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Study Materials Written by
Dr. Gary L. Arthur, Ed.D., LPC, NCC

Dr. Arthur’s qualifications:
- Professor Emeritus of Professional Counseling at Georgia State University
- Counselor Educator of the Year 2007 for Georgia
- Has taught counseling courses at the graduate level for 34+ years
- Has taught in CACREP programs for 20+ years
- Dr. Arthur wrote these study guides for the specific purpose of preparing you for the licensure exam

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Cover Story

Counseling in a time of economic upheaval
By Jonathan Rollins
ACA members reveal how the economic climate is affecting them and their clients and share thoughts on what counselors can do to be of the most service during times of economic uncertainty.

Features

Hidden in plain sight
By Jenny Christenson
High-functioning alcoholics often escape the scrutiny of others and live in denial themselves, but counselors can play a pivotal role in giving them the help they really need.

Opinion
Counseling in the 21st century: Challenges and opportunities
By Shannon Hodges
The counseling profession must exhibit an ability to adapt to change if it hopes to survive — and thrive — in the future.

Reader Viewpoint: Perspectives on Grief
The myth of the stages of death, dying and grief
By Russell Friedman and John W. James
Does subscribing to theories of grief based on stages and phases actually have the potential to harm grieving people?

Reader Viewpoint: Perspectives on Grief
In defense of grief
By Judith Gusky
A grief counselor examines the “rush to return to normalcy” in the aftermath of traumatic events.
Serious psychological distress

According to a nationwide report released by the Substance Abuse and Mental Health Services Administration in January, almost 11 percent of U.S. adults age 18 or older (an estimated 24.3 million people) experienced serious psychological distress (SPD) in the prior year, but only 44.6 percent of those who did received any kind of mental health services. The report also found that less than 30 percent of blacks and Hispanics who experienced SPD received mental health services compared with 50.9 percent of whites.

The full report, *Serious Psychological Distress and Receipt of Mental Health Services*, which is drawn from SAMHSA’s 2007 National Survey on Drug Use and Health, is available online at [http://oas.samhsa.gov/2k8/SPDtx/SPDtx.htm](http://oas.samhsa.gov/2k8/SPDtx/SPDtx.htm).
The counseling profession’s preamble

As we all learned at some point in grade school or elsewhere, the Preamble to the U.S. Constitution is a brief introductory statement that provides us with the fundamental purposes and guiding principles that the Constitution is meant to serve:

“We the People of the United States, in Order to form a more perfect Union, establish Justice, insure domestic Tranquility, provide for the common defense, promote the general Welfare, and secure the Blessings of Liberty to ourselves and our Posterity, do ordain and establish this Constitution for the United States of America.”

The counseling profession has taken an enormous step forward by crafting principles that provide us with the same type of fundamental direction that the Constitution provides for our country. Under the auspices of 20/20: A Vision for the Future of Counseling, an initiative cosponsored by the American Counseling Association and the American Association of State Counseling Boards, we can now say that the future of our profession should look if we were to unify under one umbrella and step into the future to help a world that needs us now more than ever. Three years later, the Principles for Unifying and Strengthening the Profession emerged. Understanding the hard work and careful consideration that went into crafting this document, we are indebted to those who led and attended the 20/20 meetings.

To date, 27 of the 30 organizations (90 percent) have signed on in agreement with these principles. This is not only exciting, it is downright revolutionary. The 20/20 delegates will be coming together once again at the ACA Conference in Charlotte, N.C., to begin the careful process of operationalizing each principle in terms of relevance and measurable outcomes. Needless to say, in some ways, the real work is now about to begin.

That said, I would like to celebrate with you the process and completion of this seminal document. I enthusiastically support and promote the 20/20 vision. Moreover, I extend my heartfelt thanks to all delegates (past and present), members of the Oversight Committee (past and present) and the 30 participating organizations. Working together, these individuals and entities have seen this first phase of the process through to fruition, and we are grateful for their gift to the counseling profession.

Here’s to the future! May we take what we have learned from the past, move swiftly toward the future and, as counseling professionals, heal the world one person at a time.

With pride,
Colleen
Saturday, March 21

7:30 a.m. – 8:30 a.m. • Program ID #111
Girls’ and Women’s Wellness: Contemporary Counseling Issues and Interventions
Laura Hensley Choate

This session will highlight issues and interventions from the presenter’s book Girls’ and Women’s Wellness. Relational aggression, body image, sexual assault, intimate partner violence, work/family balance, and issues experienced by mid-life and older women will be discussed.

11 a.m. – 12 p.m. • Program ID #159
Counseling Strategies for Loss and Grief: Unique Grief and Unique Grievers
Keren Humphrey

The author of Counseling Strategies for Loss and Grief will discuss the importance of tailoring interventions to the uniqueness of grieving clients. Topics addressed will include the nature of personal and interpersonal loss, three essential counseling roles, and the adaptability of diverse counseling strategies.

2 p.m. – 3:30 p.m. • Program ID #207
Client Feedback Tools: A Fast Track to Better Outcomes in Counseling With Young People, Families, and Schools
John J. Murphy

Participants will learn how to use two quick, valid tools for obtaining client feedback on the outcome and fit of counseling services, how to adjust services based on client feedback, and how to put clients first throughout the counseling process. This session, based on Murphy’s book, Solution-Focused Counseling in Schools, Second Edition, will include a live demonstration, case examples, and practice exercises.

3:45 p.m. – 4:45 p.m. • Program ID #255
The Counselor and the Law
Burt Bertram and Anne Marie “Nancy” Wheeler

This session will provide strategies counselors can use to protect themselves from legal or ethical complaints including developing a risk management tool kit, consulting with colleagues, using appropriate informed consent, responding to a subpoena, responding to threats of harm to self or others, and managing boundary issues.

5 p.m. – 6:30 p.m. • Program ID #327
Re-Discovering Carl Rogers—Biography as Surprise
Howard Kirschenbaum

Rogers’ biographer will discuss his book The Life and Work of Carl Rogers. Based on many new sources, including Rogers’ private papers, heretofore unavailable, and on interviews with Rogers’ family and closest colleagues, Kirschenbaum’s book provides many new findings about Rogers’ life and work.

Sunday, March 22

7:30 a.m. – 8:30 a.m. • Program ID #351
Counseling Multiple Heritage Individuals, Couples, and Families
Richard Henriksen Jr and Derrick Paladino

The Multiple Heritage Identity Development Model (2009) will be discussed and attendees will learn fresh approaches and new skills for effective counseling services from the authors’ book Counseling Multiple Heritage Individuals, Couples, and Families.

11 a.m. – 12 p.m. • Program ID #399
Becoming a Counselor: The Light, the Bright, and the Serious
Samuel Gladding

This session on Gladding’s book, Becoming A Counselor, Second Edition, will focus on how we, as counselors, can become more aware of internal and external stories that alter, illuminate, shape, and give meaning to our lives.

2 p.m. – 3:30 p.m. • Program ID #447
Using Qualitative Career Assessments With Adolescents and Adults
Norman Gysbers

The qualitative career assessments in this session are based on a holistic, postmodern approach to career counseling from Gysbers’ new book Career Counseling: Contexts, Processes, and Techniques, Third Edition. You will learn how to use these assessments including the life career assessment, a structured interview, and a career genogram.

3:45 p.m. – 4:45 p.m. • Program ID #495
Suicide Prevention in the Schools: Guidelines for Middle and High School Settings
David Capuzzi

Capuzzi will discuss strategies from his book, Suicide Prevention in the Schools, Second Edition, on how to initiate or improve a suicide prevention and crisis management program. Content for faculty/staff in-service, preparation of crisis teams, postvention after an attempt or completion, how to talk with parents, and legal issues will be covered.
Executive Director's Message

Celebrating special people

Living in the Washington, D.C., area, you have the opportunity to “be there” during history-making moments, such as when I gathered with about 1.5 million other people on the National Mall to witness the swearing in of the 44th president of the United States, Barack Obama. The peaceful transition of the presidency is a site to behold. I certainly wish President Obama all the best. Regardless of outcome, he will be recognized based on what he accomplishes.

I also know there are many people who work every day to help individuals attain a better and more fulfilling life. Despite their accomplishments, these people really remain the unsung “heroes” and “sheroes” of our society.

When more than 3,000 attendees gather from March 19-23 at the ACA Annual Conference & Exposition (counseling.org/conference), we will acknowledge the accomplishments of several individuals, both for actions performed recently and for a lifelong body of work.

But what about those who don’t get awards or certificates of appreciation yet still continue to fight the battle against poverty, injustice, discrimination and abuse?

For example, there is Joelle, a mental health professional in Northern Virginia who sees the “good” in her clients and embodies what a true advocate is all about. She is tireless in her efforts to ensure that those in need are able to access the services and benefits provided through government agencies. She sees beyond people’s outer layer, whether they are homeless, in trouble with the law, facing the loss of coping skills or in need of mental health services.

Then there is Joan Collison, the wife of ACA’s 36th president, Brooke Collison. For as long as I have known Joan (and for many years before that, I’m sure), she has been tireless in her efforts to eradicate racism and discrimination in her community. Her life’s work was not something that she “had” to do. Rather, she pursued it because it was the “right” thing to do. So I was not surprised when Brooke shared that for her 75th birthday, rather than giving her a material gift, Joan asked that people do something nice for someone else and then tell her about it in a message. What a fabulous request. Rather than benefiting one person, this “present” benefited three (Joan, the individual providing the help and the beneficiary of that help).

I also want to tell you about a woman who has been dedicated to the counseling profession for nearly 40 years. She has attended almost every ACA Annual Conference since the early 1970s and has befriended many ACA members (and staff) all along the way. And all of these attributes describe someone who is not even a professional counselor!

Jean Gaskins has been a dedicated ACA staff member for the last 38 years. Last month, Jean announced her retirement. We have wished her well despite the fact that we will miss her laughter in our hallways. She was also the only person who routinely got to greet the executive director by saying, “Hey, baby.” Coming from anyone else, it just doesn’t fit.

These are just a few examples of amazing women who embody what being a compassionate and caring member of our community is all about. Feel free to e-mail me an example of someone who has similarly impacted your life or community. Let’s all celebrate those who want to improve our world and the human condition.

I hope to see you in Charlotte, N.C., at the ACA Annual Conference later this month. Please contact me with any comments, questions or suggestions that you might have via e-mail at ryep@counseling.org or by phone at 800.347.6647 ext. 231.

Thanks and be well.

Richard Yep
Executive Director
800.347.6647 ext. 231
ryep@counseling.org
Defining a true ‘profession’
I just finished reading, then studying, Jim Paterson’s article “Counseling vs. life coaching” in the December 2008 issue of Counseling Today. I’ve been a professional counselor in private practice since 1981. I am also quite familiar with the coaching industry. I have written curricular materials for a coach training organization and am still involved directly with coaches in a training capacity. Although I find the caliber of candidates to be generally high, the training they receive in no way qualifies them to be referred to as “professionals.” Counselors, myself included, have invested heavily of our time, treasure and talent in pursuing our credentials. Coaching credentials (and I use the term very loosely) demand only a fraction of the effort and resources.

The reason I’m writing is that while the article was comprehensive, it committed a very serious injury to counseling by continually referring to coaching as a profession. Coaching is not a profession. At best it is an industry, or perhaps a community of like-minded individuals (although that’s a stretch as well).

A profession possesses a professional entity that serves as the guiding leadership epicenter for the entire body of professionals who are members of that profession. Coaching has the International Coach Federation, but this body does not fulfill the same roles as the American Counseling Association does for its members. For a group of workers to be called a profession, they need to have a specialized body of knowledge that is agreed upon (in more than general terms) by the majority of its members. Coaching has no such agreement. A profession is supported by a graduate program-based training base — one clearly recognized on university campuses and incorporated into the curricular offerings of the college. Again, coaching has no such educational base.

Well, I could go on, but I think you get the point. I applaud the article for its analysis of the distinctions between coaching and professional counseling because I think this needed to be done. However, it does a disservice to our counseling profession by unnecessarily raising coaching to professional status — something that it does not in any way deserve.

Richard P. Johnson, Ph.D., LPC, NCC
drjohnson@lifelongadultministry.org

Transgender clients deserve same level of care
I would like to commend Counseling Today for including the article “Counseling transgender adults” in the January 2009 issue. I also send my thanks to the authors (Sean Moundas, Anneliese Singh, Julia Hosea, Denise Pickering, Alex Roan and Theodore Burnes) for providing an accurate and timely piece about care for transgender clients.

I am both a psychologist-in-training and a transsexual. This provides me with a unique perspective from which to comment. I want to encourage my colleagues to get involved with the legislative process. The Employment Non-Discrimination Act will be introduced again this year, and it is time to begin to protect all of our LGBT (lesbian, gay, bisexual, transgender) brothers and sisters from the unfair practice of employment discrimination.

If you are working with a client who discloses the desire to transition, please be gentle with that person. He or she deserves all the compassion and concern that you would offer to any other client. If you are concerned that you do not have the expertise necessary to assist the person through a transition, by all means collaborate with other professionals who have this experience. It may be important for your client to maintain the connection that has been built, so a referral may not be in the best interest of the client.

Thanks again for this great article. Transgender people are truly everywhere and deserve to be welcomed and treated with respect and dignity.

Lore M. Dickey
University of North Dakota
dickey.bn@gmail.com

Meeting needs behind bars
Thanks to Jenny Christenson for her thoughtful article concerning counseling women in the criminal justice system (“Assisting incarcerated women,” January 2009). I just completed my doctoral dissertation and chose to do a psychoeducational group with women in a prison in Texas. Their needs are multilayered and complex, and they are very responsive to those who come offering support with genuineness. When they feel honored and heard, they also listen and receive. This is an often-ignored area of need.

Barbara Byers, Ph.D., LPC
Grapevine, Texas
barb.byers@verizon.net

Article makes for ‘influential’ reading
Jonathan Rollins’ compilation of “Counselors’ biggest influences” (January 2009) was an enjoyable read and a positive way to start the new year. It helped me to reflect on the reasons I moved this direction in my career path and the influences on my thinking and life. Keep up the great work!

Frank Coulson
coulsonfrank@hotmail.com

Time to rethink designation for addiction counselors
Have you folks at ACA really thought through the implications of the 20/20 document for your membership designations for addiction counselors? This is why I ask:

In Connecticut state employment, even those addiction counselors with a master’s or doctorate are classified “nonprofessional” despite the extensive certification, training, education and experience that also statutorily defines us as being in a “professional service.” That’s what we are trying to change.

I was initially encouraged by the article “Next step taken in shaping profession’s future” that appeared in the November 2008 issue of Counseling Today. The article gives an overview of the 20/20: A Vision for the Future of Counseling principles for unifying the profession. It mentions nothing about a mandatory education component of being designated a “professional.”

I was then perplexed to see that ACA
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David Capuzzi

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requires a master’s to be designated a “professional” member. To say some certified counselors who make a living at it are professional and some are not contradicts the basic premise that we share “a common professional identity” and present ourselves “as a unified profession” — the first two of seven Principles for Unifying and Strengthening the Profession as identified by the 20/20 delegates of the ACA-led effort.

Maybe it is time to change the ACA membership label to say we are all professional, credentialed members (if we meet certification requirements) who have various levels of education (that is, Level 1, Level 2 and so forth, like NAADAC, the Association for Addiction Professionals, designates). All Certified Addiction Counselors are in fact “professional,” and to infer differently is a misrepresentation. More education is always needed, but that is no excuse to split us even more. We need to present a united front. Sharing a common professional identity is critical for counselors and for our clients. If Certified Addiction Counselors are not classified “professional,” that infers something about the intrinsic value of their services and their patients and may impact the efficacy of treatment outcomes.

Louis Sorrentino
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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.

E-mail letters to ct@counseling.org or write to: Counseling Today, Letters to the Editor, 5999 Stevenson Ave., Alexandria, VA 22304.
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Note on Licensure: Walden University's M.S. in Mental Health Counseling is accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP), a specialized accrediting body recognized by the Council for Higher Education Accreditation (CHEA), which is a requirement for licensure in many states. The M.S. in Mental Health Counseling program is designed to prepare graduates to qualify to sit for licensing exams and to meet the academic licensure requirements of many state counseling boards. Because no graduate program can guarantee licensure upon graduation, we encourage students to consult the appropriate agency to determine specific requirements. For more information about licensure, students should visit the National Board for Certified Counselors at www.nbcc.org/stateboardmap and contact the appropriate licensing body.
Student-to-counselor ratios remain all but unchanged

The ratio of students to school counselors in U.S. public elementary and secondary schools stayed virtually the same in the 2006-2007 school year, according to data recently released by the U.S. Department of Education’s National Center for Education Statistics (NCES). The data show the current U.S. student-to-counselor ratio at 475:1, down only slightly from last year’s ratio of 476:1.

The ratio is based on the total number of students enrolled in public elementary and secondary schools and the total number of “guidance counselors” employed in public schools during fall of the 2006-2007 school year as reported to NCES by individual school districts. The American Counseling Association has the updated student-to-counselor ratio charts for public elementary and secondary schools available on its webpage at counseling.org/PublicPolicy/TP/ResourcesForSchoolCounselors/CT2.aspx.

The student-to-counselor ratio remains nearly twice as high as the 250:1 ratio ACA recommends to ensure that students have adequate access to counselors’ services. Research shows that the provision of school counseling services can improve student well-being and academic achievement.

To calculate your school district’s ratio, visit the NCES website at nces.ed.gov/ccd/districtsearch and enter the name of your school district. The website makes information available on total number of students and total number of school counselors, as well as other data.

Congress designates National School Counseling Week

On Jan. 16, the Senate unanimously passed S. Res. 16, a resolution designating Feb. 2-6, 2009, as National School Counseling Week. Sens. Patty Murray (D-Wash.) and Susan Collins (R-Maine) sponsored the resolution. On Jan. 22, the House of Representatives approved a similar resolution, H. Res. 56, sponsored by Rep. Linda Sanchez (D-Calif.), by voice vote.

School counseling programs are an integral part of the educational process that enables all students to achieve success. Counselors help parents, teachers and administrators focus on ways to further the educational, personal and social growth of children. School counselors are actively committed to helping prepare students to succeed in a diverse, changing world by providing support that is responsive to each student’s talents, interests and challenges.

In honor of National School Counseling Week, the ACA Office of Public Policy and Legislation would like to remind ACA members that resources for school counselors are available on our website at counseling.org/PublicPolicy/TP/ResourcesForSchoolCounselors/CT2.aspx.

Congress passes SCHIP expansion legislation

Both the House and Senate approved legislation in January to significantly increase spending on the State Children’s Health Insurance Program (SCHIP). After initially passing the House by a 289-139 vote on Jan. 14, the legislation was approved in the Senate by a strong bipartisan majority of 66-32 on Jan. 29. The bill now heads to President Barack Obama, who will sign it into law.

The legislation (H.R. 2) would extend SCHIP through the end of Fiscal Year 2013, covering an additional 4.1 million children who are currently uninsured and continuing coverage for 7 million other children.

Economic recovery package includes infusion of money for education needs

The House of Representatives passed H.R. 1, the American Recovery and Reinvestment Act of 2009, by a vote of 244-188 on Jan. 28. The bill, an unprecedented effort to stimulate the economy, calls for $825 billion in increased spending and tax reductions over 10 years. Although spending on infrastructure development and tax cuts have garnered most of the attention, the legislation also includes a historic $120 billion in funding for several key education programs, including:

- $13 billion for Title I
- $20 billion for school construction
- $2.1 billion for Head Start and Early Head Start
- $2 billion for the Child Care Development Block Grant
- $1 billion for education technology
- $66 million for the Education of Homeless Children and Youth program
- $300 million for improving teacher quality

Additionally, the American Recovery and Reinvestment Act will include a two-year, $79 billion State Fiscal Stabilization Fund. It will require states to use at least 61 percent of the money received to support elementary, secondary and postsecondary education, and up to 39 percent for public safety and other government services, including education assistance.

H.R. 1 would extend the current moratorium on controversial Medicaid regulations to Oct. 1. These regulations, issued by the Bush administration last year, seek to eliminate reimbursement for administrative claiming and transportation costs for school-based and early intervention services; restrict the scope of case management services and targeted case management; restrict the scope of rehabilitation services eligible for federal Medicaid matching payments; and eliminate coverage for day rehabilitation services for people with developmental disabilities.

The Senate was scheduled to begin debating its version of the American Recovery and Reinvestment Act on Feb. 2, and a full vote was expected later that week.
ACA testifies in support of bill on counselors’ scope of practice

On Jan. 28, Peter Atlee, legislative representative for ACA, and Beth Powell, the American Mental Health Counselors Association director of public policy and professional issues, testified before the District of Columbia City Council Health Committee in support of B18-34, the Practice of Professional Counseling and Addiction Counseling Amendment Act of 2009.

Sponsored by Health Committee Chair David Catania, the legislation clarifies that Licensed Professional Counselors in Washington, D.C., are qualified to diagnose and treat mental and emotional disorders. Powell and Atlee testified to support the efforts of the District of Columbia Counseling Association and the District of Columbia Mental Health Counselors Association. More than 1,100 LPCs currently practice in the nation’s capital.

