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- ACA keynote speaker: From immigrant to advocate
- Developing a niche as a private practitioner
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### By the Numbers

#### Projected job growth for counselors

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<thead>
<tr>
<th>Occupational title</th>
<th>Employment 2006</th>
<th>Projected 2016</th>
<th>% change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance abuse and behavioral disorder counselors</td>
<td>83,000</td>
<td>112,000</td>
<td>+34%</td>
</tr>
<tr>
<td>Educational, vocational and school counselors</td>
<td>260,000</td>
<td>292,000</td>
<td>+13%</td>
</tr>
<tr>
<td>Marriage and family therapists</td>
<td>25,000</td>
<td>32,000</td>
<td>+30%</td>
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<tr>
<td>Mental health counselors</td>
<td>100,000</td>
<td>130,000</td>
<td>+30%</td>
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<tr>
<td>Rehabilitation counselors</td>
<td>141,000</td>
<td>173,000</td>
<td>+23%</td>
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<tr>
<td>Counselors, all other</td>
<td>27,000</td>
<td>32,000</td>
<td>+17%</td>
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<tr>
<td>Counselors (all titles)</td>
<td>635,000</td>
<td>771,000</td>
<td>+21%</td>
</tr>
</tbody>
</table>

According to the 2008-2009 edition of the *Occupational Outlook Handbook* produced by the U.S. Department of Labor’s Bureau of Labor Statistics, employment for counselors is expected to grow much faster than the average for all occupations through 2016. The projections and occupational titles above are from the National Employment Matrix included in the *Occupational Outlook Handbook* (data projections are rounded). For more on counseling careers, read “Running down a dream” beginning on page 34.

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From The President

Colleen R. Logan

September 2008 | Counseling Today | 5

Confronting cyberbullying

It’s hard to believe but, yes, it’s time for the school year to begin! Cooler air is moving in, we’ll soon be listening to the crisp crunch of fall leaves under our feet, jackets will once again be part of our daily uniforms … Oh, wait a minute. That’s right. I live in Dallas, where the temperature promises to lurk near 100 degrees for at least the next six weeks! Nonetheless, it’s back to school time here, there and everywhere, and it’s time for us to focus on the latest danger to our children, whether we are counseling, teaching and/or parenting. That danger is cyberbullying.

When I was in junior high school, I was bullied for myriad reasons — I had red hair, I was obese, my father was a minister who cut the grass in a suit and Wellington boots and chose to weed the lawn with a blowtorch. Plus, there was my underlying struggle to come to terms with my sexual orientation. It wasn’t pretty. I remember being mortified when the bell rang between classes because, sure enough, the “mean girls” of the late seventies would spot me from a mile away and begin singing the circus clown theme: “da, da, da-da, da-da, da da da da.” I would do anything to avoid the school hallways, pretending to need to speak with my teacher or struggling to put my books and papers in my backpack to attract as little attention as possible.

Still, my experience seems minimal to what our children and youth experience today. In 2006, authors Sameer Hinduja and Justin Patchin defined cyberbullying as the “willful and repeated harm inflicted through the medium of electronic text.” Unfortunately, earlier this year, after a group of cheerleaders in Florida filmed themselves beating up a fellow cheerleader so they could post the video to the Internet, the authors had to update their definition of cyberbullying as “the intentional and repeated harm of others through the use of computers, cell phones and other electronic devices.”

This is an evolving and serious issue in our schools and communities. Counselors need to be on the cutting edge to educate children, parents and teachers. We also need to be on the cutting edge to prevent and respond to these attacks — in whatever form they take.

I shudder to think what it would have been like for me to grow up today. I might well have been the target of cyberbullying given the constellation of experiences I shared earlier in this message. I can imagine anonymous, nasty texts and e-mails regarding my appearance, my father or, worse, my sexual orientation coming from everywhere and, yet, “nowhere.”

What would it be like to be unable to link to the person(s) writing these epithets, unable to respond, unable to defend myself? The idea that one of these verbal or physical attacks could have been quickly uploaded to YouTube for literally the entire world to see … well, it’s just unfathomable. As strange as it may seem, I would prefer to know who was bullying me and know that the act wouldn’t be played out on a world stage. But our children, youth and even adults no longer have even that slim security. We are seriously challenged to address what we cannot easily see and confront.

As we move into a new season that, for many of us, brings an exciting new school year, we need to be especially
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Judy Shepard
Ms. Shepard will share her powerful personal story and her advice on how counselors can help to make our communities and our schools safer for everyone, regardless of their race, sex, religion, or sexual orientation.

C. Adolfo Bermeo
Developing a climate of access, equity, and excellence in education for all students is the topic of keynote speaker C. Adolfo Bermeo, PhD, who is a Senior Scholar for The Pell Institute for the Study of Opportunity in Higher Education.

