org. Visit us at www.wheelerclinic.org

CONNECTICUT

WHEELER CLINIC

Multiple Positions

Wheeler Clinic is a vibrant, growing non-profit organization recognized as one of the premier providers of behavioral health and special education services in Connecticut. We have career opportunities for direct clinical work, supervision, training program development and administration for: Psychiatrists or licensed clinical psychologists; Social workers or marriage and family therapists; Case managers; Direct care counselors; Clinicians; Group facilitators (DWI, domestic violence); Occupational and physical therapists. To apply, fax your resume to (860) 793-3369 or send an e-mail to employment@wheelerclinic.org. Visit us at www.wheelerclinic.org

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LOUISIANA

SOUTHEASTERN LOUISIANA UNIVERSITY

Tenure-track, Assistant Professor

The graduate counseling program 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 2009. Earned doctorate in Counselor Education from a CACREP institution by July 1, 2009, required. Candidate must be LPC, or LPC eligible in the state of Louisiana. Responsibilities include teaching graduate counseling courses, with emphasis in research and assessment courses, and supervising practicum and internship experiences. Active participation in research, writing and service activities are also required, along with maintaining office hours, mentoring students, holding committee appointments, and participating in university activities.

University teaching experience, along with demonstrated potential in research, teaching and scholarly activity preferred. A special interest in teaching research and assessment courses also preferred.

The purposes of the Department of Counseling and Human Development are:

1. To provide opportunities for developing personal and professional competence by encouraging intellectual curiosity and the acquisition of knowledge by enhancing self awareness and ethical responsibi-
by increasing understanding of individuals and families within the context of a pluralistic society;

2. To provide training, services, and leadership to the professional community and general community including groups, school systems, and organizations;

3. To offer curricula and instruction leading to undergraduate and graduate degrees granted by the University.

4. To provide students enrolled in professional training programs and postgraduate professionals with course work which meets current licensing, certification, and continuing education requirements in their particular field of study.

To apply for this position, please complete and submit an on line application, which will include the names and contact information for three references and the following attachments: letter of application, resume, and transcripts (official transcripts required upon employment). Applicants must apply by January 15, 2009 on line at: jobs.selu.edu/applicants/Central?quickFind=51241

INTERFAITH PASTORAL COUNSELING

Licensed Clinical Psychologist/Social Worker/Professional Counselor

Private practice in Catonsville is seeking a MD licensed clinical psychologist/ social worker (LSWC) or Professional counselor (LCPC) with 3-5 years experience for a part-time contractual position. Insurance panel experience preferred. Mail resume to Joyce McCauley P.O. Box 3274.Catonsville MD 21228.

WINONA STATE UNIVERSITY

Two Positions

Winona State University Counselor Education Department seeks applications for two Tenure Track Assistant Professor positions in a CACREP accredited graduate program to begin August 2009. Qualified applicants must have an earned doctorate in counselor education or closely related field by date of hire along with graduate level teaching experience in CACREP core areas. Preference will be given to candidates who demonstrate the following: 1) Experience teaching non-traditional/returning students; 2) A history of leadership; and 3) A clearly stated position on social justice, advocacy, and teaching tolerance. For position #1, preference will be given to candidates who have teaching and/or clinical practice experience in chemical dependency counseling. For position #2, preference will be given to candidates who have the ability to set up and administer department based community focused counseling and training clinic. When applying, please address in a cover letter (in the order listed in the Notice of Vacancy [NOV]) how you meet the responsibilities and qualifications. The NOV can be obtained by going to http://www.winona.edu/humanresources, e-mailing jobs@winona.edu or calling (507) 457-5008. Please specify if you are applying for Position #1 or Position #2. Review of applications will begin 1/12/09. Position available pending budgetary approval.

The position will be filled pending availability of funds. The Department offers full-time faculty) is CACREP-accredited to excellence in graduate education is essential. This expanding Department (12 beginning August 2009. Responsibilities include teaching graduate courses in counseling psychology, with an emphasis in School Counseling as well as teaching undergraduate psychology courses. Additional responsibilities include advising, engaging in scholarly activities, and providing service to the College and professional community. Ph.D. and expertise in school counseling required. NJ license (LPC) preferred. Preference will be given to applicants who are graduates of CACREP Accredited Programs in Counseling. Prior successful college teaching experience a plus.

Caldwell College invites applications for a full-time tenure-track position as Assistant Professor in Psychology (new position, subject to final budget approval) beginning August 2009. Responsibilities include teaching graduate courses in counseling psychology, with an emphasis in School Counseling as well as teaching undergraduate psychology courses. Additional responsibilities include advising, engaging in scholarly activities, and providing service to the College and professional community. Ph.D. and expertise in school counseling required. NJ license (LPC) preferred. Preference will be given to applicants who are graduates of CACREP Accredited Programs in Counseling. Prior successful college teaching experience a plus.