The current statute licensing counselors in the district does not include the words “diagnose,” “treat” or “psychotherapy,” although the assessment and treatment of individuals with mental disorders is strongly implied. The changes made by Catania’s legislation will make it clear that LPCs are qualified to provide mental health services to district residents. LPCs in Washington, D.C., meet education and training requirements comparable to those for other master’s-level therapists, including licensed independent social workers and marriage and family therapists, both of which are authorized to diagnose and treat mental disorders under district law.

ACA and AMHCA have been working on this issue in collaboration with DCCA, DCMHCA and the District of Columbia Behavioral Health Association for more than a year. The lack of specificity in the counselor licensure law has been an impediment to Medicaid beneficiaries seeking mental health treatment. We are hopeful that passage of the scope of practice legislation will lead to recognition of LPCs as independent Medicaid mental health service providers, thereby improving consumers’ access to mental health services.

For more information, contact Atlee (800.347.6647 ext. 242; patlee@counseling.org) or Powell (800.326.2642 ext. 105; bpowell@amhca.org). •

ACA call to action - By Scott Barstow

Medicare Coverage of Licensed Professional Counselors

Major Medicare legislation will be enacted this year to avoid a 21 percent cut in physician payment rates that are scheduled to take effect Jan. 1, 2010. Congress will begin working on the legislation soon after completing work on economic stimulus legislation.

The Medicare legislation is expected to call for several billion dollars in reductions in payments to private sector “Medicare Advantage” plans, which cost taxpayers significantly more than regular, government-run, fee-for-service Medicare coverage. Both President Barack Obama and congressional leaders support reining in this spending, which will provide savings for both physician payment rate increases and important benefit improvements such as establishing coverage of Licensed Professional Counselors as mental health service providers.

Counselors are encouraged to contact their representatives and senators and ask them to work to establish Medicare coverage of counselors. Research has shown that one individual contact from a constituent (not form letter or e-mail) carries significantly more weight than a visit from a professional lobbyist! Legislation will be introduced soon in both the House and the Senate, and members of Congress should cosponsor the legislation when this happens.

Who to Contact

Your Senators and Representative
Capitol Switchboard
202.224.3121
senate.gov
house.gov

Suggested Message

“As a constituent, I am calling to ask that the (representative/senator) work to establish Medicare coverage of state-licensed professional counselors as part of the Medicare legislation to be developed by Congress later this year. Both the House and Senate have passed legislation doing this in the last few years, but not yet as part of the same legislation that wound up becoming law. Please work to increase beneficiary access to mental health care by establishing coverage of licensed counselors, including by cosponsoring counselor coverage legislation when it is reintroduced. This updating of Medicare’s benefit package is long overdue and should be addressed before this year ends. Thank you for your consideration.”

ACA Resource

Peter Atlee
800.347.6647 ext. 242
patlee@counseling.org

Internet briefing paper:
counseling.org/publicpolicy

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

ACA Public Policy at the Conference in Charlotte

Public Policy and Legislation Committee Meeting
Saturday, March 21, 1-3 p.m.
Westin Hotel, Grand Ballroom A&B

The committee meeting will include an overview of ACA’s policy work over the past few months and a discussion of upcoming opportunities, challenges and tasks.

Education Session: Legislative Advocacy for Counselors
Sunday, March 22, 2-5:30 p.m.
Convention Center, Room 214

Counselors can have a big impact on state and federal policy issues. Indeed, without counselor involvement, the profession’s policy goals simply won’t be reached. Come find out how to be an effective advocate, what’s happening on Capitol Hill and why your support is so important. •
Counselor Career Stories - By Rebecca Daniel-Burke

Dancing, movement and counseling in the inner city

By	Rebecca	Daniel-Burke

Robyne Davis

During a coffee break at the American Association of State Counseling Boards Conference in Tucson, Ariz., in January, I greeted the very fit-looking woman sitting beside me. As we talked, I learned that she lived in a counseling world of dance. Afterward, as I considered our conversation, I realized I wanted to tell her story.

So, meet Robyne Davis. She possesses a wealth of information on a topic that I knew very little about. Some of her experiences may prove helpful to you as you navigate the terrain of your career path.

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

Robyne Davis: I work at SAIL (School for Arts in Learning) in Washington, D.C., just three blocks from the White House. It is a charter school for kids K-7. Seventy-five percent of the students are from low-income families, and half have learning disabilities. I am the school counselor. I work in a traditional way as a Licensed Professional Counselor, and I work in a less-traditional way with dance/movement therapy. I mix general counseling with mindfulness, honoring the body/mind connection.

RDB: Is there a specific certification for your specialty?

RD: Yes, I am an ADTR. Entry into the profession of dance/movement therapy is at the master's level. The title Dance Therapist Registered (DTR) is granted to entry-level dance/movement therapists who have a master's degree, which includes 700 hours of supervised clinical internship. The advanced level of registry, Academy of Dance Therapist Registered (ADTR), is awarded only after DTRs have completed 3,640 hours of supervised clinical work in an agency, institution or special school, with additional supervision from an ADTR.

RDB: An ADTR and an LPC. That is very impressive.

RD: Thank you. We have really worked hard to help LPCs and the public understand what is required to become an ADTR.

RDB: Give me an example of how you begin working with a child at SAIL.

RD: I do a lot of “Here & Now” work focusing on movement. Some of the children might have boundary issues, for example, and might be bothering other students. I might use something like a hula hoop — have a child stand in the middle and move his or her body without touching other students who are also in hula hoops.

I might be working with a child with ADHD (attention deficit hyperactivity disorder). I can see the excess energy in their body. I may stand beside them and move in a way similar to the child. If their movements are too rapid, I might begin to move more slowly, helping them to breathe and slow their movements.

RDB: How do you provide an assessment?

RD: I use an assessment tool called LMA.

RDB: What is that?

RD: Laban Movement Analysis is a system for understanding, observing, describing and notating all forms of movement. It was devised by Rudolf Laban. LMA draws on Laban’s theories of effort and shape to describe, interpret and document human movement.

RDB: It is far more scientific than I thought. How might you help a child who is using a self-soothing behavior such as sitting and rocking rapidly?

RD: I would sit beside them and move in a way similar to their movements, and then I might begin to slow. Then I might begin to rock from side to side as opposed to back and forth. I would lift my head and try to slowly move out of that closed position. They feel a different pattern in their body at that time. Some call this neuro-mirroring, a way of making a connection on an unconscious level.

RDB: How did your passion for movement and dance evolve?

RD: As a child, I studied ballet, tap, jazz and modern dance. I used to think people were born with different smarts. I had body smarts. I even did clogging, salsa and swing. I was always very kinesthetically oriented.

RDB: What did you study when you attended college?

RD: I have a B.A. in psychology from the University of North Carolina at Chapel Hill. Then I got a master’s in dance/movement therapy from Goucher College in Maryland.

RDB: What were your first professional jobs?

RD: I worked with at-risk youth in a community counseling center in Chicago, with young people at a homeless shelter and at an inpatient psychiatric hospital.

RDB: What lessons did you learn in those environments?

RD: I learned that when you stir up profound feelings, there can be very intense reactions. I was a little too trusting in the beginning. I had to learn to consider safety, particularly when working in the inpatient psychiatric setting.

RDB: Safety can never be minimized. Now let me ask you a question about your early years. Did someone see something special in you early on?
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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 RDanielBurke@counseling.org if you have questions, feedback or suggestions for future columns.

Letters to the editor: ct@counseling.org

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Riding out the economic storm

Q: It appears that the economy is not going to pull out of this downturn anytime in the near future. What impact will a poor economy have on professional counselors in private practice?

A: Just like trying to predict the stock market, no one knows for certain what will happen. There is no crystal ball to determine when things are going to improve, and it could get worse before it gets better. However, professional counselors in private practice may not feel the impact as much as other professionals. Our personal practices have seen little or no significant downturn in the past 12 months.

The December issue of Psychotherapy Finances reported that of 74 respondents to a questionnaire about the effect of the economy, 43 percent indicated that “their income was trending lower.” However, 62 percent indicated that they were seeing the same number of clients or more. There was little or no increase in self-pay clients. That is one of the reasons we have long advocated in this column to partner with insurance and managed care companies to increase your payer mix.

So, it would appear that the majority of professional counselors in private practice are indeed riding the storm out rather than heading for the exits. While now may be the time to closely investigate office expenses, it may also be the time to increase marketing. (This is similar to the advice you sometimes hear about investing in the stock market: When stocks are down, it may represent a prime buying opportunity!)

Possible ideas for expanding your marketing efforts include giving speeches and workshops, creating a newsletter, getting or updating a website, forming a Listserv, networking with colleagues, sending letters and brochures to referral sources, hiring a part-time office manager, reviewing all print material, joining division and state professional organizations, joining web-based counseling referral sites, personally visiting present and prospective referral sources, applying for paneling to additional insurance and managed health care companies, getting on the Council for Affordable Quality Healthcare (through AETNA) or forming a support group. Sometimes we need to head toward the roar.

Q: You previously listed Impact Publishers as a place to get prepared presentations and seminar materials. However, when I go to the website, it seems that they exclusively publish books. In addition, you listed American Guidance Services. The information I have found on them is for addressing school problems with children. Can you provide any more direction in finding the materials you referenced?

A: One of the best ways to build your practice, get your name into the community and market your counseling specialty is to use public speaking. A great way to start is by presenting seminars or workshops. Counselors can develop presentations fitted to their particular niche. These presentations can be of almost any length, from one-hour seminars provided to community groups to classes for schools, churches or even doctors offices that run for several weeks.

There are also many excellent prepared programs such as the six-week S.T.E.P. (Systematic Training in Effective Parenting) or T.I.M.E. (Training in Marriage Enrichment) programs. Following is a list of seminars, books and programs that can be helpful in building your practice. Because you can offer these seminars or programs for free or very little cost, they are also a service to your community. We’ve found that many attendees will want to follow up with private counseling, so have your appointment book at the ready to schedule them. “The 8-Step Method for Starting or Expanding a Private Practice” is available on the “Private Practice Pointers” section of the American Counseling Association website at counseling.org (see “Starting a Private Practice”) and in The Complete Guide to Private Practice for Licensed Mental Health Professionals (counseling-privatepractice.com).

- The Parent’s Handbook (impactpublishers.com/books/tp.hn)
- Training in Marriage Enrichment Kit (cmtipress.com/time.htm)
- Calming the Family Storm (impactpublishers.com/books/Calming_the_Family_Storm.html)
- Anger Management Video Program (impactpublishers.com/books/Anger_Management_DVD.html)
- Loving Choices Workbook (impactpublishers.com/books/lcw.html)
- “Rebuilding” Divorce Seminars (rebuilding.org/rebuilding-locations.htm)
- A Manual for Assertiveness Training (impactpublishers.com/books/mat.html)
- Master Your Panic and Take Back Your Life (impactpublishers.com/books/myp3.html)
- Sex, Drugs, Gambling and Chocolate: A Workbook for Overcoming Addictions (impactpublishers.com/books/sdg2.html)
- The Stress Owner’s Manual (impactpublishers.com/books/som2.html)
- Cool Cats, Calm Kids: Relaxation and Stress Management for Young People (impactpublishers.com/books/cc.html)

John Gray (Mars and Venus) materials (marsvenus.com/xcart/product.php?productid=155)

Find the important new ACA bulletin “Transfer Plan — Counselor Incapacitation or Termination of Practice” in the “Private Practice Pointers” section of the ACA website.

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.”

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.

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

A valuable new resource is now available: The Professional Counselor’s Desk Reference (Springer Publishing), edited by Irmo Marini and Mark Stebnicki. The book features chapters by 95 leading experts in professional counseling, including many ACA leaders and members. Be sure to check out Chapters 5 and 8, coauthored by yours truly.

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
Sexual Boundary Violations: Therapeutic, Supervisory and Academic Contexts

Andrea Celenza has written a comprehensive volume dealing with a tragic, delicate and, as she states, taboo topic: sexual violation of clients. While her book details the etiology of sexual boundary transgressions, as well as the treatment, supervision and educational issues, the compelling theme is one of compassion. Although she insists that the transgressor (most often male) never be excused for his behavior, her discussion of the transgressive process makes it abundantly clear that the majority of sexual boundary transgressors are not of the predatory variety, but rather one-time violators. In establishing this point as the contextualized basis for her discussion, Celenza provides readers both with a sense of the conditions in which sexual boundary violations occur and the therapeutic context in which a “narcissistically needy” therapist runs afoul of his ability to deal with the client’s countertransference issues.

Celenza has worked extensively within the field of sexual boundary violations and has wide experience with therapists who have been ordered into treatment for violations. Her book is a comprehensive road map for the etiology of the sexual boundary violation, including a self-administered scale she has developed that allows for the assessment of risk factors for sexual boundary violations. The use and review of the scale also serves as an excellent entry into discussions of the issue of sexual boundary violations.

While the entire volume is highly readable and relevant in a number of contexts, including teaching and training, Chapter 2, “This Couldn’t Happen to Me,” is pivotal in making Celenza’s case that all therapists, educators, clergy (a group she cites as particularly at risk for violations), supervisors and others in the helping professions are at risk for committing sexual boundary violations. Her straightforward treatment of the characteristics of these boundary violations, and the characteristics of the violators, makes it evident that there is indeed a fine line between those who violate sexually and those who are able to maintain appropriate boundaries in a highly charged countertransference context. “In what follows,” she writes, “I emphasize and elaborate the internal experience of the therapist, since the primary purpose of this book is to identify pitfalls, vulnerabilities, stress points and warning signs for all mental health professionals, academics and clergy.”

This book has many strengths, not the least of which is the author’s erudition. Of specific merit are the composite case studies Celenza uses to illustrate the sequence of violation, treatment and subsequent supervision of the sexual boundary transgressor. In particular, the author provides detailed presentations of the therapeutic contexts, issues in therapy and treatment progress reports that would be extremely helpful to those who would serve as therapists and supervisors or those who have transgressed and been (or may be) reinstated. In fact, the comprehensive nature of the volume makes it extremely difficult to provide a succinct review of the wealth of material the author includes.

Established in both research and practice, Celenza has produced an important and highly accessible work that should be reviewed and utilized by members of the helping professions, in particular those involved in the education and training of future counselors and therapists.

Reviewed by Steven M. Hoover, professor and chair, counselor education and educational psychology, St. Cloud State University.

Ambivalence in Psychotherapy: Facilitating Readiness to Change

Facing the problem of change in psychotherapy is the complex topic of this valuable book. People enter therapy to change something, whether behavior, beliefs, relationships or their approach to living. In Ambivalence in Psychotherapy, David Engle and Hal Arkowitz address the perplexing phenomenon that all therapists face in their work with clients: Why do people pay money for help in making changes and then resist making the changes they seek?

The first two chapters provide a theoretical overview of the nature of ambivalence. Drawing on various theories, the authors survey conceptualizations that have sought to explain the phenomenon of ambivalence. When therapists seek to describe ambivalence, the notion of resistance often comes into play. Engle and Arkowitz discuss the subtle distinctions between ambivalence and resistance.

Once the authors lay the theoretical groundwork, they then provide an integrative model of ambivalence that draws on cognitive behavioral therapy and humanistic approaches. Additionally, their model integrates the stages of change delineated by James O. Prochaska and John C. Norcross as well as motivational interviewing. The integration of cognitive behavioral therapy and humanistic psychotherapy allows both approaches to enhance what the other may lack. While humanistic approaches seek to be present with the client without an emphasis on technology of change, cognitive behavioral approaches strongly employ a technology of change through a myriad of techniques.

According to the authors, before clients...
can fully benefit from a theoretical approach that emphasizes a technology of change, therapists must assess these clients’ readiness to change. If therapists do not have some conceptualization regarding ambivalence in psychotherapy, then their techniques will lead to frustration. Consequently, ambivalence and readiness to change should become a focus of discussion in therapy. Therapists also need an efficient assessment of readiness to change.

On the other hand, humanistic approaches, while emphasizing process work in therapy, tend to ignore the place of technology of change in helping clients make the desired changes for which they seek therapy. Hence, the authors provide an integrative model of the two therapeutic approaches.

Engle and Arkowitz offer some invaluable insights and tools for working with clients who face difficulties in making desired changes in their lives. Therapists will glean some good techniques for assessing ambivalence, and the chapters on the “two-chair technique” provide interesting applications for working with clients. The authors also demonstrate their use of motivational interviewing and its application to working with clients who experience ambivalence. The final chapter provides an extended case example and session-by-session explanations. Although the opening chapters discuss theoretical comparisons, the authors also provide an outlined appendix comparing theoretical conceptualizations of ambivalence.

In their opening acknowledgements, Engle and Arkowitz cite Leslie Greenberg as a major influence on their work, in addition to Carl Rogers. This text most definitely draws on the process work of Greenberg and seeks to integrate cognitive behavioral therapy and humanistic psychology.

Reviewed by John V. Jones Jr., associate professor and director of clinical services, St. Edwards University (Texas).

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
Interviews with the authors of books for counseling professionals

**Career Counseling: Contexts, Processes and Techniques, Third Edition,** by Norman C. Gysbers, Mary J. Heppner and Joseph A. Johnston

Today’s environment of economic upheaval and rampant employment insecurity has made career counseling an even more important segment of the counseling profession. In the past, career counseling was sometimes associated with following a standard or rote procedure, but modern career counseling has evolved into a dynamic, creative and highly individualized process.

*Career Counseling: Contexts, Processes and Techniques* provides a practice-focused approach to career counseling that can help counselors better understand and utilize the traditional and postmodern career theories and approaches necessary for successful work with today’s clients. This newly revised third edition helps provide a focus on 21st-century needs, the changing demands of the workplace and the ever-increasing diversity of today’s workforce.

Norman C. Gysbers is a curators’ professor in the Department of Educational, School and Counseling Psychology at the University of Missouri-Columbia. The author of numerous articles, book chapters and books, he has long focused his research and teaching interests in the areas of career development, career counseling and school guidance. A past president of both the American Career Association and the National Career Development Association, he served as editor of the *Journal of Career Development* for more than 25 years and has received numerous awards for his work in career counseling, school guidance and teaching.

Mary J. Heppner is a professor of counseling psychology at the University of Missouri and associate director of the University Career Center. She has coauthored or contributed to several books in the career counseling field and has written extensively on women’s career development and adult career transitions. A Fulbright scholar and a fellow in the Society of Counseling Psychology of the American Psychological Association, she has won several awards in the areas of teaching and career development. She is author of the *Career Transitions Inventory* and coauthor of the *Career Counseling Self-Efficacy Scale*.

Joseph A. Johnston is a professor in the Department of Educational, School and Counseling Psychology at the University of Missouri, as well as director of the University Career Center. He is a founder of the Wakonse Foundation, which helps to improve college teaching, and initiated the A Way With Words literacy program and tutoring program as well as the Jumpstart program at the University of Missouri. He serves on the Editorial Board of the *Journal of Career Development* and has received numerous awards for his work in career development and education.

**Counseling Today:** Have current economic problems changed the role career counselors must fulfill?

**Mary Heppner:** The current economic crisis is intensifying the importance of career counseling. We’ve seen unprecedented numbers of people losing their jobs and needing assistance. Not since World War II have we seen this level of job loss. Many of these individuals never thought they would be laid off. Today, the skills of a professional career counselor are critical to help such individuals assess their strengths and consider the next steps to take.

**CT:** What are some of the areas your book addresses for those working in the career counseling field?

**Norman Gysbers:** This book is a very practical guide to help career counselors understand the context that the client is coming from, the process of career counseling and important techniques to use in that process. All three of these variables are highly important. If a counselor doesn’t understand the context in which the client operates, he or she will be far less effective in providing counseling. Some of the contexts relate to the person’s social class, sexual orientation, race or ethnicity, gender and ability status. Four major chapters of the book address the uniqueness of these contexts.

**Joseph Johnston:** We also felt that the process of career counseling has been largely ignored by the field, which has often represented career counseling as simply a basic task of matching people and environments. That’s a part of the process, but there is much more involved, and in the book, we’ve tried to show the work as a coherent process. Effective techniques are also critical, and the book provides a host of these, from card sorts to genograms, from Life Career Assessments to Holland codes. All of these, and many more, are vital for career counselors to become proficient with and to integrate into their repertoire.

**CT:** Why has “process” been made such an important part of this book?

**MH:** We believe that career counseling is a process and that the heart of that process is building a strong working alliance with each client. While some would practice career counseling in a “test and tell” fashion, we believe that powerful and effective career counseling only occurs in the presence of a strong relationship that acknowledges the psychological/emotional nature of the relationship and treats the client in a holistic fashion, not separating or dichotomizing the person’s life issues.

**CT:** What’s the balance between theory and practice-focused material in this book?

**NG:** We wrote the book to include a description of both foundational theories and newer models and theories because we strongly believe that theory guides action and is the essential scholarly work that makes career counseling the profession it is today. But we also know that this is an applied field, and career counselors need all the help they can get with empirically based tools and techniques to use with clients. In that sense, it is a highly practical book as well.

**CT:** Who are the primary audiences for this book?

**JJ:** It’s aimed at practicing counselors in many different settings: career counselors, students in foundational or advanced career counseling classes, professionals working in business and industrial settings, outplace-
ment and employee assistance facilities. We see it as essential for new professionals and a course of renewal for experienced professionals. Previous editions of this text have been translated into Mandarin, Korean, Italian and Japanese, and we expect the same with this text so it can be used cross-nationally.