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<th></th>
<th>Super Saver Rate</th>
<th>Advance Rate</th>
<th>Onsite Rate</th>
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<tr>
<td>Non-Member Student</td>
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<td>$440</td>
<td>$480</td>
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</tbody>
</table>
The profession’s bright and prosperous future

And don’t forget about one other component of your network. As an ACA member, you have some pretty incredible resources at your disposal. Plus, you continue to receive these benefits at a fraction of what they actually cost and will continue to pay student rates during your first year as a “new professional,” so use these benefits as much as you can! This column is not meant to be an “infomercial” or “advertorial” for all the great stuff that membership in ACA brings so much as it is to let you know that the staff and I are here to help you meet your career goals. Also be aware that you help to keep your professors and supervisors on their toes. While they may have walked a path similar to yours several years ago, finding out what makes you “tick” is something that keeps them interested and engaged in the evolution of the profession. In some ways, the teaching that goes on is a two-way street.

I realize that as graduate students, your resources are limited. We at ACA try to take this into account when we look at the development of products, services and professional resources. The ACA leadership and staff are once again dedicating themselves this year to finding ways to make your participation and engagement with ACA affordable and valuable to you. If at all possible, I encourage you and your colleagues to join us at the ACA Annual Conference in Charlotte, N.C., next March. With more than 500 Education Sessions on dozens of topics, along with more than 100 exhibit booths, the ACA Bookstore and career placement services on-site, it would be a shame not to have you join us! For more information on this premier event, cosponsored by the North Carolina Counseling Association, go to www.counseling.org/conference.

As always, I hope you will contact me with any comments, questions or suggestions that you might have. In fact, with the launch of the “new” Counseling Today, it is even more critical that I hear from you. Please contact me via e-mail at ryep@counseling.org or by phone at 800.347.6647 ext. 231.

Thanks and be well.

Richard Yep
Executive Director
ACA members applaud new Counseling Today format

I am just writing to give the Counseling Today staff kudos regarding the new publication format. I just received my July issue and love it! It is so much easier as well as much more attractive to read. It is also easier to file away once I’m done reading the issue so I can save it for future reference.

I must admit that with the previous format, it was so daunting and difficult to read that I usually only read part of it. Starting this month, I have read it cover to cover.

I’m excited to be a part of the American Counseling Association with all it has to offer, and the membership dues are very well spent. I appreciate all the resources offered as member benefits and now feel as though I will be better able to utilize what Counseling Today has to offer. Keep up the good work!

Tami J. Frye
Cartersville, Ga.

I am on my second installment of the Counseling Today magazine, and all I can say is WOW! I have been a member of ACA since I was a graduate student, and I love the new look and transformation. I especially enjoy the columns Counselor Career Stories, New Perspectives and The Digital Psyway. I believe that The Digital Psyway is my favorite. It provides much knowledge about how to use technology in the counseling field and how to navigate it.

Kudos to the staff at Counseling Today for making the publication more user-friendly, enjoyable and easier to read.

Cherie L. Barnes
Chicago
cheriebarnes01@yahoo.com

Insurance offers extra protection to disaster response volunteers

Kathryn Foxhall wrote a great article, “Lessons learned lead to model law,” in the August issue of Counseling Today about the Uniform Emergency Volunteer Health Practitioners Act (put in place, in part, to provide liability protection for counselors and other health volunteers across state lines during emergencies).

As a point of interest, the professional liability insurance policy sponsored by the American Counseling Association provides protection 24/7 anywhere in the world for counselors who purchase the policy. The only restriction is that any claim or action must be made in a court in the United States or Canada. It is recommended that all counselors, whether employed or self-employed, carry a personal professional liability insurance policy. Then, if they volunteer to assist in a disaster, they will already have the protection they need.

Paul Nelson
Executive Director
ACA Insurance Trust
Alexandria, VA
Pnelson.acait@counseling.org

Readers salute article on understanding military culture

We personally wish to thank Col. David Fenell for his article in the June 2008 issue of Counseling Today, “A distinct culture.” With the increasing number of soldiers returning from Operations Enduring Freedom and Iraqi Freedom, it is essential that counselors understand the distinctiveness of the military community and the particular needs of those who have served. Approaching current service members as well as veterans from a multicultural perspective is essential to providing competent, ethical counseling services to those who have given service to our country.

Furthermore, for us the issue is personal. I (Michael) served in both the regular Army and the Army Reserves from 1989 to 1995. Following my term of service, I worked in the public schools of North Carolina, first as a high school teacher and later as a school counselor. During that time, I witnessed the positive impact that school counselors can have on the adjustment and success of military children during periods of parental deployment. By identifying children of deployed military parents in the student population early through registration procedures, by providing counseling services that attend to their emotional and social needs as they experience separation and loss during sustained deployment, and by developing programs that promote resiliency in all children, school counselors can provide the caring adult support that means so much to a child’s life during times of stress.