Caldwell College is a 4-year Catholic liberal arts college located in a suburban setting about twenty miles west of NYC. Founded in 1939 by the Sisters of St. Dominic, Caldwell College enrolls approximately 2,300 full and part time students. Candidates must be willing to support the Dominican Catholic, liberal arts mission of the College. Please submit letter of application, curriculum vitae, official transcript from the institution awarding the highest degree, and names of three professional references to: The Office of Human Resources-ACA, Caldwell College, 120 Bloomfield Ave., Caldwell, NJ 07006. resumes@caldwell.edu Fax: (973) 618-3358

Review of applications will begin immediately and continue until the position is filled. Caldwell College is an EOE.
ASSISTANT PROFESSOR OF COUNSELING, EDUCATIONAL AND DEVELOPMENTAL PSYCHOLOGY COORDINATOR OF MENTAL HEALTH COUNSELING PROGRAM (TENURE TRACK)

Responsibilities: Teach in the mental health counseling emphasis of the Counselor Education Program; teach courses in the CACREP core and courses in the mental health counseling specialty; be able to supervise practicum courses and internships; additional teaching at the undergraduate level will be assigned as appropriate; expected to participate in the leadership of local, state and regional professional organizations; demonstrate productive scholarship; pursue research funding through grant development; provide department, university, and local community service; mentor student research; and demonstrate leadership in Eastern Washington University’s Graduate Counseling Program.

Qualifications: The preferred candidate possesses a doctorate in Counselor Education, preferably from a CACREP accredited program or closely related field(s) with experiences in mental health counseling (doctorate required for tenure); holds a current license or is eligible as a licensed mental health counselor in Washington State; has experience in teaching, counseling, and student supervision; and demonstrates commitment to serving the needs of diverse populations as well as demonstrates research or research potential, especially through external agencies.

APPLICATION PROCEDURE: Please send letter of application, vitae, and three letters of recommendation addressing teaching and research abilities, samples of professional work (including any recent publications) to: Office of the Dean, Attn: M. Dreis, College of Education and Human Development, 213 Martin Hall, Cheney, WA 99004-2422. (Fax: 509-359-4822)

This position, during the course of university employment, will be involved in unsupervised access with the developmentally disabled, vulnerable adults, and children. The position is also responsible for the receipt of, or accountability for, university funds or other items of value. Successful candidates must pass a background check.

The successful candidates for the position will be required to show proof of eligibility to work in the U.S. pursuant to U.S. immigration laws. Eastern Washington University is committed to increasing the diversity of its faculty, staff, students, and academic program offerings and to strengthening sensitivity to diversity throughout the institution. We are an equal opportunity, affirmative action employer, and applications from members of historically underrepresented groups are especially encouraged.

IUP is a member of the Pennsylvania State System of Higher Education. F09-010.

TEXAS

TEXAS A&M UNIVERSITY – CORPUS CHRISTI

Faculty Position; Counselor Education

Open Rank: Qualifications: doctorate in counselor education, preferred (CA-CREP), experience teaching in graduate programs, an established research agenda, and leadership skills/experiences. The Department of Counseling & Educational Psychology offers the M.S. in Counseling Psychology offers the M.S. in Counseling and the Ph.D. in Counseling Education. Review of applicants is immediate. Send a cover letter, CV, and five reference contacts electronically or hard copy to: Rachel Perez, TAMUCC, College of Education, Corpus Christi, TX 78412, Rachel.perez@tamucc.edu (361) 825-3393.
WASHINGTON

INTERFAITH COMMUNITY HEALTH CENTER

Behavioral Health Director

Interfaith Community Health Center seeks full-time Behavioral Health Director to oversee and direct the integrated behavioral health services and staff and provide comprehensive behavioral health care to a diverse, often underserved patient population across the lifespan. Please view qualifications, complete job desc. & app. process at www.interfaithchc.org. Help us provide more access to health care in our community!

WEST VIRGINIA

WEST VIRGINIA UNIVERSITY

Assistant Professor of Counseling & Coordinator of School Counseling

The Department of Counseling, Rehabilitation Counseling, and Counseling Psychology at West Virginia University invites applications for an academic year (9-month), tenure track, benefits-eligible faculty position at the rank of Assistant Professor to begin on August 16, 2009. Appointees will serve as a core faculty member in the CACREP-accredited M.A. program in Counseling and coordinate the school counseling specialization. Salary is commensurate with qualifications and experience. Applicants should send electronically a letter of application stating teaching, service and research goals. In this letter please address your experience in regards to the required qualifications and the nine preferred areas of experience listed on the job description. Also send electronically a vita and three current letters of reference directly to Linda.Winiarski@mail.wvu.edu. If access to a computer is not available, please send the above information to Linda.Winiarski, Search Committee Secretary, Dept. of Counseling, Rehabilitation Counseling, and Counseling Psychology, College of Human Resources and Education, 504 Allen Hall, P.O. Box 6122, Morgantown, WV 26506-6122. Review of applications will begin on February 1, 2009 and position will remain open until it is filled. For a more complete job description and information about the programs and department, visit http://www.hre.wvu.edu/crc/announcements.htm If you have any questions, please call Dr. Ed Jacobs, Search Committee Chair, at (304) 293-2177 or email Ed.Jacobs@mail.wvu.edu. West Virginia University is an equal opportunity, affirmative action employer that accommodates the needs of individuals with disabilities. Women, individuals with a disability, and individuals of minority backgrounds are encouraged to apply.
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