CT: What are the major changes between this book and the second edition?

NG: This was an exciting revision from the second edition because so much new information has come into the picture. Specifically, the chapters on men, women, racial ethnic minorities, class differences and ability/disability differences are all completely updated. In addition, there is a stronger overall focus on social justice and the critical role career counselors play in this important mission. We have expanded the chapter on understanding career behavior to provide an overview of the evolution of career theory building as well as coverage of postmodern approaches to career development, including constructivism and social constructionism. We focus a lot more on positive psychology and introduce readers to Strength Quests and the Insight Inventory, both of which we think hold a great deal of promise when integrated into the career planning process.

CT: Is there one primary lesson you’d like a counselor to take from this book?

MH: That career counseling is a highly creative and highly individual process that must be built on a strong working alliance and that needs to be conducted by a counselor who is proficient in understanding the unique contexts of the client, the holistic process of career counseling itself and the most effective techniques we have available to help with that process.

Career Counseling: Contexts, Processes, and Techniques, Third Edition (Order #72881) can be ordered directly through the ACA online bookstore at counseling.org/Publications or by calling the ACA order line at 800.422.2648 ext. 222. The cost is $45.95 for ACA members and $64.95 for nonmembers.

American Counseling Association
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As an instructor, I am delighted to see a text that is adaptable to beginning and advanced career counseling contexts, that addresses contemporary work issues and challenges, and that attends to the concerns and strengths of diverse clients. This is a book to keep on the shelf in the career counseling office long after class is over for quick reference to concepts, options, and strategies.”

—Ellen Hawley McWhirter, PhD
University of Oregon
Addressing empty pockets

Counselors have always been faced with assisting clients through tough emotional times, but with the turn in the economy, counselors are now also trying to address the troubles that arise from financial turmoil. With businesses closing and workforce reductions, clients are having their work hours cut, or worse, losing their jobs. To add to the complications of a personal financial crisis, many Americans’ personal savings rates have decreased dramatically. In 1985, Americans saved 11 percent of their disposable income on average. In 2005, after years of a downward trend, Americans crossed the line into a negative savings rate, spending more than they brought in. Faced with the current financial crisis, most Americans have little or no usable savings with which to work.

In addition to personal financial crisis tied to job loss, severe illness or losses to savings, the cost of consumer goods continues to increase. We see it in the cost of food, gas, transportation and other goods necessary for living. This type of financial pressure may add significantly to personal or family emotional distress. The Bureau of Labor Statistics has a database website for the Consumer Price Index (CPI) that illustrates the change in prices.

On the CPI database portion of the site, you can find the average price data for consumer goods such as eggs, milk, bread, gasoline, electricity and ground beef. You can select monthly date ranges and generate graphs that indicate the trends in expenses for consumers.

- Consumer Price Index: bls.gov/cpi/home.htm

Budget/debt counseling

Based on my experience working with a Family Service agency and later with an independent employee assistance program (EAP), the value of a certified consumer credit counseling agency is extraordinary asset to counselors and their clients. While working with the EAP, our financial counselor took maternity leave and I was asked to fill in for a month or two and help clients to get debt counseling. Having to support clients in that process was an eye-opener for my own spending habits and management of funds. I relied heavily on our local Consumer Credit Counseling agency.

Consumer Credit Counseling agencies first provide the client with a snapshot of their expenses versus income. Taking a close look at your income and then seeing where all the money goes can be the toughest part for clients trying to make adjustments to their financial situation. It often means making some tough personal choices.

The National Foundation for Credit Counseling (most commonly known as Consumer Credit Counseling Services) is an umbrella organization for local agencies that provide credit counseling services to clients. Member agencies have counselors who provide client families with advice on money management and help them gain control of their current financial problems. Clients can develop a newly scaled financial plan to be able to live within their means.

- National Foundation for Credit Counseling: nfcc.org

The NFCC’s affiliated website, DebtAdvice.org, provides basics for clients seeking debt advice. Links on this site provide consumers with tips on saving in tough economic times, paying bills on time, teaching kids financial skills, making the most of a tax refund and basic principles of saving. The site’s “Credit 101” section provides information on getting a credit report and provides a budget and debt test that clients can take.

Developing a household budget

Most consumer counseling should be left to professionals who are trained and experienced in this area. No one can ask the right questions and find the holes in your projected spending habits quite like a professional credit counselor. But you can give your clients a jumpstart on the process by having them start to develop a budget. This exercise alone may convince them to get additional professional credit counseling. If getting a grasp of their current budget and spending habits is your clients’ first goal, the Internet provides many free or low-cost options for budget preparation software.

An online version for developing a budget is available at:

- Instant Budget 101: cgi.money.cnn.com/tools/instantbudget/instantbudget_101.jsp

Free PC software for budgeting is available at:

- SimplyD Budget: dsdbudget.sourceforge.net
- Budget Tracker: ducksoftware.com/budgettracker.html
- BasicBudget: cs.uow.ac.z/Projects/BasicBudget/BasicBudget.html
- The Data Furnace Budget: datafurnace.net.au/dfdbudget/html/download.html

Free Mac software for budgeting is available at:

- Buddi: buddi.thecave.homenux.org/en/download.jsp

For those clients without computers, here’s a good worksheet from DebtAdvice.org.

- Monthly budget/debt planner: debtadvice.org/Credit101/budget_debt_us.pdf

Mortgage issues

Homeowners have faced incredible problems in the last few months with mortgage foreclosures. The NFCC provides online resources to help homeowners assess their particular mortgage situation. These resources include ways to avoid foreclosure, an online quiz to see if you are at risk of losing your mortgage and information on preventing foreclosure rescue scams.

- Homeowner Crisis Resource Center: housinghelpnow.org

General financial information

Perhaps those you are counseling have managed to keep their heads above water in the rising financial tide. What they need are ideas for managing their personal finances in a better way. Whether it is making a budget, controlling debt, buying a home or car, or addressing health insurance needs, clients can tap into a variety of online resources.

For a general, comprehensive financial overview, the CNNMoney.com website has a broad selection of tips. For client and user friendliness, the Money101 series is a good start.
Another excellent general resource on money management is the Community Action Partnership and the National Endowment for Financial Education’s website at managingmymoney.com. The site has sections on “Turning Your Dreams Into Goals,” “Managing Your Money” and “Employment ABCs” as well as a large list of tip sheets and worksheets for financial activities.

Managing My Money:
managingmymoney.com

The next generation
The global financial crisis brings to light the kind of financial environment we will be leaving our children. Tips for teaching your children about financial responsibility are also available online. Topics at FamilyEducation.com include teaching your child about what things cost, giving teens money and age-appropriate financial understanding.

Ways to Teach Kids About Money:
life.familyeducation.com/money-and-kids/personal-finance/34481.html

MoneyInstructor.com covers similar topics. The site also features grade-level breakdowns for teaching money skills, games about money and money management for kids and information on how parents can use allowances to teach their children about money.

Kids and Money:
moneyinstructor.com/kids.asp

If counselors have these financial management resources available for their clients (and possibly themselves, too), we might all be a little richer for the experience.

You can find these links as well as add to them by commenting at The Digital Psyway weblog at digitalpsyway.net.

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

Counseling Multiple Heritage Individuals, Couples, and Families

“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. Top 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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counseling.org
Like many Americans, I am excited about the new era ushered in by the inauguration of President Barack Obama, but I am also very mindful of the severity of the current economic crisis, the many military and political conflicts going on around the world and the challenges facing our health care system.

Consequently, I was pleased to find research in the current counseling literature that related to current conditions in our world and that reported findings which can be applied by practitioners to help those they serve. These studies are excellent examples of how research can inform practice.

Gender and job loss

Increasing unemployment has frequently made the headlines in recent months, and career counselors as well as other counselors are likely to see more clients whose issues are related to actual or feared unemployment. I was interested in the possible gender differences in response to job loss described in the study by Kevin C. Wooten and Alix M. Valenti (“The Questionable Impact of Gender on Job Loss Reactions: Implications for Employment Counseling”) in the December 2008 issue of the Journal of Employment Counseling.

Wooten and Valenti studied 301 men and 118 women who had recently seen their jobs terminated and were now clients of a national firm that assists unemployed individuals in finding new positions. The participants were largely white and well-educated, with previous salaries averaging $60,000 and with an average of nine years in the positions they had lost.

The researchers investigated affective reactions to the job loss and attributions about the job loss. They controlled for eight demographic and contextual variables. The important finding is that 90 percent of the significant gender differences disappeared when the demographic variables were taken into account. Differences on anger expression were evident until all of the covariates were entered simultaneously.

Given their findings, these researchers suggest that gender-specific employment programs are unnecessary, and using gender-specific paradigms for retraining may deprive both genders of important components. The fact that the studies (conducted in Australia) examined the theory and measures in the context of school employees added to the interest for me, because I spent 30 years working in schools before entering academia.

Workplace motivation and engagement

The January 2009 issue of Measurement and Evaluation in Counseling and Development includes an article by Andrew J. Martin, “Motivation and Engagement in the Workplace: Examining a Multidimensional Framework and Instrument From a Measurement and Evaluation Perspective,” that informs us about essential components of workplace performance. Although the primary purpose of the studies relates to instrument validation, the theory in which the instruments are embedded offers a way to think about workplace involvement that I found very useful. The fact that the studies (conducted in Australia) examined the theory and measures in the context of school employees added to the interest for me, because I spent 30 years working in schools before entering academia.

The measure, based on the Motivation and Engagement Wheel developed by the author, incorporates and integrates concepts from other well-known models (including those by Albert Bandura and Abraham Maslow, for example). The
wheel includes four quadrants: Adaptive Cognitions, Adaptive Behaviors, Maladaptive Behaviors and Impeding/Maladaptive Cognitions. The studies reported in the article provide strong evidence of factorial invariance of the measure, which means the measure can be used across genders, work settings (school level, in this case) and career stages.

I found it interesting that gender differences appeared in a number of the motivation components. Females tended to have more adaptive patterns of motivation and engagement in work and were less likely to exhibit uncertain control, self-handicapping cognitions and disengagement. As expected, later-career school workers showed more adaptive patterns of motivation and engagement than their earlier-career counterparts. Another intriguing finding was that men who worked in elementary schools showed higher self-efficacy as their career experience increased, but women and men in high school did not increase self-efficacy with time spent in their career.

With its focus on employment and knowledge of the elements that contribute to more adaptive styles of motivation and engagement, this study could have important implications for career counselors and supervisors. Many of us who work in the field are aware of the high stress and anxiety that appear endemic to education at this critical time. This theoretical perspective, with an accompanying measure that is psychometrically sound, could be applied to programs that enhance and support motivation and engagement by education professionals. As budget reductions force layoffs, helping those school employees who remain to sustain their motivation and engagement — for their own benefit as well as that of their students — could be invaluable. For those who must find new work — or even new careers outside of education — understanding their motivation and engagement style could lead to more gratifying work in the future. Career counselors will find many practical applications of this well-designed and executed empirical study.

**Identifying children's fears**

The current world situation is frightening to many adults, and children are not unaware of these events and situations. Joy J. Burnham's study, "Contemporary Fears of Children and Adolescents: Coping and Resiliency in the 21st Century," described in the Winter 2009 issue of the Journal of Counseling & Development, took a fresh look at the fears of children post-9/11.

Although children's fears have been studied and reported since 1897, the nature of recent global events, the increase in media availability and ongoing societal changes all suggested a need for the research to be updated. The sample from 23 schools in the Southeast included 1,033 students in grades 2 through 12 and was racially and culturally diverse. The Fear Survey Schedule — American version was modified in 1995, and the author was interested in updating the scale to more accurately reflect current issues.

Many of the fears identified by participants were similar to those in the 1995 study. Of the existing categories, fears of terrorist attacks ranked 11th, having to fight in a war ranked 13th, drive-by shootings ranked 15th, other shootings ranked 17th and tornados/hurricanes ranked 18th. Interestingly, parents losing their jobs ranked 41st, while being poor ranked 38th. These data were collected in 2004, leaving one to wonder whether some of these rankings would be different in today's environment.

In the optional comments, snipers at school, failing at school and teachers emerged as new categories. Burnham suggests the findings have important implications for school counselors, who need more training and resources to respond to children's varied 21st-century concerns. The author also suggests that school counselors should adopt strategies that foster resiliency in students so they will be able to deal more effectively with the fears and crises being played out on the world stage.

**Treating soldiers' suicidal ideation**

Finally, I will briefly comment on an article in the January 2009 issue of the Journal of Mental Health Counseling: “Understanding Suicidal Behavior in the Military: An Evaluation of Joiner's Interpersonal-Psychological Theory of Suicidal Behavior in Two Case Studies of Active Duty Post-Deployers” by Michael D. Anestis, Craig J. Bryan, Michelle M. Cornette and Thomas E. Joiner. The news media have drawn attention to the psychological impact of service in combat zones, including an increased rate of suicide. This article, drawn from two case studies, describes a theoretical framework based on three variables that must be present for an individual to commit suicide: thwarted belongingness, perceived burdensomeness and an acquired capacity for suicide.

This theory suggests — and the case studies illustrate — that the habituation to fear and pain that is often part of combat deployments generates the third variable. Thus, clinicians should focus their treatment on the first two, using cognitive behavioral strategies to increase the veterans' sense of belongingness and decrease their perceived burdensomeness. This is important to clinicians in civilian settings, as the two case studies demonstrate that while the suicidal ideation initially appeared in the combat setting, the problem escalated upon return to civilian life.

Sheri Bauman is an associate professor and director of the school counseling program in the University of Arizona Department of Educational Psychology. She is the editor of the Journal for Specialists in Group Work and the author of Essential Topics for the Helping Professional. Contact her at sherib@u.arizona.edu.

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Letters to the editor: ct@counseling.org
Counseling in a time of economic upheaval

How ACA members are responding to the fears and uncertainty surrounding the current economic crisis

By Jonathan Rollins

The numbers keep rolling in, and they all point to the same conclusion: The economy is down, and feelings of fear, panic and disillusionment are way, way up.

- A report released by ComPsych in October found that 92 percent of respondents are losing sleep over economic worries.

- A December “financial crisis” study by global market information group TNS found that one-third of Americans fear losing their jobs, and 11 percent fear losing their homes; only 18 percent of respondents still believe the economic crisis will have “no direct effect” on their personal situation.

- In comparison with October 2007, calls to the National Domestic Violence Hotline rose 18 percent in October 2008 (after the stock market took a major dive). Various reports have also noted that calls to suicide hotlines have increased dramatically since the onset of the recession.

- In its sixth annual State of the Dream report released on Martin Luther King Jr. Day, the advocacy group United for a Fair Economy stated: “While the general population has been in recession for one year, people of color have been in recession for five years. By definition, a long-term recession is a depression.”

- In a USA Today article published in early February, an Illinois psychologist was quoted as saying she had never in her 22 years of practice witnessed the level of anxiety and depression now being exhibited by clients. She went on to state that the “mental health fallout (from current economic woes) has been far worse than after 9/11.”

The question for counselors, of course, is what role they can play in helping clients, even as counselors deal with their own anxieties over the potential economic fallout. Eight American Counseling Association members agreed to talk about the impact the economy is having on them and their clients. They didn’t pass themselves off as “experts” with neat and tidy solutions to their clients’ problems; rather, they honestly recounted the struggles they are facing and the strategies they are using to try and make a difference in clients’ lives during these uncertain times.

Although each presented a unique perspective on how to approach the economic crisis, they all agreed that counselors have a very important role to fill and that the profession must do a better job of making the public aware of exactly how counselors can be of service. Two areas in particular received repeated mention when these ACA members talked about ways that counselors can provide the most assistance: client career issues (not just limited to finding a new job) and helping clients cope with anxiety and stress.

Coincidentally, in January, Yahoo! HotJobs named counseling and career counseling as two of its “10 Hot Professions for 2009,” primarily because of the way the economy is affecting people. Yahoo! predicted counselors and career counselors would be in high demand for their expertise in helping people to reengineer their careers, rebuild their self-esteem and self-confidence and improve their mental health.

Nina K. Flowers
Promoting client strengths, imagery and networking

Nina K. Flowers has a client who originally came in for counseling because her boyfriend was not being good to her. The client recently told Flowers, who is coun-
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door in medical buildings, leaving my business cards, chocolate prescription bars and chocolate Band-Aids for the staffs. At Thanksgiving, I have a basket professionally made for the doctors who refer to me, and I add one or two new doctors each year. … I also met a doctor at a chamber breakfast whom I called for a one-on-one meeting. He now gives me the most leads among all the doctors.”

Chris Tuell
Examining the impact on identity and families

From Chris Tuell’s viewpoint, counselors should take an ecological approach when examining the impact the economy is having on clients. “That means looking at the various systems within that person’s life,” he says. “How does this situation with the economy affect the person’s belief system, culture, family, job and so on?”

Tuell gets a glimpse of these various elements in his work at Family Service of the Cincinnati Area, an agency founded in 1879 that provides a variety of services, including clinical counseling. In addition to running groups and seeing clients, he serves as director of the organization’s EARN (Employee Assistance Resource Network) program. Tuell identifies two areas in particular where the economy is taking a dramatic toll: jobs/careers and family units.

Tuell has visited a number of companies that are downsizing and asking employee assistance programs (EAPs) to provide help. “Many of these people have been at their companies for years,” he says, “so it’s like a family to them. It’s a major loss in their lives.” But, Tuell points out, even as growing numbers of employees are losing their jobs or feeling burdened by the stress of job insecurity, many companies are looking to eliminate EAPs in hopes of saving a little money in the short run.

Given the current realities, counselors searching for effective avenues to help clients don’t need to look very far, Tuell says. “This economic climate gives us the chance to revisit the roots of our field — career counseling,” he says. This is particularly important right now, he notes, because so many people’s identities are wrapped up in their work, and when they lose their jobs, they oftentimes feel a corresponding loss of control and purpose in their lives.

These issues of identity and meaning commonly spill over into family life as well, Tuell says. “For some families, the way their system is structured at home, the male might see himself as the breadwinner. Without a job, his identity is now in jeopardy. He might translate that as being a failure.”

And, of course, Tuell says, even in the best of times, financial issues are one of the chief reasons behind marital discord. “The state of the economy today is going to make that issue even larger,” he says. “Some couples certainly see the economic realities as the final straw in their relationship.”

One challenge for counselors trying to help clients deal with stresses and problems related to the economy, Tuell says, is coming up with a plan that makes people feel they are still moving forward despite their circumstances. “Clients facing economic struggles can become stagnant and defeated,” he emphasizes.

Counselors also need to be aware of the influence that process addictions (including gambling, surfing the Internet, shopping or sexual activity) and substance abuse can have in exacerbating clients’ conditions and making them unproductive. “It’s easy to escape into that (addiction) and alter one’s mood instead of connecting with the real world,” says Tuell, an adjunct professor in addiction studies at the University of Cincinnati. “As counselors, we need to help them with better ways of coping and get them to talk about what they are going through.” One effective coping technique involves prompting clients to stay in contact with their support system of family and friends, he says.

Counselors should also let clients know they are not alone in the challenges they are facing and validate what is happening to them, Tuell says. “We also need to encourage clients to be aware that change can be good. This might open up opportunities for new things. Some people come out of challenges stronger than they were before. Giving a sense of hope to clients is essential.”

Of course, providing this sense of hope is even tougher during tough economic times. “People are seeking treatment, but the economy influences their attendance and ability to pay,” says Tuell, who adds that some clients
can no longer afford their copays or are spreading their counseling appointments out instead of attending weekly sessions. Other clients are struggling to pay for gas or transportation to get to the agency’s offices. “And as an agency, the challenge for us is to provide services with less money or to find funding in this economy,” he says.

Still, the agency is doing what it can to reach those feeling the economic crunch in their day-to-day existence. For example, one of the agency’s programs provides employee assistance-type services, including anger management, assertiveness training and résumé writing, to low-income workers. Another program offers in-home clinical counseling to low-income clients who can’t afford or don’t have reliable transportation. “It’s a different model than 10 years ago, when everybody came into the office,” Tuell says.

In fact, Tuell is a proponent of counselors and other helping professionals getting out of their offices, especially in economically difficult times, to provide outreach and education — and to learn how to better meet the needs of people. “If we’re working in our silos, we’re not really seeing some of the things that can augment the services we’re providing,” he says. “Getting out into the community as counselors is a good thing.”

Patty Katzfey
Reclaiming counseling’s career focus

Patty Katzfey graduated in December with a master’s degree in community counseling (career emphasis) from the University of Missouri-St. Louis. While recent graduates in all career fields are concerned by the limited opportunities in the current job market, Katzfey remains excited by the possibilities.

“Personally, I feel like the economic situation is going to create real opportunities for counselors who understand what is happening and how to serve different populations,” says Katzfey, who will be working part time in the career center at Washington University as well as with a private group. “I think it’s an important time for counselors to do some self-reflection and see how we can be more instrumental in helping people find promise and empowerment and renewal.”
Katzfey, who also has a master’s in business administration, owned her own business and worked in the corporate world before deciding to become a counselor. “For me, moving into career counseling is a really natural transition,” she says. “It's a way for me to link my experiences to help people who are experiencing some type of career transition and trying to redefine themselves.” As a self-described “corporate wife,” Katzfey had to modify her career path each time she and her husband moved. “That experience alone was so impactful to me,” she says. “It made me think a lot about career stuff — moving away from family, having children and how that affected my adaptability and career. I know from my own experience that career transition is an emotional and fearful period."