Likewise, as the spouse of a National Guard soldier, I (Cynthia) understand that families of our military are often asked to make difficult decisions and sacrifices. During times of deployment, families have many concerns and may feel overwhelmed with the day-to-day operations of life. As members of the counseling profession, we are in a unique position to make a difference in the lives of these families. The most profound differences are often in the simple yet overlooked opportunities for support. Counselors can learn more about the differences, similarities and challenges of service in all components of our military — National Guard, Reserves and active military. Also, counselors can become active in their communities and local military functions, such as homecoming celebrations and fundraisers, by contacting a local military base or Reserve/National Guard unit and offering assistance (there are often opportunities for civilians to participate in Family Readiness Activities).

By being active in our schools and communities, counselors not only increase awareness and support, but also serve to create bridges to the mental health profession for service members and their families.

Michael A. Keim and Cynthia N. Vasilas
Auburn, Ala.

College offers specialized training in equine-assisted therapy

Thank you for Angela Kennedy’s interesting article “Straight from the horse’s mouth” (June 2008). Equine-assisted therapy is a precious and unique modality of healing that has benefited countless clients who might not otherwise be reached. It is important that it be given serious consideration within the profession.

The situation for students wishing to specialize in this modality is not so bleak as your article might imply. We at Prescott College in Arizona have what we believe is perhaps the only graduate degree program
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in which students can earn a license-eligible degree in counseling psychology integrated with specialized training in equine-assisted therapy. The program, developed by Paul Smith, is increasingly attracting future counselors from across the country.

Barnaby B. Barratt
Prescott College
BBBarratt@Earthlink.net

**Better late than never**

Congrats to Jonathan Rollins for the fine article on dating violence among college students (“Students lacking education on healthy relationships”) in the September 2007 edition of *Counseling Today*. I know the article is almost a year old, but I was happy to find it on the lunch table at our agency.

Like many of our colleagues, I have a couple of master’s degrees in counseling without one hour of training in domestic violence! I got all of my training after graduate school and in the trenches. I am now clinical supervisor of a domestic violence treatment program. I can attest that the coed college dorm is not a safe place for naive young women.

Here’s another surprising fact. After 10 years of doing domestic violence work exclusively, I have taken a part-time job doing mental health intakes. I have completed 12 or 13 now, and almost every one has a DV history — physically, emotionally or sexually abused as a child or teen by family members, and/or as an adult by a domestic partner. So far, the majority are or have been suicidal.

Those who aspire to become mental health clinicians must become aware of the psychology of victims (their fear, their learned helplessness) and the psychology of batterers (their anger, insecurities and pseudo-power over their partners).

The *Counseling Today* article was well-written and timely. Thanks again.

Phil Griffin
philg98371@yahoo.com

**Clarification**

Bea Wehrly should have been acknowledged as the senior author of *Counseling Multiracial Families*, a book referenced in the July 2008 article “Adopting and adapting.” *Counseling Today* regrets the oversight.

---

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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.

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More Than a Job! Helping Your Teenagers Find Success and Satisfaction in Their Future Careers
Richard T. Lapan
Motivating adolescents to become actively engaged in their own career development is not always easy, but this book makes it fun. Written for parents, school counselors, and private practitioners who work with adolescents, More Than a Job! provides an easy-to-follow, step-by-step plan to help teenagers prepare for their future educational and career goals. Lapan’s TEAM (Targets, Examples, Assessments, Mutual Actions) approach uses a series of exercises and activities for teens and adults to do together that identify strengths and areas of concern, foster clear communication and interpersonal skills, enhance self-esteem, and increase resiliency and independence in adolescents so that they are able to work toward successful and rewarding careers.

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Congress adjourned for its monthlong August recess without taking any significant action on reauthorization of the No Child Left Behind (NCLB) Act. Nevertheless, members from both chambers continue to introduce education legislation that would help increase the number of school counselors in the nation’s neediest schools. The American Counseling Association has been working with several congressional offices to help draft this legislation and is working with the legislation’s sponsors to promote the bills.

In July, Sen. Bob Casey (D-Pa.) introduced S. 3347, the Put School Counselors Where They’re Needed Act, which aims to put more counselors in struggling secondary schools. The bill would create a competitive grant program under NCLB to help reduce the dropout rates at low-performing secondary schools. The bill is a Senate companion to H.R. 3439, similar legislation also known as the Put School Counselors Where They’re Needed Act, introduced last year by Rep. Linda Sanchez (D-Calif.). Casey’s bill states: “School counseling programs are essential for students to achieve optimal personal growth, acquire positive social skills and values, set appropriate career goals and realize full academic potential to become productive, contributing members of the world community.”

S. 3347 would establish a demonstration project providing competitive grants for funding of additional school counselors in secondary schools with dropout rates of 40 percent or higher. The legislation specifies that schools receiving a grant should aim to provide one additional school counselor per 250 students at risk, the student-to-counselor ratio recommended by the American School Counselor Association and ACA. School counselors supported through the program would work intensively with students at risk of not graduating and would collaborate with parents, teachers and others to create a comprehensive student assistance plan. Grant recipients would be required to use federal grant money to supplement, rather than supplant, local funding.

Another important bill introduced in July was the Increased Student Achievement Through Increased Student Support Act (H.R. 6654 and S. 3364, respectively), sponsored in the House by Reps. Edolphus “Ed” Towns (D-N.Y.) and Linda Sanchez, and in the Senate by Blanche Lincoln (D-Ark.), Hillary Clinton (D-N.Y.) and Thad Cochran (R-Miss.). The legislation would help increase the number of school counselors in qualified low-income schools by funding partnerships between higher education institutions that train student support professionals and local education agencies serving low-income student populations. The legislation also establishes student loan forgiveness for individuals who have served five or more school years as school counselors, school social workers or school psychologists in qualified low-income schools.

More than 20 education and mental health organizations have endorsed the legislation, including ACA, ASCA, the School Social Work Association of America and the National Association of School Psychologists. A joint statement by these four organizations stated that the legislation “provides an opportunity for schools to access the appropriately trained school-employed mental health professionals necessary to ensure that students who need the most help receive it in a timely, focused manner.”

For more information on this legislation, contact ACA Associate Director of Public Policy and Legislation Chris Campbell at 800.347.6647 ext. 241 or ccampbell@counseling.org.
Medicare mental health copay parity becomes law after veto override

A few hours after President George W. Bush vetoed H.R. 6331, legislation to increase physician payments under Medicare, Congress easily achieved the two-thirds majority needed to override his veto, with the House of Representatives voting 383-41 to enact the legislation and the Senate following suit with a 70-26 vote. Both the veto and the override votes took place July 15.

Physicians were scheduled to take a 10.6 percent pay cut July 1, but enactment of H.R. 6331 freezes payments for the rest of 2008 and increases them by 1.1 percent in 2009. On Jan. 1, 2010, however, physicians are scheduled to take a whopping 20 percent pay cut. President Bush supported maintaining physician payment rates but vetoed the legislation because it reduced payments to private sector “Medicare Advantage” plans, which are paid on average nearly 15 percent more than traditional Medicare to cover enrollees’ health care.

The new law took an important step toward improving Medicare’s outdated mental health benefit by reducing the discriminatory 50 percent copayment requirement for outpatient psychotherapy to the same 20 percent copayment required for all other outpatient services. The psychotherapy copayment rate will be reduced gradually over the next six years, reaching 20 percent in 2014.

ACA applauds the efforts of Congress to secure Medicare’s future by maintaining provider reimbursement rates and addressing mental health discrimination. Nevertheless, Medicare still needs to cover the services of licensed professional counselors. ACA and the American Mental Health Counselors Association are working diligently to increase support in Congress for counselor coverage over the next six months, including by fostering stronger grassroots advocacy by counselors.

To find out how you can help, contact Peter Atlee with ACA at 800.347.6647 ext. 242 or patlee@counseling.org.

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counseling.org
For this month’s installment of The Top Five, I had the pleasure of interviewing Marsha Linehan. In her pioneering work of Dialectic Behavior Therapy (DBT), Linehan has become a leader in the treatment of suicidal clients and victims of severe trauma. DBT seeks to move clients toward the integrated goals of acceptance and change. By accepting the circumstances in our lives, we are in a better place to start making changes. A central tenet of DBT is the practice of mindfulness.

As human beings, we endure a great deal of our suffering because we lose sight of the present moment. We spend too much of our mental energy fretting about the past or worrying about the future. In reality, the only thing that is real — the only thing we can truly experience — is right now. When we attend to our immediate surroundings and focus on our experiences as they occur, we find a much healthier and happier way of being in the world.

In my conversation with Linehan, I asked if she would share a few pointers on how we might become more mindful in our everyday living. What follows is some of the wisdom that she shared with me.

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A moment with Marsha Linehan

Living mindfully entails wisdom of the moment we're in currently. It implies being present in our lives so that we are able to be present to the universe. When we are truly being mindful, we are observing the world as it is. We approach each unique moment with curiosity and allow ourselves to have experiences without judging or adding opinions. We practice accepting the circumstances in our lives and allow ourselves to relinquish the desire to be right.

For those of us seeking this mindful lifestyle, Linehan suggests following these five guidelines.