Based on her experiences, Katzfey believes she has a good understanding of what people who have lost jobs or are facing job insecurity in this economy are going through. “I have some idea of how people are responding emotionally to change, and that includes feelings of fear and grief,” she says. “Counselors really have to assess how that sense of grief and concern is affecting clients. If we don’t, I think people will just spin their wheels. It may be that anxiety and depression are there. Let’s put that on the table and deal with it, and then lift that fog and look at the opportunities clients still have.”

Katzfey also believes counselors need to step up and let people know what a valuable resource the counseling profession can be during tough economic times. “I’m running into people all the time who have concerns about their careers and the economy,” she says. “They’re very uneasy, and they don’t know where to reach out. Counselors have to get out in the community and educate people about what we do and how we can help — how we can be facilitators and help clients draw out their strengths.”

The emergence of career coaches has muddied the waters a bit for clients who have both employment and emotional needs in times of economic stress, Katzfey says. “I think people are fearful and just want to get their résumé out and get back on track instead of dealing with what’s really going on in their lives,” she says. “Clients come with more stuff in those sessions than coaches can address. I think a good counselor will say, ‘Where do you want to start?’ and let the client drive the process.”

Likewise, Katzfey says, counselors have to be careful not to overstep their bounds during these tough economic times. “Counselors need to understand their capabilities in serving clients with career issues — the ethics of trying to provide services when they may not have the professional background,” she says. “We don’t want to turn any business away, and there is sometimes that feeling that we can do everything, even when we really can’t.” She urges counselors who aren’t genuinely qualified to handle career issues to refer clients or to partner with others in working with those clients.

While the economic crisis and rampant job loss are currently major sources of fear, Katzfey believes those conditions may eventually serve as motivation to many clients who feel stuck. “Given the circumstances, I think people are going to be more ready for change and ready to put themselves out there a little more.”

**Maddie Blomgren**

**Adapting in private practice**

When Maddie Blomgren started the Anger and Relationship Institute in Princeton, N.J., in 2002, she decided not to take insurance from clients. Her private practice filled such a strong niche — providing counseling specifically for anger and relationship issues — that she never second-guessed her decision until the economy went into a tailspin.

“This is the first time I’ve really had to worry about filling slots since I started,” she says. “In fact, it’s the first time I’ve been without a waiting list. My clients have lost jobs and been downsized, some have lost homes, some have moved because it’s a very expensive area to live in and, of course, some clients have finished their therapy. New inquiries are more likely to go elsewhere to avoid the cost of ‘out-of-network’ fees.

“In our area, the agencies are getting many, many more calls from clients than normal. Private practitioners, we’re all hurting. Even people who take insurance are biting their nails. I’m in a building with all therapists, and we’ve lost many of them.”

Blomgren is 64 and says she was considering scaling back her practice even before the economy got bad. Now she’s thinking about subletting and says she will likely move into a home office within the next year.

In the meantime, she’s taking steps to ease the financial burden on her existing clients and looking for creative ways to draw in new clients. “I have formed cost-effective (therapy) groups, given a reduced fare to clients who are willing to be seen during ‘off hours’ and gone to every-other-week appointments with some weekly clients,” she says.

Upon opening her practice, Blomgren did a lot of public speaking to help build her name recognition and client base. Now, because of the economic downturn, she plans to ramp up her speaking efforts again. She is also advertising again, attempting to have a presence at health fairs and actively contacting women’s organizations and nonprofits to market her practice.

Blomgren is also offering free, nondiagnostic anger and depression screenings. “I’ve done this before, but now I’m really pushing it and advertising it,” she says. “If I can get people to come through the door and start talking with me about their anger, I usually get a pretty good response, and they often become regular clients.”

Blomgren says the economy is having a dramatic effect on many of her clients — and not just related to their ability to pay for counseling. “Clients who are in recovery are slipping,” she says. “Anger that they had been doing pretty well with is suddenly flaring, and it’s very economically related. Normally, they’ll come in and tell me their economic circumstances, so the subject is already out there. I’m doing a lot of anxiety work — anxiety and anger being married, of course.”
To help clients better handle their anxieties related to the economy, Blomgren gives them two CDs that contain relaxation techniques. She also offers hypnotherapy to help certain clients enter a state of deeper relaxation. In addition, she conducts groups for clients with financial stresses, both to reduce their fee for therapy and to help them normalize their struggles.

Blomgren also talks with clients about what they can do outside of therapy to relieve their economic anxieties. “I’m not a financial counselor,” she says, “but I will recommend books on saving and managing money for clients.”

Given the current state of the economy, counselors are facing their own economic pressures and anxieties, Blomgren says, which might mean making some tough ethical decisions along the way. For example, counselors might be tempted to retain clients who aren’t progressing under their care rather than referring them to another helping professional. “But ethically,” she says, “we can’t just keep someone on to pay the bills.”

Sandra Lopez-Baez
Connecting counseling programs and the community

“Stories of people watching their stock portfolios take a nosedive or their retirement savings almost completely disappear have proliferated ever since it became clear the United States was in a recession. There is no question the downward spiraling economy has delivered a stiff punch to the gut of America’s middle class. But harder to find is coverage of what is happening to those people who were living on the edge financially even before the economy took a tumble. It’s probably safe to assume, however, that these individuals are now even more likely to fall through the cracks as funding for social service programs grows tighter and the number of people requiring assistance grows larger.

“At a time like this, there is more demand for counseling, both personal and career. But social services and education are among the first things to get cut,” says Sandra Lopez-Baez, an associate professor and coordinator of the mental health counseling program at the University of Virginia and the Counselors for Social Justice representative to the ACA Governing Council. “Our (counseling) programs have to rise to the occasion and look for creative ways to fund free clinics and training centers to ensure that these services remain available.”

Without these free or low-cost resources, Lopez-Baez worries that the barriers to access services will be too great for those most in need. “In these economic conditions, people will wait until their problems are much more serious before coming to counseling,” she observes. “When they come for services, they are really, really hurting. The current economic conditions increase levels of stress and make people more reactive. The focus goes to short-term rather than long-term planning. People are more depressed, more negative, less productive. You see more despair. That doesn’t make for good mental health.”

Lopez-Baez challenges counseling programs to meet the needs of those who might otherwise fall through the cracks, especially during tough economic times. She believes taking up that challenge will have the reciprocal benefit of grooming the next generation of counselors to champion social justice issues within the profession.

“Counseling programs can look at themselves as community resources, especially for the underserved,” she says. “And in doing so, we should be looking at counseling interns as resources — hidden resources who can help meet needs and fill the gap during this crunch. Doing this awakens in the students a consciousness and awareness for the community and helps them to view themselves not just as students, but as tremendous resources. Activism involves getting the students worried about these underserved populations.”

Lopez-Baez is also a proponent of incorporating service learning projects into counseling courses so students can give something back to communities even as they learn to be better counselors.

Counseling programs can also examine partnership opportunities with community groups, Lopez-Baez says. For example, in her community of Charlottesville, a consortium of churches has joined together to help the homeless during the winter. Each church takes in individuals for several days or a week at a time. Among the services being offered is crisis counseling, provided by supervised interns. “We need to recognize and cultivate the link between our counseling programs and the community,” she says.

Lopez-Baez teaches students (and encourages other counselors) not to dismiss what they can do to help underserved populations, even if the surroundings are imperfect or they are unlikely to see the client again. “As I get to know the client, what I’m trying to assess is what do you need most?” she says. “Can I do a quick career assessment...
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even in the homeless shelter at a church? Connecting them to other community resources is also invaluable, and if it’s a little more personal, that’s even better. For example, “You know what? I know Cindy over at the women’s center …”

Barbara LoFrisco

Starting out in a tough climate

Barbara LoFrisco, a registered mental health counselor intern and a registered marriage and family therapy intern, went into private practice in Tampa, Fla., last April. She rents space at the agency where she interned and still volunteers there to get practicum hours.

She’s lost almost half of her clients since before Christmas. At first, she assumed they were simply busy with the holidays and would return after the new year. “But I have received calls from a few clients saying they can no longer afford counseling,” she says.

LoFrisco, who was a software engineer in corporate America for 20 years before deciding to become a counselor, says she probably still would have gone into private practice even if she had seen the economic storm clouds looming. She remains optimistic she will be able to make her practice viable. “I am somewhat concerned, but I’m also pretty new at this, and people have told me that it takes a year and a half to two years to show a profit. I had been in the black the last couple of months (before the holidays).”

In January, LoFrisco updated the front page of her website (counselorbarb.com) with a box that reads: “Can’t afford counseling?” She then lists several bullet points to entice potential clients, including:

- Having trouble in your relationship? Call and ask about the relationship skills group I am forming this March.
- Untreated mental conditions and/or stress can lengthen treatment time, costing you more money in the long run.
- Improving and maintaining your mental health is an investment in yourself that will pay off for the rest of your life.
- Therapy can help you deal with the additional stress you may feel due to the poor economy.

LoFrisco also offers free initial consultations to clients and is trying to be sensitive to the financial pressures they are facing. “I’m giving clients more tools up front so that they can see progress quicker,” she says. “I also encourage my clients to participate in homework assignments so they can take the therapy home with them and pay less in session. I’m also in the process of putting together the couples communication skills group, which will teach a lot of what I would cover in the individual sessions but for much less money.”

At the same time, LoFrisco is careful not to assume that all clients want or need to talk about economic pressures. “I’ve been waiting for clients to bring it up,” she says. “I don’t want to put something in their heads that isn’t there already. I want to be focused on what they think is important. But if we were having a conversation about stressors, I would probably bring it up in that context.”

But make no mistake, she says, the economy has become an important topic for many clients. “For some, the goal of what they wanted in life has changed because of the economy,” she says. “I have noticed that couples are staying together because of economic reasons, so the focus of individual counseling becomes ‘How do I manage my stress in a bad situation?’ instead of ‘Should I stay in this relationship?’ The counseling becomes ‘What kind of coping mechanisms can you help me with?’ In some instances, that may be a good thing because they have to live through their problems and work them out. Otherwise, they may have been giving up on their marriage too soon.”

One of the ways LoFrisco believes she can help clients is to use a cognitive approach to confront irrational thinking about the economy. “You can’t change the economy,” she says, “but you can change the way you’re thinking about it.” Clients also benefit from being reminded of general coping and stress management skills that are free or low cost, she says, such as taking a walk or calling a friend.

Economic pressures, job loss or job insecurity may also cause clients to question the meaning of their life, LoFrisco says. In these instances, she finds it beneficial to ask clients about their life.

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CounselingToday Quiz – March 2009

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“Hidden in Plain Sight”
1. According to Benton, high functioning alcoholics (HFAs) are diagnosable by the criteria set forth in:
   a. Diagnostic and Statistical Manual of Mental Disorders.
   b. Alcohols Anonymous "Big Book."
   c. Both a and b
   d. None of the above
2. One of the major challenges in counseling HFAs is removing the illusion of ___ that they have, says Aissen.
   a. success
   b. control
   c. power
   d. wellness

“Reader Viewpoint”
3. Kübler-Ross’ stage theory of grief was ___
   a. True
   b. False
4. The word "stage" implies that ___ is a component in grief.
   a. time
   b. chronology
   c. predictability
   d. development
5. The three guiding principles of career counseling include all of the following EXCEPT:
   a. understanding the unique context of the client.
   b. effective techniques.
   c. holistic process.
   d. reflective practices.

“Behind the Book”
6. When Davis moves in a way similar to a child:
   a. it connects them on an unconscious level.
   b. it may be called neuro-mirroring.
   c. a change in her motion allows the child to feel a different pattern in his or her body.
   d. All of the above
7. What hero inspires Davis?
   a. Carl Jung
   b. Merce Cunningham
   c. Jackson Pollack
   d. All of the above
8. In general, professional counselors in private practice have seen little or no significant downturn in the past 12 months.
   a. True
   b. False

“Private Practice in Counseling”
9. In the Wooten and Valenti study on job loss, ___ percent of the significant gender differences disappeared when the demographic variables were taken into account.
   a. 60
   b. 70
   c. 80
   d. 90

10. When treating suicidal veterans, clinicians should focus their treatment on all of the following EXCEPT:
    a. cognitive behavioral strategies.
    b. increasing the veterans’ sense of belongingness.
    c. decreasing the veterans' perceived burdensomeness.
    d. addressing the veterans’ habituation to fear and pain.

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their spiritual beliefs and to draw on those strengths. In the absence of strong spiritual beliefs, she might introduce clients to logotherapy and Viktor Frankl’s *Man’s Search for Meaning*. “It just depends on who the client is and how they process things,” she says.

As bleak as the economy is right now, LoFrisco can also see an upside. “For one, couples are going to need to rely less on distracting themselves with shopping, vacations and fancy dinners and gain more depth and strength in their relationships. Two, when we overconsume, we lose our appreciation for things. If we have to cut back on our spending for a while, when things loosen up again, those dinners out and other indulgences we now take for granted will regain their specialness.”

**Donna Howland**  
**Struggling to help women find work**

Donna Howland serves as a combination mental health and career counselor for the Lifespan agency’s Women in Transition Services program in Rochester, N.Y. “We help women who are widowed, divorced, separated, have been caring for a family member or are single mothers on social services to get back into the workforce and become self-sufficient,” she explains. “And the economy is affecting us greatly.”

First, economic conditions are driving more clients to the Women in Transition program, which does not charge for its services. In many instances, Howland says, clients’ financial burdens have placed increased stress on relationships, leading to more separations and divorces. In other cases, women who had marginal jobs have lost them in the tightening economy or ex-husbands have stopped paying child support. Each circumstance brings women to Howland’s program for help reentering the workforce or finding a better-paying job.

Second, while economic conditions have increased the program’s client load, they have also decreased the number of available jobs. “As the jobs become more scarce, it’s getting harder to place people,” Howland says, “but given the economy, our clients are desperate to find work faster. We used to be able to move women through the program and hook them up with at least an entry-level job in six months. Now we’re seeing people who are making their second trip through our series of classes — and these are women who have a skill set. They just can’t find a job. We’ve been seeing more of that in the last year.”

Third, Howland says staff members are spending a lot more time and effort finding funding for the program. The economy has tightened state budgets and dried up much of the grant money that was previously available. In addition to providing services such as résumé preparation, interview training and job market information, Women in Transition used to obtain items such as used computers, new glasses and even clothes to help clients in their job search. “But we can’t provide any of those extras anymore,” Howland says.

Despite the program’s focus on job search assistance, Howland is doing less career work with clients these days. Instead, she’s often helping them access social services so they can ensure basic needs such as food and heat are met. In addition, Howland finds it necessary to dedicate more time to caring for clients’ emotional and mental health needs, which are being brought to the surface by economic hardship. She is leading classes on topics such as self-esteem, resiliency and stress reduction. “And I’m always available to do one-on-one counseling work as the program’s mental health counselor,” she says.

Many of the program’s clients were already living close to the edge even before the economic downturn. Current conditions only add to their challenges. “A lot of our clients have several strikes against them as far as getting employed again — their age, their need for child care, their financial situation,” says Howland, who adds that the program’s average client is in her mid-40s to early 50s. “Many of our clients have a bachelor’s degree, and they want to know why they’re sending out 20 résumés a week without any response. I’ve had clients get on the phone with me and scream. You just listen to them, let them vent and try to encourage them, but the longer it takes them to find a job, the harder it is to keep them moving. And in this economy, it’s definitely harder than it was before.”

Howland says she is aware of some clients who have chosen to either remain in or return to domestic violence

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**Counseling Today**

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situations. “They say, ‘It’s just too hard to survive out here on my own.’”

But Women in Transition keeps plugging away with a variety of services. It provides spreadsheets to connect clients with all the area’s major employers, temp agencies, educational institutions and even thrift shops. “We have been doing a lot more outreach to try to set up affiliations with employers, reaching out into the community to make more contacts, informing them of the program and seeking additional considerations for our clients,” Howland says. “We are contacting libraries, schools, churches and other places to make sure information regarding our program is available for potential clients. And we have increased our workshops to include financial management, credit counseling and stress management in addition to the job search and résumé help.”

Dianne Joyce
Staying afloat by practicing diversification

“If I were just doing private practice, I think I would have to fold,” says Dianne Joyce, a Licensed Professional Counselor in St. Louis who also has her doctorate in psychology. Fortunately for Joyce, she doesn’t have all her eggs in one basket during these tough economic times. In addition to her private general counseling practice, she works as a corporate trainer, providing education on numerous psychological issues, including conflict management. She is also employed as a psychologist/counselor by a group of doctors who perform bariatric (weight loss) surgery. In this capacity, she conducts pre-surgical psychological evaluations of patients.

“Having these other outlets has worked really well for me,” she says. “These areas may be sliding too because of the economy, but they’re not gone. It seems that when client jobs go, counseling is, unfortunately, often one of the first things they drop. In light of the present financial situation, many see counseling as a voluntary, luxury-type service that they are unable to afford. However, given the current work and associated financial crisis, anxiety and depression are likely on the upswing, so let’s hope people find a way to get the help they need.”

Joyce says 95 percent of the bariatric patients she sees are experiencing anxiety and sleep problems, and most blame those problems on concerns over finances, dwindling 401(k) plans and job security. In many cases, Joyce says, those concerns are causing depression. “That becomes the primary focus for some of these sessions — let’s get the anxiety under control first.”

In counseling clients who bring up concerns about the economy, Joyce is emphasizing stress reduction techniques such as deep breathing “so their bodies don’t run away with them.” She also tries to help clients reframe their thinking, telling them that choosing to be nervous and depressed over the economy will not solve anything and pointing out that the portion of the brain that focuses on problems (or potential problems) is different from the part that deals with solutions. Joyce also attempts to get clients to draw on their strengths and past history of resiliency. “I remind them that they’ve gone through other hard times in their life,” she says. “I encourage them to look at this as one more challenge. ... You have to stay focused on what you do have and not on what you don’t have; on what you haven’t had to give up versus what you have given up.”
Counselors can also make financially strapped clients aware of resources in the community, including where they can go to get low-cost medications and free food, or even provide listings of consignment shops for clothing, Joyce says.

Although many clients assume they can no longer afford counseling and call in to cancel their appointments, or simply fail to show up at all, Joyce says many counselors will do what they can to continue seeing clients, even if it means offering reduced fee or pro bono sessions. She is currently doing more sliding scale fees herself. Joyce realizes, however, that counselors will have to make some tough decisions if the economy keeps struggling.

“You never want to say to a client that ‘I only value you to the extent that you can pay me,’ but it is a balancing act,” she says. “There are only so many (pro bono or reduced fee clients) you can take.”

Counselors should also take a step back and make sure they are practicing what they preach, using the same techniques they are recommending to clients to help deal with anxieties related to the economic crisis, Joyce says. She believes the economic climate will force some counselors to leave private practice and look for lower-paying jobs in agencies or elsewhere. Other counselors, she adds, will likely have to make sacrifices to remain in the field as well. “Even as counselors,” she says, “we have to learn to deal with our own disappointments. Some of us might have to settle for doing this on the side or even taking another job for a little while.”

Joyce says she is fortunate to have a husband with a good job, so the slowdown in her business isn’t affecting her the way it might others. In fact, after four years of balancing the three different parts of her counseling practice, she has come to regard the slowdown as something of a personal blessing in disguise. “It’s forcing me to take a break that my body was telling me I needed but that I wasn’t listening to,” she says.

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

Letters to the editor: ct@counseling.org
Hidden in plain sight
Because of their external successes, high-functioning alcoholics often live in denial and escape the scrutiny of others

By Jenny Christenson

According to a 2007 study by Howard B. Moss, Chiung M. Chen and Hsiao-ye Yi that appeared in the journal Drug and Alcohol Dependence, less than 10 percent of the 18 million alcoholics living in the United States fit the “falling down drunk” stereotype. In fact, says Sarah Allen Benton, a mental health counselor in a counseling center at a college in Boston, the majority of alcoholics go to work every day, hold highly responsible and visible positions — including as teachers, lawyers and doctors — and have families.

“A high-functioning alcoholic (HFA) is an alcoholic who is able to maintain his or her outside life, such as a job, home, family and friendships, all while drinking alcoholically,” explains Benton, the author of the new book Understanding the High-Functioning Alcoholic: Professional Views and Personal Insights. But those outward evidences of success come with a high price. Because HFAs are often overachievers, society doesn’t necessarily view them as being “true” alcoholics and, as a result, they are at higher risk of not getting the help they genuinely need. Another reason HFAs don’t “get caught” or identified as alcoholics, Benton says, is because they tend to live very compartmentalized lives. “The people they drink with are different from those they work with and from their family,” she says, adding that HFAs often live the drinking portion of their life outside of what they consider their life morals to be.

Regardless of outside appearances, Benton says, internally, HFAs are suffering, and the consequences of their alcoholism are all too real.

Kelly Aissen, a substance abuse therapist at Shands Vista Florida Recovery Center, agrees. “Examples of the internal consequences that can go on for decades include, but are not limited to, the inability to communicate well, low self-esteem, inability to reach potential and comorbid depression and/or anxiety,” says Aissen, a member of the American Counseling Association. “Many people with active addictions are sensitive and are suffering internally even as their families and associates remain unaware of the severity of their addictions.”