1. Learn about mindfulness. The first step to more mindful living is to truly understand mindfulness, Linehan says. We must know what it is before we can practice it. Mindfulness goes beyond the practice of meditation. Being mindful can involve focusing our attention on the sensations of a carpet on our bare feet, feeling the way a spoonful of ice cream envelopes our tongue with flavor or noticing the temperature of the breeze on our skin. To learn more about mindfulness, Linehan encourages us to find a teacher or mentor, pick up a book or join a mindfulness group.

2. Practice, practice, practice. Mindfulness is not something we can simply expect to master, Linehan says. Rather, it must be practiced repeatedly. Inevitably, there will be times when we slip up. The key is to not give up. No matter how many times we feel ourselves losing our awareness of the present moment, we must keep starting over.

It is easy to get caught in a pattern of judging our “success” at being mindful. When this happens, Linehan advises, let go of judgment. Simply observe and attend to the present moment. The goal is not to become “good” at mindfulness but rather to just “be.”

3. Ask your computer for help. Visit the Washington Mindfulness Community website at mindfulnessdc.org/mindfulclock.html and download the Mindful Clock. This program enables your computer to sound a “mindfulness bell” at specific times. The bell can be set to ring at regular intervals or randomly.

One of the keys to mindfulness practice is not becoming habituated to a routine. Using a tool such as the mindfulness

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3–6 Boston, MA
24–27 Phoenix, AZ
24–27 Atlanta, GA

NOVEMBER
14–17 Columbus, OH
21–24 Chicago, IL
21–24 Richmond, VA
21–24 Sherman Oaks, CA
bell, whether at home or the office, can provide frequent yet unexpected reminders to return our thoughts and awareness to the present. Whether through a tone from a computer, a cell phone or a household appliance, we can all use a few helpful cues to live in the moment.

4. **Join a group.** Mindfulness centers on community. It is extremely beneficial to practice mindfulness in a group as well as on your own. Groups can employ a variety of activities for practice, and they also offer the potential advantage of providing observations and feedback from other group members. Each session can be a fruitful experience of supporting, teaching and learning from one another.

5. **Put creative reminders in your environment.** It can be quite easy to transform even everyday objects into cues for centering our attention, according to Linehan. For example, before you leave the house each day, spend an extra moment as you touch the doorknob to make sure you are living in the present moment. Ultimately, each doorknob you encounter might become a signal to ready yourself for the new environment you’re about to enter.

You might put books about mindfulness that you can regularly page through on your coffee table. Another suggestion is to leave notes throughout the house encouraging yourself to focus on the here and now. Ultimately, finding the right cues, as with mindfulness in general, is about finding what truly works for you.

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**Critical Incidents in Clinical Supervision:** Addictions, Community, and School Counseling

edited by Lawrence E. Tyson, John R. Culbreth, and Judith Harrington

“**Stop the presses! Critical Incidents in Clinical Supervision makes a major contribution to the literature by dealing with difficult, but central, real world supervision issues. This book is a must read for all supervisors and will become a mainstay of training.**”

—David J. Powell, PhD, President International Center for Health Concerns, Inc. Clinical Supervision Institute

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

Letters to the editor: ct@counseling.org
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School counselor by day, private practitioner by night

The American Counseling Association values the opportunity to honor the career paths of working counselors with the Counselor Career Stories column. In sharing their stories in this space each month, these counselors will discuss the lessons they have learned along the way. The hope is that these lessons will be very helpful to working counselors and students alike as they seek employment and further their careers. For additional assistance with career and employment issues, visit the ACA Career Center at www.counseling.org/CareerCenter/. Current online job listings may also be viewed at this site.

Debra Engel works full time as a counselor at a secondary school in Georgia, while nights and weekends find her putting on her Licensed Professional Counselor hat at her private practice. Her story is one of turning hardship into focus. From schoolteacher, to school counselor, to LPC … she has never stopped learning.

Rebecca Daniel-Burke: What is your present counseling position?

Debra Engel: I have been at the same secondary school for 18 years. For the first eight years, I was a Spanish teacher. I received a HOPE (Helping Outstanding Pupils Educationally) Scholarship and went back to school to get my master’s in counseling, then became a school counselor. That is the position I have held for the subsequent 10 years at this school. Eventually, I got my LPC and also work about 10 hours a week, or more, in a group private practice.

RDB: What led you down that path?

DE: I had always wanted to be a counselor in private practice. It was a lot of work to get my LPC, but I had a mentor. He was the social services director for the county. One of his jobs was to check in on the school counselors. He had a great, warm, personal way of counseling. He also had an LPC, so I began asking him how I could do it.

RDB: May I ask how that worked? Many of our school counselor members, and other members, would like to run a small private practice. How did you go about it?

DE: I had gotten my LPC. This counselor who owned the practice sat down with me, and we made a decision that we thought was fair. The gentleman who owned the practice needed an anger management facilitator at the time – that was my foot in the door – and I needed a space to practice. We agreed that I would give him approximately 30 percent of what I made for overhead.

RDB: What was included in overhead?

DE: Billing, insurance, appointment setting, space, utilities and phone.

RDB: That is an interesting arrangement, but first you had to get your LPC. I am interested in how you got your LPC while working as a school counselor. Many school counselors want to do this, but it is so difficult to accomplish while working full time.

DE: Interestingly enough, it was while I was going through my divorce. Things seemed so difficult at home; my children were getting older, and my marriage was ending. I focused intensely on my graduate program and my career. I poured all of that upsetting energy into getting my LPC.

RDB: So out of difficulty came something wonderful?

DE: Exactly.

RDB: What advice or career tools have you found helpful along your path?

DE: I attended lots and lots of conferences. I was constantly learning something new.

One thing I find very helpful in my work as a school counselor is my experience as a classroom teacher. I really know if my expectations for a teacher, or for a child, are realistic. I know what it means to be in a classroom with too many children. I have been that teacher.

Being a mother has helped me a lot too, watching my children go through so many stages. My daughter has become a teacher, and my son is getting his Ph.D. in chemistry. Watching their development has been fascinating.

The adolescents at my school taught me so much. I could tell when I spoke with them, they needed more help than what a school counselor could provide. They needed to go deeper. I would see a behavior such as self-injury, and I would become curious about it. Those adolescents needed to see an LPC.

RDB: What have you learned about self-injury now that you are also an LPC?

DE: My clients have taught me that it is a release of emotional pain. The physical pain takes their mind off of the emotional pain. More girls than boys report using self-injury as a coping mechanism. It is also possible that more boys than we suspect self-injure. Boys are less likely to seek counseling or to report such behaviors.

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

DE: I am passionate about helping adolescents. That specialty developed because that is who I work with at school. I really like teenagers. They are so honest. Also, they are young enough that there is still a possibility I can help mold their future behaviors. That is so satisfying.

RDB: What mistakes have you made?

DE: Once a parent called me and asked me to inform a child of a death in the family. I assumed the child would be sad,
maybe crying. Instead, the child reacted violently. I was so shocked. I learned from that experience to never anticipate what an adolescent’s reaction might be.

RDB: What other lessons have you learned?

DE: I have learned that I go back, again and again, to my training as a teacher. Sometimes I actually create a “lesson plan” for my private practice sessions. It is my way of organizing and creating a treatment strategy.

Through my divorce and all of the subsequent turmoil, I learned to focus. I poured that negative energy into realizing my dreams. My children and I got through that with focus and with humor. We laughed a lot at our situation!

I have also learned to pick my battles with adolescents. Parents tend to see their child as an extension of themselves. When you suggest a change, sometimes they take it personally. I try to give them information I have learned and educate them about the physical and emotional steps in adolescent development. I have a banner up that says, “Take responsibility for your own actions,” and that is intended for kids and parents.

RDB: You are so industrious. What’s next?

DE: I am writing a series of children’s books about counseling.

RDB: It sounds like you work a lot and give a lot. How do you fill yourself back up when you feel drained?

DE: I go to the ocean. Although I live and work in Calhoun, Ga., my current husband and I bought a home in Florida. We go there as often as we can. When I stand and look out at the ocean, my problems seem small. The waves never end. Everything comes into perspective there.

Rebecca Daniel-Burke oversees 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: ctt@counseling.org
Summer is almost over and fall is nearly here! It’s a time when recent graduates are out there actively looking for their big break (often with questions in their heads related to finding their way in the counseling field). In this issue of *New Perspectives*, a soon-to-be graduate inquires about the feasibility of starting a private practice as a new professional, and a very recent graduate has concerns about establishing a sound identity as a counselor.

Addressing their concerns with words of wisdom are this month’s professional counselor responders:

- Lynn E. Linde, president-elect of the American Counseling Association, an ACA fellow, recipient of the ACA Counselor Educator Advocacy Award and director of the school counseling program at Loyola College in Maryland.
- Stacy Jaynes Anderson, a college counselor at the University of West Georgia and previously in private practice for six years with a focus on substance abuse clients.
- Samuel T. Gladding, ACA fellow, a past president of ACA and chair of the Wake Forest University Department of Counseling.

**Dear New Perspectives:**

What advice would veteran counselors give to new counselor educators who want to establish a private practice? We don’t get any business courses or “business-like” information about starting a practice in our courses. We learn quite a bit about working for others, but for those of us with an entrepreneurial spirit, we would love to receive “quick tips” about establishing a practice (for example, intake forms, insurance, average employee salaries, employee benefits, etc.).