HFA characteristics
Benton says HFAs possess specific personality traits that allow them to pursue other endeavors even while drinking. These characteristics include the drive to succeed externally, motivated in part by an internal belief that if they are successful professionally, it proves that they are not alcoholics. In fact, Benton says, HFAs often rationalize along the lines of, “If my drinking is such a problem, why is my career going so well?” Another common characteristic exhibited by HFAs is an almost obsessive...
focus on getting tasks done. “A lot of these traits can be part of a family’s culture, passed down through a family,” says Benton, who leads an alcohol skills training program that helps college-age problem drinkers. “It’s sort of like the perfect storm: Genetics and certain personality characteristics must all come together to consider a person an HFA.”

Because of their personal achievements, HFAs are often in denial that they have a problem requiring treatment, Benton says. Colleagues and loved ones are also less likely to recognize the role that alcohol is playing in an HFA’s struggles. When HFAs do seek help, Benton says, “They oftentimes will not come into counseling for anything to do with alcohol. Instead, they’re coming in because they are having marital problems or problems with work or school. There’s not a whole lot of leverage people can use against HFAs for intervention initially because they are holding things together.” Only over time do many HFAs start to see a connection between their drinking and other problem areas in their life, she says.

HFAs often “slide through the cracks of the health care system,” Benton says, because they are not always diagnosable under the criteria set forth in the Diagnostic and Statistical Manual of Mental Disorders. For example, she says, alcohol withdrawal is one component of the diagnosis for alcohol dependence. “Many HFAs are neither daily drinkers nor physically addicted to alcohol,” she says, “but are instead psychologically addicted to alcohol and, therefore, do not fit the diagnostic criteria.”

Benton believes it is more accurate to diagnose an HFA according to the guidelines provided by the Alcoholics Anonymous book Alcoholics Anonymous (commonly referred to as the Big Book.) As described by Benton, the diagnostic criteria have three parts:

1. When an individual has one drink, he or she then experiences a craving to have more and cannot predict what his or her alcohol intake will be.

2. An individual obsesses about the next time he or she will be able to drink alcohol.

3. An individual, while drunk, behaves in ways that are not characteristic of him or her and continues to repeat these behaviors and patterns even when he or she consciously no longer wants to.

Working with HFAs

Working with HFAs can also be different from working with other alcoholics, Benton says. For example, she says, the outlooks of the two groups may vary dramatically. Those who fit the stereotype for alcoholics are more likely to have already hit rock bottom, to have lost a great deal in their lives and to feel a sense of desperation, Benton says. As a result, they are typically more open to participating in recovery programs. HFAs, on the other hand, are experiencing success in other areas of their life, “So when someone says, ‘Your way isn’t working,’ they are resistant to that,” Benton says. “A counselor has to peel away the layers of the person to the
For HFAs, the potential repercussions of continuing their lifestyle are many. Their work performance eventually may begin to suffer, and they may start experiencing difficulties in their relationships, says Jack Culbreth, an associate professor of counseling at the University of North Carolina at Charlotte and the International Association of Addictions and Offender Counselors representative to the ACA Governing Council.

“The brain, cognition and memory are also affected by drinking,” says Benton. While their overachieving personas may enable them to continue doing just enough to get by, she says, HFAs often experience “blackouts” after drinking, during which time they walk around and do things they have no recollection of later, including driving drunk or breaking other laws. Because of their connections, social status or appearance, HFAs are often treated more leniently than other alcoholics under those circumstances, Benton says.

Counselors can choose from a variety of techniques when treating HFAs. Many times, Benton says, HFAs come into a counselor’s office believing they can control their drinking. In these cases, she says, presenting them with moderation goals is sometimes helpful. “See if they can maintain adherence to goals that they keep records of. Maybe even set up a contract with them,” she says. “HFAs like this type of challenge.” Benton adds that it takes a willingness to explore the HFA’s life — particularly his or her “drinking life” — to open up the therapeutic relationship. “It’s really important to have clients get honest with themselves in a nonjudgmental way,” she says. “Develop rapport, because it is a collaborative effort to get control of their drinking.”

Culbreth recommends that counselors use a technique called motivational interviewing to address “where the client wants to go and what their goals are. Motivational interviewing is relatively new, having been developed in the past 10 to 15 years. It basically says rather than forcing clients to accept whatever you proclaim is the problem and treatment, the counselor tries to align with the clients and understand what they want to do. In a session, you can get them to acknowledge there is some sort of a problem going on. They might not say they are an alcoholic, but they may say they’ve had difficulty with drinking and say they want to do something about it to make other parts of their life better. So you work from that angle.”

Aissen says counselors can “help break the denial clients experience by helping them look at their internal consequences. How has alcoholism affected family and working relationships or their relationships with themselves?”

Benton is a proponent of the 12-step program. “The 12-step program can mean behaving differently, and that can mean behaving differently than you did when you were an alcoholic. If you don’t change the person you were when you were drinking, then you won’t stop drinking.” Benton, herself an HFA who has been in recovery for five years, says she found the 12-step program to be a personally transformative and healing experience. She has created a website (highfunctioningalcoholic.com) detailing her professional and personal insights to assist HFAs.

Benton says the spiritual aspect of 12-step programs is especially important because spirituality can be instrumental in recovery from both medical and psychological conditions.

At the same time, Aissen says, many people have a misconception that 12-step programs are religious in nature. “Persons of all faiths, or not ascribing to any faith, can benefit from 12-step programs,” she says.

“Clients, through the surrender process, realize their addiction is not something they can make go away, even though they’ve often succeeded in many other ways.”

Allow for a safe place to acknowledge and experience any guilt and shame they may have around their addiction. Surrendering themselves to this disease provides room to heal and to be in recovery. Clients, through the surrender process, realize their addiction is not something they can make go away, even though they’ve often succeeded in many other ways.”

One of the major challenges in counseling HFAs is removing the illusion of control that they have, says Aissen. This illusion can cause HFAs to suffer unnecessarily — sometime for decades — before seeking help, she adds. HFAs also have certain enabling factors that other addicts may not have, such as financial stability, family support, low levels of accountability or unstructured work environments.

“People without financial concerns can afford their alcohol, therefore providing another justification for it not being problematic,” she says. And while having family support can be a very positive thing, for HFAs, it often comes in the form of people who are willing to cover up for them or otherwise excuse their behavior. Aissen stresses the importance of educating clients, their friends and family members to the fact that the HFA lifestyle isn’t an indication that they are somehow “healthier” than other addicts or alcoholics; it simply means they are at greater risk of suffering with the disease of alcoholism longer.
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system of support for people that have an addiction. What I want to do as a professional is to help every client to get better. And it may be that 12-step programs are a way to do this, along with counseling. But it doesn't necessarily take the place of counseling.”

Benton, who did a practicum at the Benson/Henry Institute for Mind/Body Medicine and has attended multiple professional trainings there, is also an advocate of using meditation exercises with HFAs. “Dr. Herbert Benson was a leader in the field of mind-body awareness,” she says. “He advocated the power of meditation in healing not just addictions, but in healing chronic medical conditions.”

Other recovery programs for alcoholism include Smart Recovery, an abstinence-based program that features cognitive behavioral therapy work. “The idea is that you graduate, and then you go back for tune-ups,” Benton says. There are also moderation programs, which seek to help clients control, rather than abstain from, drinking. Benton says approximately one-third of the people who go into moderation programs realize they are alcoholics and end up entering an abstinence program. Another program is called Women for Sobriety, founded by Jean Kirkpatrick, who saw a need for a recovery program aimed more exclusively at females. A program that clients do on their own, without having support group meetings, is called Rational Recovery.

To increase the likelihood of successful recovery, Benton believes HFA clients should be in a recovery program of their choice while simultaneously participating in therapy.

Overall, Culbreth says, the prognosis for recovery is excellent for HFAs if they follow the 12-step program. However, he cautions, “The reality is that this is a very difficult program, and even those who follow the 12-step program are at risk for relapse. But if the HFA can get past their obsession with professional success, they have the opportunity for success over alcoholism as much as anyone else. Their opportunity for success may be even higher because they haven’t lost everything.”

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Parents need to speak up.

Q&A with Dr. Jean Spaulding

Q. Why should parents be concerned about their teens’ sexual activity?

Children who engage in sexual behaviors at an early age are at high risk of suffering negative consequences, physically and emotionally.

Q. Why do parents need to speak to their kids about sex?

Research shows that parents have the greatest influence over their kids’ sexual decisions. When parents do not speak up, their children are left with a huge void that will begin to be filled by the media, peers, and pressure from other adults.

Q. When should parents begin talking with their kids about sex?

By the time children reach nine or ten, parents should begin having fairly in-depth, ongoing conversations with an emphasis on parental expectations, the family’s values, aspects of integrity, and the importance of waiting until an appropriate time in their lives.

Q. What advice do you have for parents preparing to talk about sex?

The conversation should not be overwhelming; parents should initiate a series of smaller informal talks that are light and airy. Also, it is easier when parents are not looking face-to-face with their child. Parents can talk while they are doing something like cooking dinner, driving, or taking a walk.

Q. Where can parents get started?

Parents can find help at www.4parents.gov. Remember, this isn’t easy. If parents are able to deliver two or three sentences in the first conversation, this is a victory.

About Parents Speak Up: The Parents Speak Up National Campaign provides information and support to parents about how to talk with their kids about sex. Visit www.4parents.gov for additional information, talking tips, conversation starters and more.

About Dr. Jean Spaulding: Dr. Jean Spaulding is a fellow of the American Psychiatric Association and the Former Vice Chancellor for Health Affairs at Duke University Health System. She has practiced child, adolescent and adult psychiatry since 1977.
During its nearly six decades, the counseling profession has experienced significant growth and struggle to emerge as a viable mental health profession. Forty-nine states and three territories have established counselor licensure. Numerous states have passed legislation establishing counselors’ right to bill insurance, and the Department of Veterans Affairs recently agreed to hire counselors in VA hospitals. According to the Bureau of Labor Statistics, some 635,000 counselors work in schools, agencies, corrections and other areas, and the agency projects job growth for counselors will grow much faster than the average for all occupations through 2016.

Achievements notwithstanding, the counseling profession faces numerous challenges. One of the profession’s most pressing goals is marketplace parity. The profession’s first significant step in this journey was its success in achieving state licensure. Historically, achieving rights coincides with long-term struggle against established forces who seldom abdicate privilege willingly. The counseling profession’s experience has been no exception to this maxim, as psychiatrists, psychologists and social workers have vigorously opposed counselors.

Undaunted, the profession’s efforts have yielded considerable success, but much remains to be done. For example, lobbying efforts by the American Counseling Association and associated groups have resulted in a Medicare reimbursement bill for counselors passing both houses of Congress at separate times. Medicare reimbursement, however, remains unachieved. TRICARE, the military’s version of Medicare, recognizes Licensed Professional Counselors as reimbursable providers, but counselors are the only mental health providers that require physician referral under TRICARE.

Our own worst enemy?
The counseling profession’s most serious challenge likely is the splintering of membership and resources among the various counseling organizations. For most of its existence, ACA required members to join one affiliate division. Applicants desiring membership in, say, the American School Counselor Association were also required to join ACA. For years, this requirement to join the flagship organization was the source of bickering and threats of disaffiliation, particularly regarding ASCA and the American Mental Health Counselors Association, the largest and second-largest divisional affiliates. ACA’s Governing Council also held talks on disaffiliating ASCA and AMHCA. Fortunately, this did not happen because a compromise was reached allowing counselors to join affiliates without being required to join ACA.

The case of ASCA and AMHCA illustrates an important question for counselors: Does the identity and loyalty of a school counselor belong with the flagship organization (ACA) or the specialty division (in this case, ASCA)? Because counselors wishing to join divisional affiliates are no longer required to also join ACA, membership in ACA has dropped precipitously, resulting in weakened financial stability and decreased lobbying influence. This creates the possibility of further divisiveness and disaffiliation within the profession.

While ASCA and AMHCA remain ACA divisions, they collect separate membership dues, retain their own lobbyists and publicize themselves as primary organizations representing their respective counseling specialties. Splintering may largely explain why such a small percentage of the 635,000 U.S. counselors choose to join ACA or one of its divisional affiliates. This high degree of counselor nonaffiliation is alarming and illustrates a serious disconnect between counseling professionals and the
organizations that ostensibly represent them.

This phenomenon of separatism seems likely to continue for the foreseeable future. I regularly receive mailings from national, regional, state and local counseling organizations, all of which actively — and individually — solicit membership. Deciding which organization to join can be confusing and expensive. In New York, for example, three different state organizations representing school counselors, mental health counselors and the state branch of ACA all compete for membership, hold separate conventions, publish separate state journals and engage in separate lobbying efforts.

Although there is no easy resolution to this complex identity dilemma, it would seem prudent for all counseling organizations to recognize that antagonism, division and duplication of resources are working against the goal of establishing counseling as a strong, unified, influential profession. Ironically, counseling’s most insidious adversary may not be psychology or social work, but rather the counseling profession itself.

Unification is arguably the profession’s most pressing challenge. Left unresolved, this situation has the potential of becoming an organizational Tower of Babel, with confusion over what’s being said, who’s speaking and which organization actually represents the profession. Perhaps former ACA president Samuel Gladding said it best: “Other professions, such as medicine, have overcome the divisiveness that comes within a profession where there is more than one professional track practitioners can follow. ACA has not been as fortunate.”

The motto e pluribus unum (“out of many, one”) has much relevance for the counseling profession because a large, vibrant flagship organization is in a stronger advocacy position than numerous smaller ones. To have any hope of achieving marketplace parity, the various counseling organizations must set differences aside and unify around a core national organization — ACA.

Opposite approaches

Another issue of contention involves the traditional wellness approach to counseling versus a pathology-based approach. The influence of insurance companies has moved the counseling profession toward requiring diagnoses as set forth in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR), published by the American Psychiatric Association. Faculty educated in a traditional wellness model may be dismayed when counselor education programs adopt a pathology-based approach. CACREP accreditation standards for mental health counselors, however, are aligned to a psychiatric rather than developmental philosophy.

In addition, school counseling programs frequently are offered alongside mental health counseling programs — two disciplines moving in radically different directions. The ASCA model reflects a developmental approach, while mental health counseling is aligned with DSM-driven curriculum. Can traditional-minded, developmentally oriented coun-

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Counseling profession’s advocacy of rigid social systems? Ironically, the culturally insensitive in societies with or without, oddly enough, appearing orientation?

address such draconian restrictions on homosexuality and the practice of religion against domestic abuse. Furthermore, prohibitive laws in Saudi Arabia, for example, an absolute monarchy that prohibits men and women from sharing the same classroom, prohibits women from divorcing their husband and provides no legal protection against domestic abuse. Furthermore, homosexuality and the practice of religion other than Islam are punishable by death. How will the counseling profession address such draconian restrictions on gender roles, religious identity and sexual orientation?

Equally problematic, how will the counseling profession advocate equality without, oddly enough, appearing culturally insensitive in societies with rigid social systems? Ironically, the counseling profession’s advocacy of pluralism, though noble and well intentioned, is a concept framed largely through a Western mind-set. This gulf between an idealistic profession and harsh global realities creates great potential for conflict. Consequently, debate regarding cultural competence will likely become more complex and contentious as the counseling profession continues its global expansion. My point is not that the profession should abdicate its support for equality but rather that it be strategic in how it pursues pluralism in societies holding radically different cultural norms.

New counseling degrees

This new era may require programmatic adaptations. For psychologists, Psy.D. programs have emerged as an alternative to the traditionally research-oriented Ph.D. Perhaps the counseling profession should also consider a Psy.D.-like degree. The University of Notre Dame-Australia (UNDA) offers a doctorate of counseling (D.Coun.) modeled after the Psy.D., for example. A professional doctorate emphasizing professional practice and the development of management expertise seems more relevant to master’s-level counselors in clinics and schools who desire a doctorate but not an accompanying academic career.

The front end of the higher education spectrum also presents opportunities. UNDA offers a baccalaureate counseling degree with a job placement rate approaching 100 percent. Although the counseling profession in Australia maintains a master’s as the entry-level degree, large numbers of bachelor’s degree counselors work in addictions settings. Perhaps it’s time to recognize baccalaureate counselors as legitimate professionals and create undergraduate counseling programs.

While traditionalists may be aghast at such a suggestion, it’s worth remembering that our social work colleagues have long maintained bachelor’s degree programs with no noticeable detriment. Although psychology is a doctoral-level profession, undergraduate psychology departments are among the most vibrant on any campus. Moreover, undergraduate programs provide a forum to mentor future professionals. Counselor education’s undergraduate mentoring role has been abdicated to social work and psychology faculty, neither of whom have a stake in supporting a competing profession. Baccalaureate counseling programs would create a stronger professional identity at the undergraduate level, provide early mentoring for future counselors and increase membership in the counseling profession.

Closing thoughts

This technologically advanced era will require the counseling profession to develop visionary leadership. While counseling programs do a good job of training future counselors, important topics such as leadership, political advocacy and entrepreneurship are seldom covered in the curriculum. ACA certainly is engaged in leadership development, and strategic planning is a major focus of its 20/20: A Vision for the Future of Counseling initiative, which is attempting to address many of the challenges and opportunities discussed in this article. Strategic planning and management training should also become an integrated part of counselor education curriculum, because counselors essentially are managers in schools, agencies, higher education and professional organizations.

Because of the 21st century’s dynamic, interconnected, global nature, the counseling profession will undergo dramatic change. Some 150 years ago, Charles Darwin theorized it wasn’t necessarily the smartest or strongest organisms that survive, but those able to adapt to change. Demands facing the counseling field include unifying a fractious profession, achieving marketplace parity, developing relevant counselor education programs, addressing global cultural conflicts and proactively addressing the vast challenges and opportunities of the Internet era. How effectively the counseling profession adapts to these demands will largely determine its future success and viability.

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Letters to the editor: ct@counseling.org
In 1969, psychiatrist Elisabeth Kübler-Ross wrote one of the most influential books in the history of psychology, *On Death and Dying.* It exposed the heartless treatment of terminally ill patients that was prevalent at the time. On the positive side, it altered the care and treatment of dying people. On the negative side, it postulated the infamous “five stages of dying” — denial, anger, bargaining, depression and acceptance (DABDA) — which are now so ingrained in our culture that most people can recite them by heart.

The stages allegedly represent what a dying person might experience upon learning he or she has a terminal illness. “Might” is the operative word, because Kübler-Ross repeatedly stipulated that a dying person might not go through all five stages, nor would they necessarily go through them in sequence. It would be reasonable to ask: If these conditions are this arbitrary, can they truly be called stages?

**From dying to grief**

During the 1970s, the DABDA model of stages of dying morphed into “stages of grief,” mostly because of their prominence in college-level sociology and psychology courses. The fact that Kübler-Ross’ theory of stages was specific to dying became obscured. Students who eventually became therapists, social workers or doctors carried what they learned about the stages into their careers. The media also played a role in disseminating the idea that specific, inexorable stages of grief exist. When a tragedy made the news, newscasters and alleged experts recited the DABDA model of grieving. Medical and mental health professionals, as well as the general public, accepted the theory without ever investigating its provenance or validity.

Kübler-Ross’ stage theory was not the product of scientific research. In the second chapter of *On Death and Dying* she laments: “How do you do research on dying when the data is so impossible to get? When you cannot verify your data and cannot set up experiments? We (she and her students) met for a while and decided that the best possible way we could study death and dying was by asking terminally ill patients to be our teachers.” She then explains her methods: “I was to do the interview while they (her students) stood around the bed watching and observing. We would then retire to my office and discuss our own reactions and the patient’s response. We believed that by doing many interviews like this we would get a feeling for the terminally ill and their needs, which in turn we were ready to gratify if possible.”

The phrase “we would get a feeling” is especially revealing because Kübler-Ross’ feelings were processed through the filter of her own unresolved grief and retained anger. We know that because she went public about the anguish of her past in her final book, *On Grief and Grieving,* coauthored with David Kessler and published shortly after her death in 2004. She reveals the gruesome story of an episode involving her father and a cherished childhood pet. That event, along with a host of other grief incidents, resulted in her bottling up a lifetime of anger that she admitted she didn’t deal with until very late in life.

**Wide acceptance vs. scientific fact**

On Feb. 21, 2007, *The Journal of the American Medical Association* published the results of the Yale Bereavement Study (YBS): An Empirical Examination of the Stage Theory of Grief. The YBS evaluated a hodgepodge of alleged stages. It started with the assumption that stages of grief exist and then used that assumption to prove that they do, even though the existence of stages has never been established as fact. The results confirmed some stages and negated others while repositioning their order and value. We cannot give any credence to the YBS because its premises and conclusions are flawed. The study’s own language perpetuates the myth that stages of grief exist, so we’ll use it to make our case.

The YBS begins: “The notion that a natural psychological response to loss involves an orderly progression through distinct stages of Bereavement has been widely accepted by clinicians and the general public.” It concludes: “Identification of the normal stages of grief following a death from natural causes enhances understanding of how the average person cognitively and emotionally processes the loss of a family member.” We’re troubled by the assumption that stages of grief are normal and distinct and progress in a specific order. We also wonder, when does “wide acceptance” equal scientific fact?