Stacy Anderson: In most curriculums, there is not a lot of room for information regarding the business of private practice, probably because it would take up an entire semester. Having said that, “quick tips” I do not have. However, I will attempt to answer your questions and provide resources.

Establishing a private practice requires not only an “entrepreneurial spirit” but also a great deal of intestinal fortitude. There are many things to consider when starting a new practice, such as location, client population(s), office hours, fee collection, managed care, hiring office personnel versus wearing all the hats yourself, personal liability insurance, continuing supervision or peer consultation, state of the economy (counseling is not recession-proof) and personal financial concerns such as retirement. These are just a few of many considerations.

Now, regarding your questions. Intake documentation varies based on the population served and can be a simple one-page questionnaire or a complex 10-page, all-encompassing, biopsychosocial interview. It is important during intake to provide clients with a statement of personal disclosure, informed consent, patient’s rights and provider’s responsibilities, limits of confidentiality and HIPAA regulations if you plan to accept insurance. This leads to your second question: insurance versus self-pay — managed care.

You might want to investigate how many counselors are already practicing in the area where you plan to open for business. Insurance companies place (or do not place) providers on “panels” based on what they perceive to be a “need for services.” If the area where you wish to work is already saturated with behavioral health professionals, the insurance company may reject your application to provide services. In a perfect world, counselors in private practice would only accept self-paying, self-referring, stable-enough-to-show-up-each-week-when-scheduled-and-pay-in-full clients. The decision to accept insurance remains up to the individual counselor and the insurance company.

Regarding average employee salaries, in 2008, the average salaries for administrative support staff in the health care industry ranges from $28,750 to $37,750. Some private practitioners offer benefits to employees such as health care, sick pay and vacation pay. In 2008, 97 percent of administrative support staff reported receiving vacation pay, 88 percent reported receiving sick leave and 79 percent reported receiving health
care. However, only 33 percent reported receiving flextime, 17 percent reported profit sharing and 9 percent received benefits for child care.

Maintaining a successful private practice can be very rewarding. The blood, sweat and tears on the front end can certainly pay off in the long run. If you see this response as a “challenge” rather than “discouraging,” then private practice might be right for you. One great resource for private practice information is What You Never Learned in Graduate School: A Survival Guide for Therapists by Richard J. Hazler and Jeffrey A. Kottler.

Dear New Perspectives:

I spent three years earning a master's degree in counseling from a CACREP-accredited program. As I get into the field, I find other professionals who are called counselors, but we have very different backgrounds. For example, there are certified addiction counselors who only have a high school degree, or staff workers at residential facilities whose title is “counselor” when their job is making sure people are asleep at night. If I went through this much trouble to call myself a counselor, how do I differentiate myself from other “counselors”? — New Professional (Recent Graduate), Georgia

Lynn Linde: First, congratulations on becoming a member of the profession. Sadly, what you are experiencing is all too common, and there is no instant solution. The word “counselor” has become a generic term, so much so that many of us use the term “professional counselor” to connote an advanced level of education, training and experience. It is very unfortunate that we have to resort to such measures.

While vocational counseling may have existed for over 100 years, as a unified profession and association we are still young compared with our counterparts in other mental health professions, and we have some work to do to enjoy the same recognition. We need to continually let the public know who we as professional counselors are, what our credentials are and what we do. ACA does this through its marketing, public policy and legislative efforts, and its publications.

But members like you are crucial to this effort because awareness begins at the grassroots level. You and your colleagues can advocate for the profession with stakeholders and elected officials, be part of articles and/or interviews with the local media and educate the public. The more all of us can do, the more we will be able to move ahead. My hope is that soon, we will not need to use the word “professional” before the name of our profession.

Sam Gladding: The word “counselor” is probably abused more than almost any word in the English language. Sometimes when people do not know what to call themselves, they attach the word “counselor” onto other words that describe their job. At other times, individuals who should know better do not distinguish whom they define as a counselor. This latter misuse is what has happened to you.

Your less-educated colleagues working in addiction and on the night watch are probably doing some good. However, they are paraprofessionals. You are not! You have knowledge and skills that surpass what your coworkers have. That will show in time. A CACREP-approved counseling program meets strict standards in preparing a person to be a professional. Whereas you may start in a system that does not recognize your education and abilities, your superior training will become apparent. Then others will see, as will you, that a CACREP master’s degree is worth every dime and the time it takes to acquire.

Knowledge is power, and you have that. Your background will show. When it does, you will realize anew the value of your investment. You will be able to provide helpful, humane and ethical services to others that will far exceed what those with lesser degrees will be able to offer. •

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

Letters to the editor: ct@counseling.org

My Life, My Story

Each month, “My Life, My Story” profiles an individual new to the counseling field who is proving to be exceptional. If you would like to nominate a student or new professional to be featured, e-mail dfletche@westga.edu.