**Refuting the alleged stages**

Kübler-Ross may have been the first to advance a specific stage theory about dying, but others preceded her in the area of grief. John Bowlby, Colin Murray Parkes and several others advanced theories about grief based on stages or phases, using a variety of labels. Alternate terms for the stages they used include disbelief, numbness, yearning, shock and guilt. We’ll address the most commonly used stages and point out how they have the potential to harm grieving people.

**1. Denial, Disbelief, Shock, Numbness**

*Denial* in our thousands of interactions with grieving people, we have never found one person who was in denial that a loss had occurred. We ask, “What happened?” They say, “My mother died.” There’s no denial that someone died. We’ve had a few people tell us someone died and then say, “I’m in denial.” We
ask, “Do you mean the person isn’t dead?” They say, “No, but I’ve heard ‘denial’ is the first stage of grief.”

In the opening chapter of On Grief and Grieving, Kübler-Ross and Kessler state, “For a person who has lost a loved one, however, the denial is more symbolic than literal.” We have to wonder: If denial is merely symbolic rather than literal, why call it a stage?

Disbelief: The YBS uses “disbelief” rather than “denial.” Disbelief, as expressed by most grievers, is rhetorical language, as in, “I still can’t believe he’s gone.” Although disbelief may reflect the emotions of a broken heart, it is really a figure of speech rather than a statement that a death didn’t happen.

Shock: In cases of sudden, unexpected deaths, it’s possible that upon receiving the news, a surviving family member may go into emotional shock, during which time he or she is in a suspended state, totally removed from events in the real world. This response is rare and doesn’t last very long. Most deaths are at the end of a long-term illness or of old age and don’t produce shock in the survivors. However, some books maintain that shock is a standard stage of grief. There is no evidence to support that idea.

Numbness: Numbness is one of the most common physiological responses to a grief-producing event. We reference numbness because the YBS coupled it with disbelief as if both are stages. Many grievers report intermittent numbness in the immediate aftermath of a death. However, numbness is not a stage.

Potential harm: Time can’t heal emotional wounds, but the word “stage” implies that time is a component. Suggesting to grievers that they’re in a stage of denial or disbelief can freeze them into inaction. They bury their feelings as they wait for time to make that stage pass. Later, they’re liable to be diagnosed with “complicated bereavement” and put on psychotropic drugs, which make it difficult or impossible for them to access the emotions that they’ve buried.

2. Anger

When an elderly loved one dies at the end of a long-term illness, there’s usually no anger in those left behind. Along with feelings of sadness, there may be a sense of relief that the suffering is over. There’s sometimes anger at a disease or God or at doctors or hospitals or the drunk driver who killed our loved one; even anger at loved ones who didn’t take good care of themselves or who took their own lives. But anger is not a universal feeling when someone who is important to us dies. Therefore, it is not a stage.

Potential harm: When anger is perceived as a stage, there are no actions the griever can take to end it. They must stay angry as long as it lasts or as long as they’re alive. Staying angry can have dangerous consequences, including causing people to damage relationships and lose jobs, affecting their health or restricting their will to live.

3. Bargaining and Yearning

Bargaining: Kübler-Ross’ bargaining stage may make sense for someone diagnosed with a terminal illness. We wouldn’t be surprised to hear someone make the following plea to whichever deity the person believe in: “If you’ll just give me another chance, I’ll take better care of myself.” But bargaining doesn’t relate to the grief people feel when someone important to them has died.

Yearning: The YBS substitutes “yearning” for “bargaining.” Because 83.8 percent of the participants in that study were widows or widowers, most over the age of 60, we’re not surprised that many of them yearned for their lost partner. Talk to thousands of widows/widowers as we have, and you are guaranteed to hear that most of them — including the surviving partners who were previously engaged in a 40-year relationship of constant bickering — miss the person who died.

Potential harm: The death of a long-term spouse creates an incalculable amount of emotional energy, usually accompanied by an overwhelming sense of missing the person and wanting the familiarity of his or her presence back. Missing someone who has been a constant in your life for decades is normal and expected. Calling it a stage suggests a time frame, causing grievers to wait for that stage to end, which adds exponentially to their grief.

4. Depression

The use of the word “depression” as a stage carries with it a great deal of confusion and potential danger for grieving people. Here’s a list of reactions common to grief that are also symptoms of clinical depression:

- Inability to concentrate
- Disturbance of sleeping patterns
- Upheaval of eating patterns
- Roller coaster of emotions
- Lack of energy

One list fits both grief and depression, and that’s the problem. Are grievers clinically depressed? With very few exceptions, the answer is “no,” and usually only if they were clinically depressed before the death that affected them. The line between grief-related depression and clinical depression has become hopelessly blurred.

Potential harm: It’s normal for grievers to experience a lowered level of emotional and physical energy that is unrelated to clinical depression. When they’re told, however, that depression is a stage, it defines them and they become trapped in the belief that only with the passage of time will that stage magically end. While waiting, they take no actions that might help them. If and when they seek professional help, they use the self-diagnosis of depression to describe themselves, for which they often receive prescriptions for psychotropic drugs.

The question of drug treatment for grief was addressed in the National Comorbidity Survey published in the April 2007 Archives of General Psychiatry. “Criteria for Depression Are Too Broad — Researchers Say — Guidelines May Encompass Many Who Are Just Sad.” The survey observed more than 8,000 participants and revealed that as many as 25 percent of grieving people diagnosed as depressed and placed on antidepressant drugs are not clinically depressed. The study indicated that they would benefit far more from supportive therapies that could help them avoid developing full-blown depression.

5. Acceptance

Acceptance, as it relates to emotions, is a vague and amorphous term. Because there’s almost never denial that a death occurred, the concept of acceptance is confusing. The YBS asked grievers to assess the level of acceptance they’d achieved about the death of someone important to them. It’s an odd question,
because they had to have accepted that the death occurred or they wouldn’t have been in a bereavement study.

**Conclusion**

We understand that people engulfed in the aftermath of loss want to know what to expect and how long it will last, but such questions can never be satisfactorily answered. Because every griever is unique, there are no pat answers about grief.

Although we’ve put much effort into refuting the stages, Kübler-Ross rebuts them better herself in the opening paragraph of *On Grief and Grieving*:

“The stages have evolved since their introduction, and they have been very misunderstood over the past three decades. They were never meant to help tuck messy emotions into neat packages. They are responses to loss that many people have, but there is not a typical response to loss, as there is no typical loss. Our grief is as individual as our lives. Not everyone goes through all of them or goes in a prescribed order.”

The fact is, no study has ever established that stages of grief actually exist, and what are defined as such can’t be called stages. Grief is the normal and natural emotional response to loss.

Stage theories put grieving people in conflict with their emotional reactions to losses that affect them. No matter how much people want to create simple, ironclad guidelines for the human emotions of grief, there are no stages of grief that fit every person or relationship.

**Note:** This article is an abridged version of a longer article originally published in *Skeptic* magazine (Vol. 14, No. 2, 2008). Access the full version at grief.net/Articles/Myth%20of%20Stages.pdf.

American Counseling Association members Russell Friedman and John W. James are the principals of the Grief Recovery Institute (grief.net) and coauthors of *The Grief Recovery Handbook, When Children Grieve and Moving On*. 

Letters to the editor: ct@counseling.org
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Grief has taken center stage in recent years in a way reminiscent of the era of war, assassination and the death of idealism in the sixties. But I believe it has been experienced on a scale and with a sense of vulnerability that is unprecedented in American history. In the last few decades, we have experienced wars, space shuttle disasters, racial upheaval, natural disasters, school shootings and acts of terrorism.

The response has been an “assault on grief” that dates at least to the aftermath of the Oklahoma City bombing (1995) and the Columbine school shootings (1999). Since then, “grief brigades” have become familiar fixtures at the scene of countless disasters. The popular press tends to laud such efforts, but many mental health professionals are questioning the efficacy of real-time, on-site grief and trauma counseling.

Sally Satel, psychiatrist and resident scholar at the American Enterprise Institute for Public Policy Research, speaks out unapologetically against what she calls a pervasive national “therapism” that characterizes the burgeoning trauma industry. In a book coauthored with Christina Hoff Sommers, One Nation Under Therapy: How the Helping Culture Is Eroding Self-Reliance, she says that “victims of loss and tragedy differ widely in their reactions: some benefit from therapeutic intervention; most do not and should not be coerced by mental health professionals into emotionally correct responses.”

Asking victims to talk about the tragedy, urging them to express their emotions and then preparing them for the psychic pain that they “might” feel down the road can make some people feel even more vulnerable and out of control. Some view this approach as “manufacturing” victims rather than helping them.

Consider the aftermath of the 9/11 terrorist attacks and the personal and national grief they spawned. In a Time article, “The Case for Rage and Retribution,” published the day after the attacks, journalist Lance Morrow projected his rage not on the egregious act of violence, but on the expected flood of grief counselors to Ground Zero:

“For once, let’s have no ‘grief counselors’ standing by with banal consolations, as if the purpose, in the midst of all this, were merely to make everyone feel better as quickly as possible. We shouldn’t feel better. For once, let’s have no fatuous rhetoric about ‘healing.’ Healing is inappropriate now, and dangerous. There will be time later for the tears of sorrow.”

No one really took heed of Morrow’s call to postpone the healing. Perhaps we were all just too stunned. In the days and weeks following 9/11, some 9,000 grief and trauma counselors descended on Ground Zero, advocating intervention for any person even remotely connected to the tragedy.

Experts estimated that some 2 million New Yorkers (one in four) would need counseling for the potential aftereffects of the tragedy. The Federal Emergency Management Agency (FEMA) responded by earmarking more than $150 million to the New York State Office of Mental Health.

But the masses didn’t come. Even two years later, in 2003, more than half the funds had gone unspent. So the grief and trauma experts changed tactics. Instead of waiting for clients, they decided to “recruit” clients, the rationale being if clients don’t come to you, you have to go to the clients. Project Liberty, New York City’s crisis counseling entity created after 9/11, reacted by mobilizing portable units of counselors to walk the streets looking for people to help.

**Grief disenfranchised**

So what is all this grief counseling about? Why this rush to console? It may boil down to one pervasive message pointedly delivered by Project Liberty’s slogan: “Feel Free to Feel Better.” A quick fix and back on your feet.

In an astounding irony, in its rush to console, the grief industry has done just the opposite. Instead of promoting a healing grief, it has fostered the wholesale disenfranchisement of grief.

This may be a strong statement, but consider that in the early days and months after 9/11, President George W. Bush set the tone for disenfranchisement, or perhaps just reinforced the general trend, when he called for “business as usual” and urged the nation to “keep shopping.” I recall feeling horribly embarrassed for the president, for the nation and for myself at those words.

In 2006, Scott Sandage, author of Born Losers: A History of Failure in America and a cultural historian at Carnegie Mellon University, wrote a five-year retrospective on 9/11 for the History News Network.

“Digging out from death and debris so overwhelming that it might have forever buried ‘business as usual’,” he reflected, “no wonder many citizens believed that the terrorists would win if the nation stopped.”

As a result, the nation returned to a state of normalcy much quicker than might have been expected. The grief of families, friends and loved ones of the 9/11 victims had to suffice for our national grief. Sadly, they likely are among the most disenfranchised, invisible grievers in the country today.

Robert Nemeth, a regular commentator in the Worcester (Mass.) Sunday Telegram, played right into the hands of those who would disenfranchise grief when he compared the styles of grieving at two universities that had experienced deadly school shootings — the University of
Iowa in 1991 and the University of Texas in 1966. On April 29, 2007, in response to shootings at Virginia Tech, Nemeth wrote: “After Charles Whitman shot 14 people at the University of Texas in 1966, the school canceled classes, held a memorial service, offered counseling and then put the tragedy behind it. In contrast, Iowa has held annual remembrances to honor the dead and to ‘heal the wounds.’ Texas chose the right way. Wounds heal faster if they are not reopened.”

This is the “Feel Free to Feel Better” message in another guise, and it is testimony to our national discomfort with grief.

Denying death

Why this discomfort? At its root is the American denial of death. Even in film and television, portrayals of death are generally unrealistic and sensational; rarely are they accompanied by realistic and normal grief reactions.

Humor also eases our death-related anxieties. Woody Allen’s wit and humor take the prize: “I’m not afraid of death. I just don’t want to be there when it happens.” Our reluctance to talk about death in a straightforward manner is also evident in our extensive use of euphemisms for death and dying: fading away, nearing the end, breathing one’s last, passing away, going to a better place, called to a higher service.

Lynne DeSpelder and Albert Strickland, authors of A Journey Through the Last Dance, say this aversion to the perception of death isn’t really a matter of individual choice as much as it is “a result of social attitudes and shared practices that have changed over time” — increased life expectancy, lower mortality rates, geographical mobility, displacement of death from the home to institutional settings and advances in life-extending medical technologies.

We’ve conquered physical pain. We’ve conquered disease and discomfort. We’ve conquered many aspects of mental illness. We’re guaranteed a product or a pill (accompanied by an advertising campaign) for just about anything. Why not try to do the same thing for grief? After all, isn’t grief just like any other illness?

Grief’s conundrum

Here lies the conundrum. Grief is not an illness that needs a cure. Grief is not a mental disorder that requires psychotropic drugs to remove the veil of suffering. People who grieve are not crazy, although they very often feel like they are going insane. People who grieve go through a process that is neither linear nor explicable by stage theory (even Elisabeth Kübler-Ross admitted as much in later life).

People who grieve very often feel that they are on the outside looking in — isolated, lonely, weak. People who grieve question themselves repeatedly: Am I grieving enough? Am I grieving too much? Shouldn’t I feel better by now? Am I normal?

People who grieve do heal, but not in the medical sense. As with death, we are so distanced from grief that we just don’t know how to do it right. In her final collaborative work with coauthor David Kessler, On Grief and Grieving, Kübler-Ross spoke of her own illness and impending death. In the book, she commented that her five stages of grief had been somewhat misunderstood. Nevertheless, she admitted, “People love my stages. They just don’t want me to be in one.” She died in 2004 before the book was published.
The American Counseling Association (ACA) is now providing eligible ACA student members with professional liability (“malpractice”) insurance.

Recognizing that all Council for Accreditation of Counseling and Related Educational Programs (CACREP) and many non-CACREP Programs require students to have professional liability insurance, ACA, through an agreement with Healthcare Providers Service Organization (HPSO) and its underwriter, American Casualty Company of Reading Pennsylvania, a CNA company, is providing eligible ACA student members with professional liability insurance coverage as an additional value-added benefit of membership.

Registered ACA student members are eligible for coverage when they are enrolled and engaged in a master's degree counseling curriculum at a post secondary institution. Coverage is available to ACA student members solely while performing counseling services (e.g. practicum and internship) related to such curriculum.

Coverage Features:

- Professional Liability Coverage – Eligible ACA student members are protected up to $1,000,000 for each claim, up to $3,000,000 annual aggregate subject to a master policy aggregate
- Legal Defense and investigative costs - If eligible ACA student members are named in a malpractice lawsuit, an experienced malpractice attorney will be provided, if necessary. Legal expenses incurred to settle covered claims will be paid - WIN or LOSE. This is in addition to the limits of liability.

If you have any questions, please call ACA Member Services toll free at 1-800-347-6647, ext. 222 or 703-823-9800, ext. 222.

*ACA Students who wish to continue insurance through HPSO after graduation or who become a licensed, certified or accredited professional, please apply online at www.hpso.com. This program is underwritten by American Casualty Company of Reading, Pennsylvania, a CNA company and is offered through the Healthcare Providers Service Organization Purchasing Group. All products and services may not be available in all states and may be subject to change without notice. This information is for illustrative purposes only and is not a contract. It is intended to provide a general overview of the products and services offered. Only the policy can provide the actual terms, coverages, amounts, conditions and exclusions. CNA is a service mark and trade name registered with the U.S. Patent and Trademark Office.*
Why I became a grief counselor

The gift that Kübler-Ross left, I think, can be summed up in the title of the book’s afterward: “The Gift of Grief.” In a sense, those final few pages gave me the answer to why I became a grief counselor.

According to Kübler-Ross and Kessler, many of life’s problems stem from unresolved and unhealed grief. When we do not work through grief, there is a lost opportunity to heal the soul, the psyche and the heart. Yet we are inept at grieving, according to Kübler-Ross and Kessler, and having never learned how to do it correctly ourselves, we fail to teach our children how to grieve or cope with loss.

The workplace vividly reveals our awkwardness. Even as companies bend over backward to help employees manage their family and personal lives, dealing with grieving employees remains one of the most avoided topics in the workplace. At best, when coworkers experience a death, we offer a quick condolence. Even coworkers who freely discuss intimate relationships can freeze for fear of saying the wrong thing. So, instead, we often say nothing or avoid the griever altogether. It may be a form of disenfranchisement, but more immediately, it sends a message that we just don’t care.

Grief is one of life’s experiences that we all share. Yet, Kübler-Ross and Kessler, “Most of us go through it as little islands of pain. … The time after a significant loss is full of the feelings that we usually have spent a lifetime trying not to feel.” But feel them we must. It is not a matter of if we will grieve, but when.

Until we grieve, we suffer from the effects of “unfinished business” that Kübler-Ross and Kessler define in several ways — all those things we haven’t said or done, all those feelings we wish we had allowed ourselves to feel, all those old wounds and previous losses that intrude on our current grief.

The grief counselor’s role

What can the grief counselor offer that our social networks often cannot? First, we can offer the truth that there is no magic formula. Second, we can offer acknowledgement that the grief is real and acceptable, no matter the relationship, the circumstances of the loss, the style of grieving, the duration of grief or who you are — young or old, gay or straight, mentally handicapped or not, terminally ill or in robust health, stoic or highly emotional, a childless family or one with several children. And third, we can offer the willingness to follow a client’s lead and to be fully present and accepting of whatever emotions manifest themselves — denial, anger, depression, acceptance or all these things at once, bottled up within a lifetime of emotional conflict and unfinished business.

Grieving is a messy business. What we expect to feel often eludes us. What we do feel often frightens us. We want to stop grieving but worry that if we do, we will forget. We suddenly find ourselves unanchored, without a sense of purpose or a sense of meaning that connects us to others and to the world around us.

Grief counseling often entails working with clients to help restore or rebuild a sense of what is meaningful to them. Complicated or pathological grief requires much more. But, in general, what is needed, as Viktor Frankl advised us, is to meet the patient squarely. In his book The Doctor and the Soul, Frankl said that many of the questions raised by those who are experiencing grief are actually philosophical in nature. So, we must respond to such questions on their own terms. A philosophical question can’t be dealt with by turning the discussion toward psychoanalysis of its possible pathological roots or by discouraging such philosophical pondering. “This is only evasion,” said Frankl.

Competent grief counselors don’t evade. They meet clients where they are and step into their subjective worlds as invited. Grief counselors can function as guides for the unguided and as teachers for those in need of learning what it means to grieve.

Kübler-Ross and Kessler cut to the heart of the matter: “The reality is that you will grieve forever. You will not ‘get over’ the loss of a loved one; you will learn to live with it. You will heal and you will rebuild yourself around the loss you have suffered. You will be whole again, but you will never be the same. Nor should you be the same, nor would you want to.” That is the gift of grief.
Carolina connections

At the time of this writing, the National Board for Certified Counselors is making preparations to attend the annual American Counseling Association Conference & Exposition. This year, we are happy that the meeting provides an opportunity for so many professional counselors to visit NBCC’s “home state” for the past 16 years — North Carolina.

Thomas Clawson outlined NBCC’s creation and relationship with ACA in the September 2008 issue of Counseling Today. For the first 10 years, NBCC’s headquarters were located in the same building with ACA; however, in 1992, the directors serving on the NBCC Board determined a need to leave the Washington, D.C., area and establish a new home. The central factor in the move was economics. The directors recognized that the cost of operating the organization’s headquarters in the Washington metro area was much higher than in other locations, and by relocating, NBCC could provide additional services while having more control over the costs to certificants. Therefore, NBCC made the decision to initiate a search for more affordable real estate.

Many other aspects were also incorporated into the search, including a goal of finding a location in close proximity to a university that offered a counseling degree. This would translate to a source of master’s and Ph.D. students in need of work experiences. Providing meaningful counseling-related work is one of the fundamental ways that NBCC continues to support the profession. It also provides a good opportunity to continue to incorporate new ideas into the organization as a whole. Easy access to library facilities also assists the progress of research in support of the profession. A low cost of living and an educated workforce were other critical aspects of the move. The location also needed to be easily accessible via major highways, a good airport connection and mail/parcel delivery centers.

Several cities in various states were identified as prospective new locations, but Greensboro, N.C., soon became a front-runner. A moderate-size city serving as home to the University of North Carolina at Greensboro and North Carolina Agricultural and Technical State University, Greensboro also enjoyed the advantage of having Wake Forest University, North Carolina Central University, North Carolina State University and the University of North Carolina at Chapel Hill as close neighbors. Greensboro was also easily accessible via the interstate and three nearby airports. Therefore, after long deliberations among the NBCC Board, Dr. Clawson and one other staff member moved the NBCC headquarters to Greensboro, where additional staff members were hired, bringing the total number of employees to 12.

Today, with more than 50 NBCC employees and more than 44,000 certificants, it is clear that North Carolina has proved to be a prosperous business location for professional counselor certification. Through the years, NBCC has continued a long and fruitful relationship with ACA, working together to advocate for the counseling profession. With ACA holding its 2009 conference just a few miles down the road from our headquarters, we will take the opportunity to arrange some special events for all National Certified Counselors and enhance our conference participation to highlight NBCC’s continued support of the counseling profession. We will, of course, have our customary booth in the exhibit hall; this year, however, it will be larger, and more staff will be on hand to answer questions and provide information. In addition, this is where NCCs will be able to pick up NBCC certification ribbons to attach to their name badges. These colorful ribbons have become one of the ways to distinguish accomplished professional counselors. We invite everyone to visit our booth and meet the staff you normally only talk to via phone or e-mail.

NBCC will also host a reception to honor NCCs at the ACA Conference. This special reception, scheduled for March 22 from 5 to 7 p.m., will recognize NCCs and provide an opportunity to enjoy refreshments and mingle with other NCCs from around the globe. This is a chance for NBCC to celebrate and say “thank you” for continuing your participation in counselor certification programs. NCCs and key ACA representatives will receive additional information as details are finalized.

This annual meeting also provides an ideal time to conduct a meeting between the leadership of NBCC, ACA and the Council for Accreditation of Counseling and Related Educational Programs. We value collaboration between the professional counseling membership, accreditation and certification organizations. Regular meetings among these groups assist in the identification of goals and issues important to the continued growth of the profession.

NBCC looks forward to seeing the largest number of NCCs to ever attend an ACA Conference this March in Charlotte.

Jolie A. Long is the executive project coordinator for NBCC and its affiliates (nbcc.org).

Letters to the editor: ct@counseling.org
family hero

Situation:
To Roberto, completing his college degree meant a path to a new career and more money for his family. Most importantly, it meant showing his son it could be done. But Roberto was in the military, overseas – and the problems were distance, time and money.

SOLUTION:

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Service members are focus of ACEG two-day institute
Submitted by Linda Parker
Linda.Parker8@va.gov

This month, we highlight Jim Absher, Steve Beckman and Karol Taylor, three of the presenters at the Association for Counselors and Educators in Government-sponsored Professional Development Institute (PDI) in Charlotte, N.C., March 19-20. As indicated by our theme, “Supporting and Advocating for Our Service Members: Pre, In and Post Service,” this year’s PDI focuses on the range of services available for our service members and veterans.

Jim Absher is well-qualified to acquaint attendees with the Post-9/11 GI Bill. A Navy veteran himself, he currently serves as the GI Bill webmaster for the Veterans Affairs Central Office Education Service, a division he has worked with since 2001. When implemented in August, the bill will provide education benefits to service members and veterans who have been in service to our country post-9/11.

Steve Beckman will present an update about the activities of the Defense Activity Non-Traditional Education Support (DANTES). With DANTES since 1997, Steve has filled many roles in this organization. Currently manager of the Counselor Support Programs, he has also held the positions of guidance counselor, Troops-to-Teachers Program member and manager, and DANTES Examination Program member. Steve is a 29-year, Vietnam-era veteran of the U.S. Air Force.

In her presentation, “Creating a Successful Federal Résumé,” Karol Taylor will share the expertise she has gained as founder and owner of Taylor Your Career, a career management service providing federal résumé writing, federal job search and essay/KSA (knowledge, skills and abilities) advice, as well as her more than 28 years of federal service, including 17 years in career advising. Karol is a two-time recipient of the coveted Department of Health and Human Services Secretary’s Award for Distinguished Services.

Of special note is our Friday afternoon workshop, “Combining the MBTI and Strong for Career Development,” which is open to any American Counseling Association Conference attendee or local area individuals.

Contact Janet Wall at jwu4aac@earthlink.net for additional details. For more information about the program, go to dantes.doded.mil/dantes_web/organizations/aceg/PDI.htm.

ACCA seeking articles for online newsletter
Submitted by Greta A. Davis
davis_greta@yahoo.com

The American College Counseling Association is pleased to invite submissions for VISIONS, the association’s online newsletter. Articles chosen will present a wide array of topics of interest to college counselors working in a variety of environments with culturally diverse clients.

The deadline for proposal submissions for the next edition is Friday, April 4 at 5 p.m. Questions and submissions should be directed to VISIONS editor Cindy R. Boyle at cindyrboyle@yahoo.com. Please use “VISIONS” as the subject heading in your correspondence for quick response.

ACCA Conference events
Plan to attend ACCA-sponsored events at the ACA Conference in Charlotte!

• ACCA Committee Meetings, Saturday, March 21, 7:30-8:30 a.m.
• ACCA Forum on College Counseling, Saturday, March 21, 1-2 p.m.
• ACCA Breakfast and Business Meeting, Sunday, March 22, 7:30-9 a.m.
• ACCA Reception, Sunday, March 22, 5:30-7 p.m.

Check your conference program guide for specific room locations.

ASERVIC accepting nominations for leadership positions
Submitted by Lisa Jackson-Cherry
lisa.jackson-cherry@marymount.edu

The Association for Spiritual, Ethical and Religious Values in Counseling is accepting nominations for the positions of board member and president-elect. Board members make a commitment to hands-on service for three years. If you would like to nominate yourself or someone else, send a brief statement of interest and credentials to Michele Kiely Briggs at briggmk@jmu.edu.

PCA celebrates 40 years at annual conference
Submitted by Julie Wojtaszek and Kirsten Murray
j.a.wojtaszek@iup.edu
kmurray@iup.edu

The Pennsylvania Counseling Association held its 40th annual conference in October at the Penn Stater Conference Center in State College, Pa. The conference theme, “Exploring Our Roots as Professional Counselors,” reflected a renewed commitment to professional identity and a celebration of PCA’s 40 years.

The four-day conference provided a number of opportunities for all in attendance to gain new knowledge and connect with other professionals from around the state. The education sessions held throughout the weekend were diverse in content and included topics such as ethics, keys to running a private practice, LGBT (lesbian, gay, bisexual, transgender) issues, multicultural competencies, college counseling and supervision. A highlight of this year’s conference was ACA President Colleen...
Logan’s keynote address, “One Counselor, One World, Many Opportunities.”

Current counseling students were also recognized at this year’s conference. ACA has provided PCA with tremendous support for our Graduate Student Leadership Initiative to bolster our efforts to recognize student accomplishments and support their developing professional identity. In this spirit, ACA donated a complimentary conference registration, an ACA membership and a “box of goodies” to raffle off in support of PCA graduate students.

As 40 years have come and gone, PCA can only hope that the sense of renewal and passion generated at our most recent conference will continue well into the future. We are already looking ahead to our 41st annual conference being held in State College this October. We look forward to capturing more energy for our profession with the theme “One Voice: Promoting Our Professional Counselor Identity.” We hope you will join us for another successful conference!

EB-ACA examines wellness and habit change
Submitted by Rebecca Brickwedde

The Learning Institute “Wellness and Habit Change: Promoting Positive Change in Self and Others” was held at the European Branch of ACA Annual Conference on Nov. 8-9, 2008. Presenters Jane E. Myers and Thomas J. Sweeney are noted scholars in the area of wellness.

The Learning Institute was very informative and enjoyable. Myers interspersed bits of humor throughout the presentation, and Sweeney underscored the importance of humor in our lives, noting the positive chemical changes that endorphins and enkephalins bring about as a result of humor.

The Wheel of Wellness, developed by Myers, Sweeney and Melvin Witmer, was reviewed, and each participant was given the opportunity to take the Five Factor WEL Inventory, also developed by the presenters. Results were in the form of WEL scores, a total wellness score and scores in the specific areas of the Indivisible Self (the evidence-based model of wellness developed by Sweeney and Myers). These areas include the creative self, coping self, social self, essential self and physical self.

James Prochaska’s Stages of Change (precontemplation, contemplation, preparation, action, maintenance and termination) were also defined and discussed. Based on their WEL scores, participants were encouraged to choose an area in which they would like to promote change. Sweeney stressed the importance of creating a mental image of yourself different than you are, reminding us that “the mind does not discriminate between that which is real and that which is imagined.”

The 50th Annual EB-ACA Fall Conference will be held in Weiskirchen, Germany, from Nov. 5-8. Visit the EB-ACA website at online-infos.de/eb-aca/main.htm or eb-aca.org for updates and proposal forms. The deadline for proposal submissions is May 1. For additional information, contact Susan Stammerjohan, 2009 EB-ACA conference chair, at sasysusanna61@yahoo.com.

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The Counseling Association for Humanistic Education and Development is pleased to announce this year's top-ranked applicants for our Make a Difference Grant, which supports research with a humanistic philosophy by up-and-coming counselor educators who will make a difference in the lives of others.

This year's grant recipient is Zvi Bellin. Zvi's project, “Exploring a Holistic Approach to Personal Meaning,” acknowledges the value to psychological well-being of experiencing life as meaningful. The project seeks to ascertain how individuals' spiritual and religious cultures contribute to experiencing meaning; to better define the process of meaning making; and to discern the associations of that process with personal resilience. Zvi's study also seeks to open a new door to meaning as a concept composed of doing and being. This should aid counselors in helping clients who may feel discouraged because their path to meaning through doing seems limited by illness, aging or restricted resources.

Among the many great efforts we would like to bring to the attention of readers is our second-highest-rated project: “A Two-Weekend Alternative Model of Child-Parent Relationship Training (CPR-T)” by Sarah Moore. CPR-T, also called filial therapy, is a therapeutic intervention developed by Garry Landreth, Louise Guerney and others as a model that helps parents employ qualities of child-centered play therapy (CCPT) as therapeutic agents to their children in weekly play sessions. It empowers parents to expand the healing power of CCPT. Sarah’s study provides CPR-T in a more intensive format, aimed at allowing accessibility to more parents and to assess whether her new mode of application is as powerfully effective as previous applications.

Our third top project is “A Qualitative Inquiry of Conceptualized Heterosexual Identity Development and Counseling Process” by Breyan Haizlip. Breyan is investigating ways that self-identified heterosexual counselors conceptualize their own sexual identity and how that process impacts their ability to counsel clients of varying sexual orientations.

We encourage readers to look for the soon-to-come publications by these up-and-coming counselor educators who are working to make a difference in the lives of persons in need through works that embrace a humanistic philosophy.

**ACC has variety of sessions planned for Day of Creativity**

Submitted by Shane Haberstroh

shane.haberstroh@utsa.edu

Sunday, March 22 is the Association for Creativity in Counseling Day of Creativity at the 2009 ACA Conference in Charlotte, N.C. Division-sponsored sessions include:

- “Sunrise Reflections”
- “Creative Breakthroughs in Counseling”
- “Creative Couples Interventions for Sexual Addiction”
- “Experiential Approaches for Creativity, Connection and Growth”
- “Relational Cultural Theory and Creativity in Professional and Personal Groups”

The ACC Board is excited to present this day of learning and is also looking forward to cohosting our reception with the Association for Counselor Education and Supervision, the Association for Specialists in Group Work and Counselors for Social Justice. Join us for these events, and please visit our booth in the exhibition hall. We will have ACC member benefit information available. We look forward to visiting with you.

One of the unique ACC benefits is The Journal of Creativity in Mental Health, a hands-on, experientially based journal for practitioners and counselor educators. JCMH is currently accepting manuscripts for review. Published by the Taylor & Francis Group, JCMH is particularly interested in promoting an understanding of creative interventions in the service of forming and sustaining growth-fostering relationships. JCMH also seeks submissions that describe energy psychologies and other complementary and alternative therapies.

For more information, review the ACC website at acc-acc.org or contact either the JCMH editor, Thelma Duffey, or senior editorial assistant, Cathy Somody, at jcmh02@gmail.com.

We also invite you to visit with the ACC Board and other interested members at our ACC business meeting. The annual awards and research grants will be handed out at this time. Join us for fun, connection and creative learning opportunities. We look forward to seeing you there!
AMHCA’s Annual Conference is the only national conference devoted entirely to the mental health counseling profession. AMHCA’s 2008 Annual Conference in San Diego was a resounding success, with nearly record-setting attendance. Don’t miss out on the stellar conference being planned for July 2009 in Washington, D.C.

We’ll be staying on Capitol Hill at The Washington Court Hotel <washingtoncourthotel.com>, Visit <AMHCA.org>

KEYNOTE SPEAKER

Louis Cozolino, PhD
Dr. Cozolino is a professor of Psychology at Pepperdine University and an assistant clinical professor of Psychiatry and Biobehavioral Sciences at UCLA. He holds degrees from Harvard University and UCLA and is a practicing clinician who works with children, adolescents, and adults with a variety of challenges, and diagnoses. He is author of The Neuroscience of Psychotherapy, The Making of a Therapist, and The Neuroscience of Human Relationships: Attachment and the Developing Social Brain. Following his keynote address, Dr. Cozolino will also present a one-day Invited Track on, “Rebuilding the Brain in Psychotherapy: The Power of the Social Brain.”

David Mee-Lee, MD
Cultural Clashes in Co-Occurring Disorders: Clinical Dilemmas in Assessment and Treatment
A physician and a board-certified psychiatrist, Dr. Mee-Lee has worked for more than 25 years developing and promoting innovative behavioral health treatment that emphasizes clinical integrity, high quality, and cost-consciousness. In addition to being both a workshop trainer-teacher and a consultant, he is a prominent researcher and author in the field of addictions and mental health. A native of Australia, Dr. Mee-Lee is an expert in dual diagnosis—co-occurring substance use and mental disorders.

Eliana Gil, PhD
Integrated Approaches for the Treatment of Abused Children
Dr. Gil is director of Clinical Services for Childhelp, Inc., in Fairfax, Va., where she is developing a child abuse and neglect treatment program to provide specialized services to children and their families. She is founder and coordinator of an abused children’s treatment program in Northern Virginia, a Registered Play Therapy Supervisor, a Registered Art Therapist, and a licensed Marriage, Family, and Child Counselor. She was an adjunct faculty member at Virginia Tech for more than 10 years. Dr. Gil is bilingual and bicultural, originally from Guayaquil, Ecuador.

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Early Bird (Act by May 15)  Regular Registration (Act by June 15)  One-Day Fee (Act by June 15)
Pre-Conference Workshop  Student or Retirees  Spouse/Guest

Only one spouse or guest per registration. Spouse registrants can attend keynote address and welcome reception.

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For more information about Argosy University please call our National Admissions center at 1-800-377-0617 or go to argosy.edu to learn more.

NBCC
The National Board for Certified Counselors, Inc. and Affiliates (NBCC), an independent not-for-profit credentialing body for counselors, was incorporated in 1982 to establish and monitor a national certification system, to identify those counselors who have voluntarily sought and obtained certification, and to maintain a register of those counselors.

NBCC’s certification program recognizes counselors who have met predetermined standards in their training, experience, and performance on the National Counselor Examination for Licensure and Certification (NCE), the most portable credentialing examination in counseling. NBCC has more than 43,000 certified counselors. These counselors live and work in the US and over 50 countries.

Our examinations are used by 49 states, the District of Columbia, and Puerto Rico.

NBCC was initially created after the work of a committee of the American Counseling Association (ACA). The committee created NBCC to be an independent credentialing body.

NBCC’s flagship credential is the National Certified Counselor (NCC). NBCC offers current specialty certification in three areas:

School counseling - The National Certified School Counselor (NCSC)
Clinical mental health counseling - The Certified Clinical Mental Health Counselor (CCMHC)
Addictions counseling - The Master Addictions Counselor (MAC)

The NCC is a prerequisite or corequisite for the specialty credentials.
NBCC and its two affiliates, the Center for Credentialing and Education (CCE) and the NBCC Foundation, are headquartered in Greensboro, NC.

Brooks/Cole Publishing, a part of Cengage Learning

Brooks/Cole Publishing, a part of Cengage Learning, is in the business of helping instructors prepare future Counseling professionals to successfully work with clients, in order to help them overcome life challenges. We do this by collaborating with leading experts and educators, in order to create flexible learning tools that allow us to align our offerings with the needs of faculty and students throughout the world.

Walden University

For nearly 40 years, Walden University has been a leader in distance education for working professionals. Whether you’re interested in advancing your career, reaching a personal goal, or making a difference in the lives of others, Walden is dedicated to helping you achieve your vision of success.

Walden is the flagship online university in the Laureate International Universities network—a leading global network of more than 42 accredited online and campus-based universities in 20 countries, serving nearly half a million students on more than 100 campuses around the world.

Our academic standards are high, our curriculum reflects your interests, and our distinguished faculty members and contributing scholars are among the best in the counseling profession. With our digital library, Writing Center, faculty mentoring, and award-winning Student Support Team, we are dedicated to helping you achieve success—however you define it.

Walden’s M.S. in Mental Health Counseling program is now accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). In fact, Walden is the only school that offers a CACREP-accredited M.S. degree in Mental Health Counseling online. introduced in 2005, Walden’s counseling program was designed to be aligned with CACREP standards and helps prepare students to address and treat clients’ mental health needs knowledgeably, ethically, and with respect for diversity.

Walden offers numerous scholarship opportunities described at www.WaldenU.edu/scholarships. For more information about Walden’s M.S. in Mental Health Counseling program, call 1-800-928-6396 or visit www.WaldenU.edu/mhc.

Walden University is accredited by The Higher Learning Commission and a member of the North Central Association, www.ncahlc.org; 1-312-263-0456.

The Trevor Romain Company

The Trevor Romain Company is a supplemental educational publisher that develops innovative and sound academic curricular materials. Our mission is to promote academic achievement, and instill positive growth and self-confidence in all students through social, emotional, and physical fitness learning.
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*, biweekly e-news bulletin, *ACAe-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 listserv** provides you with free up-to-date alerts on new legislation affecting the counseling profession at the national and state level.

**Proud to be a counseling professional — Credibility**

- **Name recognition** To be recognized as an ACA member brings a wealth of prestige and credibility.
- **By stating you are a member of ACA** on your business and marketing materials assures those you serve that you are committed to the counseling profession, and that you adhere to the *ACA Code of Ethics*.
- **Put your membership on display with a frameable membership certificate.**

**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 listservs** 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!

1. MEMBER REFERRAL NAME

   Full Name ______________________ M.I. _______ Last Name ______________________
   (e.g., "Robert" not "Rob")

   Mailing Address ________________________________________________________________

   City __________________________________ State/Province _______ Zip _______ Country

   Organization _________________________________________________________________

   Work Phone ( ) __________________ Home Phone ( ) __________________ Cell No. ( ) _______

   E-mail __________________________________ Fax ( ) __________________________

[ ] 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

     Please indicate anticipated date of graduation (month/year) ______/____ and institution ________________________________.

2. Make A Voluntary Contribution (Tax Deductible)

   Optional, but a great way to support the profession!

   [ ] ACA Foundation $ __________

   [ ] David K. Brooks Jr. Distinguished Mentor Award $ __________

   [ ] Human Concerns Fund $ __________

   [ ] Legal Defense Fund $ __________

   [ ] Professional Advocacy Fund $ __________

   [ ] Gilbert & Kathleen Wrenn Award $ __________

3. Payment Method

   Total amount enclosed or to be charged $ __________

   [ ] Check or money order, payable to ACA in U.S. funds, enclosed.

   [ ] VISA [ ] MasterCard [ ] American Express [ ] Discover

   Credit Card # __________________________________________ Exp. Date ______________________

   CVC Code: AmEx (4 digits above credit card #) _______ _______ _______ VISA, MC, Discover (last 3 digits next to signature line) _______ _______ _______

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   ACA Membership - 2 years $ __________

   Voluntary Contribution(s) (Check fund(s) from #3) $ __________

   TOTAL AMOUNT REMITTED (add all items above) $ __________

   Membership in ACA means that you will abide by ACA’s bylaws and other governing documents and are qualified for the membership category selected. By becoming an ACA member, you are agreeing to be subject to the rules, regulations, and enforcement of the terms of the ACA Code of Ethics (available to you at counseling.org/ethics) that can include appropriate sanctions up to suspension or expulsion from ACA and public notice about any such action.

   There shall be no discrimination against any individual on the basis of ethnic group, race, religion, gender, sexual orientation, age, and/or disability.

[ ] Total amount to be charged (divide total amount by 3) = $ __________

   [ ] I elect to pay in 3 equal monthly installments (only available for payment by credit or debit card). A $2 processing fee will be charged on both the 2nd & 3rd installments.

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Web counseling.org • Mail Application and payment to: ACA Accounting, 5999 Stevenson Avenue, Alexandria, VA 22304

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COMING EVENTS

Fairfield University Counseling Education Spring Lecture Series March 14, April 4, April 25 Fairfield, Conn.
The Fairfield University Graduate School of Education and Allied Professions announces “Connections and Conversations: The Counselor Education Series for Human Services Professionals,” a lecture and full-day workshop series sponsored by the Department of Counseling Education. The workshops, held on Saturdays in March and April, run from 9 a.m. to 4 p.m. The registration fees, which include all materials, are $90 per workshop for practicing professionals and $35 per workshop for students. All participants can earn up to six continuing education units.

On March 14, David Capuzzi, a well-known counselor education expert who is an affiliate professor in the Department of Counselor Education, Counseling Psychology and Rehabilitation Services at Pennsylvania State University, will discuss and conduct a workshop on “The Many Facets of Grief.” Included will be information pertinent to counseling clients who are adjusting to transitions and losses, including the four tasks of mourning.

On April 4, Mary Hermann, a lawyer who holds a doctorate in counselor education, will address “Legal and Ethical Issues in Counseling.” Hermann is a counselor educator at Virginia Commonwealth University and has coedited a book on legal and ethical issues in school counseling. This workshop will assist counselors in identifying their legal and ethical responsibilities.

On April 25, Sam Gladding, chair and professor in the Department of Counseling at Wake Forest University, closes the series with “Using the Creative Arts in Counseling.” The workshop examines the theories, processes and techniques of using the creative arts in counseling. Particular attention will be given to the visual and verbal arts.

For more information or to register, contact Kim Baer at kbaer@mail.fairfield.edu or call 203.254.4000 ext. 2140.

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 or to register, visit counseling.org/conference or call 800.347.6647 ext. 222.

NOSCA National Conference April 3-5 Las Vegas
The National Office for School Counselor Advocacy of the College Board is preparing to hold its second national conference, “Destination Equity 2009: Charting Bright Futures for All Students” at Harrah’s. Join NOSCA and other school counseling professionals and educators to get a national perspective on the impact school counselors can have on equity in education and education reform in the 21st century. For more information, visit professionals.collegeboard.com/prof-dev/events/nosca.

ADARA Biennial Conference April 15-19 San Antonio
The American Deafness and Rehabilitation Association will hold its biennial conference with the theme “Harnessing the Future.” The conference will feature three tracks: rehabilitation counseling, mental health counseling and independent living. Several hundred professionals are expected to attend for professional growth and networking opportunities. For more information, visit ADARA.org or contact Doug Ditfurth, conference chair, at adara2009chair@gmail.com.

NJCA Annual Conference April 26-29 Somerset, N.J.
Join your colleagues for the New Jersey Counseling Association’s annual conference, held at the Doubletree Hotel & Executive Meeting Center. The call for poster sessions deadline is March 15, and the awards nominations submission deadline is March 24. For more information and an exhibitor application, visit njcounseling.org.

Did you know?
ACA members can download complete issues of Counseling Today from the website dating back to 2006. Visit counseling.org, click on “Publications,” then click on “Counseling Today.”
MacD Spring Conference
May 1
Columbia, Md.

The Maryland Association for Counseling and Development and Johns Hopkins University are sponsoring a conference on “Domestic Violence: Clinical and Community Interventions.” The conference will be held at Johns Hopkins’ campus in Columbia, Md. For more information, contact Elizabeth Nyang at enyang@aol.com.

AACE National Assessment and Research Annual Conference
Sept. 11-12
Norfolk, Va.

The Association for Assessment in Counseling and Education brings together professionals from across the diverse education and counseling fields that have a special interest in diagnosis, test use, evaluation and outcome research. Our mission is to promote understanding of counseling outcome research, diagnosis and the professional use of counseling, psychological tests and educational assessment tools to benefit the clients and students we serve. The keynote speaker will be Ted Remley, who will present and discuss issues related to the ethical considerations regarding admissions testing. For more information, go to theaceonline.com. Program proposals are now being accepted.

FYI

Call for submissions

The Wisconsin Counseling Journal, the journal of the Wisconsin Counseling Association, invites original manuscripts for its 2009 volume. The submission deadline for articles is March 30. The journal is focused on topics of interest to all counselors, but especially counselors in Wisconsin. Topic areas include innovative methods, theory and research, professional development and current issues affecting counseling and counselors.

To submit a manuscript, contact Mark Gillen at mark.gillen@uwrf.edu or 715.425.3890. For submission and author guidelines, visit the WCA website at www.wicounseling.org.

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. The journal is distributed quarterly. For detailed submission guidelines and areas of focus, contact editor Ned Farley at nfarley@antiochseattle.edu.

Graduate 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.

Researcher seeking relationship survey-takers

An author is seeking help with the research for a book, Secrets of Satisfied Couples. The author needs 1,000 happy, satisfied couples who have been together for at least 10 years and who are willing to take an anonymous online survey about their relationship. Couples do not have to be married or heterosexual. The author will then be interviewing 100 couples for inclusion in the book. Anyone completing the survey will receive an electronic copy of the book, and those interviewed will receive an autographed copy of the book. E-mail kim@therelationshipcenter.biz for more information on either participating or recommending participants.

Bulletin Board submission guidelines

Items for the Counseling Today Bulletin Board must be submitted via e-mail to jrollins@counseling.org with “Bulletin Board” in the subject line. Please note that not all submissions are accepted for publication. Submissions may be accepted or rejected at the discretion of the editor-in-chief. Limit submissions to 125 words or less. Announcements will be published for a maximum of three consecutive months, after which an updated version of the announcement must be resubmitted for inclusion.

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**20/20 statement of principles advances the profession**

20/20: A Vision for the Future of Counseling is a major professional initiative cosponsored by the American Counseling Association and the American Association of State Counseling Boards. Thirty counseling organizations are represented, including ACA, each ACA division and region, AASCB, the Council for Accreditation of Counseling and Related Educational Programs, the National Board for Certified Counselors, Chi Sigma Iota, the Commission on Rehabilitation Counselor Certification and the Council on Rehabilitation Education. The goal is to proactively plan for the future of professional counseling over the next decade.

Last summer, the 30 organizational delegates promulgated and unanimously approved seven Principles for Unifying and Strengthening the Profession:

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

To date, 27 of the 30 participating organizations have endorsed the Principles for Unifying and Strengthening the Profession:

- Association for Assessment in Counseling and Education
- Association for Spiritual, Ethical and Religious Values in Counseling
- American Rehabilitation Counseling Association
- Association for Adult Development and Aging
- CACREP
- AASCB
- Counseling Association for Humanistic Education and Development
- ACA
- CORE
- ACA Midwest Region
- CRCC
- ACA North Atlantic Region
- Chi Sigma Iota
- ACA Southern Region
- Counselors for Social Justice
- ACA Western Region
- International Association of Addictions and Offender Counselors
- Association for Creativity in Counseling
- International Association of Marriage and Family Counselors
- Association for Counselors and Educators in Government
- NBCC
- Association for Counselor Education and Supervision
- National Career Development Association
- Association for Multicultural Counseling and Development
- National Employment Counseling Association
- American College Counseling Association
- American Mental Health Counselors Association
- Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling
- American School Counselor Association
- Association for Specialists in Group Work

At this point, a critical mass of organizations is agreeing to the unifying principles, so the next step will be for the delegates to work on operationalizing those principles (for example, developing a clear and agreed upon definition of counseling for the public; standardizing one licensure title across all states and licensing boards). Operationalizing the seven principles will be the focus of the in-person delegates meeting at the ACA Conference in Charlotte, N.C., on March 20.

The 20/20 effort works on a consensus model; any ideas promulgated in the next phase will need to be approved by a minimum of 90 percent of the delegates. Items that reach consensus will then be sent to all participating organizations for review and ratification.

**Teams from William & Mary, Toledo earn top honors in ACA ethics competition**

The ACA Ethics Committee recently announced the winners of the annual ACA Graduate Student Ethics Competition. Each essay was reviewed by three separate reviewers from the Ethics Committee and graded on a 100-point scale for a maximum score of 300 points.

At the master’s level, 29 teams signed up to compete, and 25 essays were submitted. The case study related to a workplace issue based around the concept of dual relationships.

The winners at the master’s level are:

- In first place, the College of William & Mary with a score of 293 points. The team included Amanda Deverich, Hannah Bayne and Stacy Bolling under the guidance of Charles Gressard.
- In second place, Youngstown State University with a score of 290 points. The team included Kyle Wagner, Emily Myers and Meredith Edgar-Bailey under the guidance of Jake Protivnak.
Grad students: Prepare to enter ACAF Essay Contest

Courtland C. Lee, chair of the ACA Foundation, invites all graduate students enrolled in counseling programs to enter this year’s ACAF Graduate Student Essay Contest. The annual contest offers a top prize of $500 plus five paid ACA student memberships. The five winning essays will be published in Counseling Today. Students can write an essay of up to 750 words on either of the following topics:

Do you think there is an advantage to counselor education programs having students focus on a particular theoretical framework, or should counselor education promote a more wide-ranging and eclectic approach in training counselors?

Given how our country’s demographics have changed in a variety of ways in recent years, do you think the counseling profession has taken adequate steps to meet the needs of this nation’s changing population? If yes, in what ways have counselors or counseling changed? If no, what needs to be done?

The contest deadline is May 1. Complete contest rules can be found at counseling.org/ACAFContest.

Bob Barret Distinguished Lecture Series established

The University of North Carolina at Charlotte has established the Bob Barret Distinguished Lecture Series on Multiculturalism. Barret joined the counseling faculty in 1979 after successful careers as an elementary teacher, a high school history teacher and a counselor. Nationally known for his teaching about counseling and HIV disease, he has used his expertise to help students develop their counseling skills.

Seeing his role as a teacher extending beyond the walls of the university, Barret worked to change local media understanding of gay, lesbian, bisexual and transgender people. In his professional focus on populations frequently stigmatized, oppressed or wounded, he frequently invited the learner to “lean into” what may be an uncomfortable space and to stay there long enough for a new understanding to emerge. In 2001, Barret led a successful campaign to establish the counseling doctoral program at UNCC, which was one of the first in the country to feature a multicultural counseling core. A gifted teacher, he was selected as a finalist for the Bank of America Award for Excellence in Teaching. He was also named Distinguished Alumni by the Department of Counseling and Psychological Services and the College of Education at Georgia State University.

The lecture series was established to honor Barret’s contributions and commitment to social justice and multicultural education. A highlight of the series is the presentation of the Bob Barret Social Justice Award, presented for the first time in October 2008 to Stephanie Ansaldo, founder of the ECHO Foundation. The award is given to a counselor working to make his or her community a more accepting and compassionate place for those clients who are underserved and/or face discrimination.

Over the course of his career, Barret has been an active member of ACA, serving as president of what is now the Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling and as representative to the Governing Council. He retired in May 2008 after 29 years of teaching. The lecture series is an annual event featuring a presentation on a topic related to multicultural counseling and social justice with the purpose of drawing attention to mental health issues experienced by marginalized persons and groups.

To make a gift to the Barret Lecture Series, contact Linda Breen at lbreen@uncc.edu or 704.687.8489.

Nominations now being accepted for Voice Awards

Join with the Substance Abuse and Mental Health Services Administration to recognize individuals in the entertainment industry and mental health consumers who give a voice to people with mental health problems. The Voice Awards honor writers and producers who incorporate dignified, respectful and accurate portrayals of people with mental illnesses into film and TV productions. The awards also recognize consumer leaders who inspire others with their contributions toward promoting the social inclusion and recovery of people with mental health problems. ACA is a program partner of the SAMHSA Voice Awards.

If you know of a film or television production released between Oct. 1, 2007, and March 15, 2009, that depicts people with mental health problems in a dignified, respectful and accurate way, please nominate it for a 2009 Voice Award.

Similarly, if you know of mental health consumers who have led efforts to promote social inclusion, demonstrated that recovery is real and possible, and made a positive impact on their workplaces, communities and/or schools, please nominate them for a 2009 Consumer Leadership Voice Award.

Entertainment industry nominations will remain open until March 15. Mental health consumer nominations will remain open until May 15. Submit nominations at voiceawards.samhsa.gov. The Voice Awards will be presented at a gala ceremony in Los Angeles on Oct. 14.
CLASSIFIEDS

CALENDAR

PROFESSIONAL DEVELOPMENT WORKSHOPS – EUROPE SUMMER 2009

Adlerian Training Institute will again offer Summer Study & Travel workshops for counselors. July 21 -24 - Dublin, Ireland “Counseling for Personal, Spiritual and Relational Growth” and, July 27-30 Leiden, Netherlands "Resiliency based interventions w/ learning & behavior problems: Transcending traditional practice”. For brochure Email: adlieriantraining@aol.com or go to www. adlieriantraining.com

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Rates: Standard in-column format: $9 per line based on 30 characters per line. Five-line minimum ($45). $8 per line for advertisers pre-paying for six months. No cancellations or refunds.

Employment Classified Ads: Categories include Positions Available and Positions Wanted. Ads are listed as: International, National by State, then by Employer.

Rates: Standard in-column format: $10 per line based on 30 characters per line. Ten-line ($100) minimum.

ACA Members: If you are seeking a position you may place a 45-word ad for $10. This is a one-time insertion only.

Deadlines: Vary per issue. Contact Kathy Maguire at 607.662.4451 or kmaguire@counseling.org for further details.

Direct all copy or inquiries to Kathy Maguire via e-mail at kmaguire@counseling.org. Phone: 607.662.4451
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Ads are subject to Counseling Today approval; however, Counseling Today cannot screen or evaluate all products or services advertised in the classified section and does not guarantee their value or authenticity. The publication of an advertisement in Counseling Today is in no way an endorsement by ACA of the advertiser or the products or services advertised. Advertisers may not incorporate in subsequent advertising or promotion the fact that a product or service has been advertised in any ACA publication. ACA endorses equal opportunity practices and will not knowingly accept ads that discriminate on the basis of race, sex, religion, national origin, sexual orientation, disability or age.

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Career Advising and Career Counseling Teacher needed!
Higher Colleges of Technology, United Arab Emirates

The Higher Colleges of Technology (HCT), is a system of 16 Colleges in 7 centres in the United Arab Emirates, one of the most progressive and modern countries in the Middle East. Established in 1988 and celebrating 20 years of excellence in providing unmatched quality in education, our 16,000+ students enjoy the opportunity to learn and grow, becoming the foundation for tomorrow - taught by the experts of today. The language of instruction is English and programs are provided to a Western standard of education. Our departments are filled with faculty who are adventurers and modern thinkers, who seek both stability and new horizons, who want to make a difference, and are able to reward themselves in the process. It is an environment that both desires and produces excellence.

HCT is recruiting for August, 2009.

B. Ed. Career Advising and Career Counseling Faculty

This position is responsible for teaching in the HCT’s Bachelor of Education in Career Advising and Career Counseling program with the aim of preparing students in their chosen career to contribute to the positive development of the country. This includes preparation of course materials, provision of instruction and facilitation of learning, assessing and monitoring student progress including contribution to system and college assessment moderation processes, supervising and mentoring students on practicum placements, and contributing to the review and revision of curriculum in conjunction with the system-wide divisional academic team as required.

Requirements:

- Master’s degree in Counseling/Career Advising/Psychology from an accredited institution
- 3 years counselor education experience in a post-secondary institution with a specialty in career development or employment counseling
- Experience in developing and supervising practicum placements for students
- Fluent written and spoken English

Rewarding Compensation:

This is an exciting career opportunity that offers a competitive, tax-free salary, relocation/commencement assistance, unfurnished accommodation, tuition assistance for dependent children, 48 working days of paid annual vacation, annual air tickets for country of origin for employees and their eligible dependents, free comprehensive medical coverage for employees and their eligible dependents, a generous contract completion bonus and much more!

For a detailed job description and to apply, please visit http://recruit.hct.ac.ae

www.hct.ac.ae
KENTUCKY

LINDSEY WILSON COLLEGE
Assistant/Associate Professor of Counseling
Lindsey Wilson College is seeking applicants for Assistant/Associate Professor of Counseling and Human Services to teach in its Masters and Undergraduate programs in Kentucky, Virginia, and West Virginia. Qualifications include an earned doctorate in Counselor Education or a related mental health field, demonstrated excellence in teaching and an interest in mentoring non-traditional students. Applicants must be licensed or licensed eligible.

The Lindsey Wilson College School of Professional Counseling has been a CACREP accredited program since 1994. The masters program in Counseling and Human Development features a specialization in Clinical Mental Health Counseling. Lindsey Wilson College is an equal opportunity employer. Interested individuals should submit a letter of interest and a curriculum vita to: Angelia S. Bryant, Associate Dean, Lindsey Wilson College, School of Professional Counseling, 210 Lindsey Wilson Street, Columbia, KY 42728 email: bryanta@lindsey.edu

MICHIGAN

SPRING ARBOR UNIVERSITY
Faculty, Master of Arts in Counseling - 2 Positions
Spring Arbor University is a four year, Christian liberal arts school affiliated with the Free Methodist Church. This community of learners celebrates the heritage of an evangelical Wesleyan tradition. Hiring practices are non-denominational and there is an institutional commitment to a policy of equal employment opportunity. We are seeking qualified applicants for two full-time tenure track MA Counseling positions. A PhD in Counseling or related field required. Licensed professional counselor with supervisory status and minimum of two years post degree clinical experience required. Knowledge...
of characteristics of adult learners and teaching experience with adults desirable. Teaching load in the evenings at the off-campus sites. Serve on committees as assigned. Could include field liaison work with practicum and internship sites. This is a 12-month, 24 credit load appointment.

Complete the SAU faculty application which can be found at (http://www.arbor.edu/edu_departmentDetail.aspx?id=43506). Please send along with the completed application a vitae, and a letter of interest describing your commitment to evangelical Christian higher education to: Academic Affairs, Spring Arbor University, 106 E. Main St., Spring Arbor, MI 49283-9799. 1.800.968.9103 ext. 1356 or tmathews@arbor.edu.

MONTANA

MONTANA STATE PRISON

Clinical Therapist – (Two Positions)
Montana State Prison in Deer Lodge.
Permanent/full-time positions. $19.071 - $23.772/hr DOE plus excellent benefits. Newly-hired employees with no previous experience will be hired at the entry rate of pay for the job title and band. Newly-hired employees with relevant experience may be credited with up to three years' service for salary schedule purposes. Position is open until filled. Application & position information available from local Job Service offices and at http://www.mt.gov/statejobs/statejobs.asp. An AA/EEO employer.

NEW YORK

MARYMOUNT MANHATTAN COLLEGE

Coordinator of Health and Wellness Services
Marymount Manhattan College (MMC) is an urban, independent undergraduate liberal arts college, located in New York City, with a student body of approximately 2,000 students. The Coordinator of Health and Wellness Services has major responsibilities of providing leadership, strategic planning, program development/delivery, and treatment in the areas of emotional/physical health and wellness within the College community utilizing best practices in education, prevention, and treatment. The Coordinator will work within the Office of Counseling Services and provide individual and group psychotherapy; serve as a resource in emotional/physical health promotion, risk reduction and treatment; identify needs and develop community health initiatives; and design and implement education programs.

Duties include: Provide crisis intervention; Conduct initial evaluations and provide psychotherapy to students with drug and/or alcohol problems; Foster partnerships with health and wellness services within the greater New York community for the College community; Coordinate and advise a peer health educators program; Provide referral information to local physical and emotional support services; Assist with policy and procedure development. MINIMUM QUALIFICATIONS: A minimum of a Master's degree in social work, counseling, psychology, or related-field with New York State license as a mental health counselor in Social Work or Clinical Psychology, and minimum of two years of full-time experience in the provision of counseling services in an educational setting. Position is open until filled.

Celebrate your Branch’s success by joining your colleagues at the 2009 Branch Awards Ceremony and Reception at the 2009 ACA Annual Conference & Exposition, Saturday, March 21st at 3:00 p.m.

Awards will be given in the following categories:

- Best Community Outreach Project/Program
- Best Membership Service
- Best Journal
- Best Leadership Development Program
- Best Membership Recruitment Campaign
- Best Newsletter

The ACA Branch Awards Ceremony recognizes those branches that significantly advance and enhance the counseling profession through excellent programs, increased membership, quality communications, and community involvement.
York State professional licensure for mental health practitioners (without the need for supervision) or licensure eligible. Experience providing individual, couples, and group psychotherapy. Ability to design, prepare, deliver, and modify emotional/physical health and wellness programs. Knowledge of health education programs, policies, and trends. Experience in higher education and familiarity with college age populations and their developmental and health related issues are essential. A complete job description can be found at www.mmm.edu. MMC is an AA/EOE Submit your resume and cover letter with salary requirements to hr@mmm.edu.

PENNSYLVANIA

MARYWOOD UNIVERSITY
Assistant/Associate Professor of Counseling
Counseling/Psychology Department
The Marywood University Department of Counseling/Psychology seeks an Assistant/Associate Professor of Counseling for a tenure track position beginning August, 2009. Qualifications: Ph.D. in Counselor Education or Counseling; licensed or license-eligible as a professional counselor in Pennsylvania; degree from CACREP-accredited programs are preferred; record of research and scholarship; teaching experience; counseling and student supervision experience preferred; experience and training in one or more of the school tracks. Responsibilities: undergraduate and graduate teaching; supervision of student research; an established research agenda; participation in external funding and grant opportunities; share in department leadership; and service to the university, the discipline and local community.

The Department of Counseling/Psychology is in the Reap College of Education and Human Development. It offers three CACREP-accredited tracks: Elementary, Secondary, and Mental Health Counseling. Marywood University is a comprehensive Catholic university sponsored by the Congregation of the Sisters, Servants of the Immaculate Heart of Mary and located in northeastern Pennsylvania, easily accessible to Philadelphia, New York City, Pocono Mountains. Additional information about the University is available at www.marywood.edu. Review of applications will begin immediately. Letter of application, curriculum vita, names, phone numbers and email addresses of at least three (3) references may be submitted to: Dr. John Lemoncelli, Chair, Search Committee, Counseling/Psychology, Marywood University, 2300 Adams Avenue, Scranton, PA 18509-1598. An electronic submission is preferred as a MS Word document to: lemoncelli@marywood.edu Marywood University is an affirmative action/equal opportunity employer.
The American Counseling Association is proud of its long-standing partnership with HPSO.

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