Introducing … Sandra Gibson, student assistant for the New Perspectives column. Be sure to check out her article in next month’s special edition of the column.

Age: 53

Hometown: Hilliard, Ohio

Current school/program status: Recent graduate of Ashland Theological Seminary; recently passed Ohio state boards

Prior education: Bachelor's degree in philosophy, associate degree in technical communication

Counseling or internship employment spots: Smetzer Counseling Center at Ashland Theological Seminary, Wellspring Counseling in Columbus, Ohio

Greatest accomplishments: Raising two wonderful children

Keys to success: Read constantly, be curious and open to everything, always be humble enough to do hard work of self-improvement, strive to help others

When you grow up, you want to: Do what I should have pursued 30 years ago. I’ve been a counselor “in the making” since I was 16 years old, when I read and was profoundly affected by Man’s Search for Meaning by Viktor Frankl.
Q: What are the options for counselors in private practice to provide after-hours or on-call coverage? I am starting a solo practice but do not want to be on call 24/7. It seems that some counselors have a taped message advising clients to call 911 or go to the nearest emergency room.

A: We contacted American Counseling Association Director of Ethics and Professional Standards Larry Freeman, and he noted that the practice of providing a taped message advising clients to call 911 or go to the nearest emergency room is a “standard of professional practice” designed to assist clients when they cannot reach their clinician. This standard of practice can vary from agencies to practitioners depending on the type of service they provide to their clients.

We recommend 24/7 coverage for your practice. Solo practitioners can network with other practitioners to provide after-hours or on-call coverage for each other. This can be communicated via a taped message informing the client how to contact you or an on-call counselor in an emergency. Forwarding your phone to an answering service is another option, and the answering service can contact you or the on-call professional. Some communities have a crisis intervention service that will provide after-hours coverage.

If you have insurance or managed care contracts, be sure to read them. Most if not all contracts require some type of 24-hour coverage, and directing clients to call 911 or go to the nearest emergency room may not be acceptable. We have heard of managed care companies calling practices after normal business hours to ensure compliance.

Beth Powell of the American Mental Health Counselors Association directed us to AMHCA’s Standards of Clinical Practice, which states in Section E, “Responsiveness: Mental health counselors who deliver clinical services shall respond in a professional manner to all who seek their services. Comment: Mental health counselors who deliver clinical services must determine the urgency of the client’s situation and be available to see clients when needed; they must assist clients in finding appropriate and timely resources.”

Moreover, as stated in Section F, “Accessibility: Mental health counselors who deliver clinical services shall be accessible to clients. Comment: Mental health counselors who deliver clinical services must be available to clients at all times. The unscheduled needs of clients will be handled through personal answering services or by answering machines. Telephone messages must be checked regularly and calls returned promptly, accurately and respectfully. When out of town, on vacation, ill or otherwise unavailable, counselors must make arrangements for client access to other competent professionals.”

Whatever after-hours or on-call protocol you choose, it needs to be clearly written in your informed consent document. It is imperative that clients be informed of and consent to this process before an emergency occurs.

Q: If I set my fees and the (client’s) insurance pays a part of it or all of it, what if the amount paid does not
match my fees? For example, if I charge $90 to $100 and the insurance only pays $55 to $65, do I accept this payment only? How is it that I get my fees met?

A: The Explanation of Benefits (EOB) that comes with your payment denotes your fee, the amount allowed by the insurance company, the amount not allowed (your write-off), the client’s copay and the amount paid to the provider.

By agreeing to be contracted with an insurance or managed care company, you agreed to accept its payment, along with the client copay, and not to balance bill the remainder to make up for your total fee.

Managed care update

Because of the ever-changing nature of the industry, we have revised our list of insurance and managed care companies. Following is a short list of the largest companies. The full list of nearly 60 companies is offered to ACA members online at www.counseling.org/Counselors/PrivatePracticePointers.aspx.

The list has direct links to provider relations web information as well as details outlining the number of insured lives covered, paperwork necessary and reimbursement rates. Please log on to access what we believe is the most comprehensive information available.

Top 12 Insurance, Managed Care and Employee Assistance Providers

Blue Cross Blue Shield
Each state has its own Blue Cross Blue Shield; online web search: “Blue Cross Blue Shield (type in your state)”

OptumHealth Behavioral Solutions
ubhonline.com/cred/credIndex.html or optumhealth.com

Magellan Behavioral Health Services
www.magellanprovider.com

ComPsych Behavioral Health Corp.
compsych.com/jsp/en_US/core/provider/credentialing.jsp?cid=46

ValueOptions
valueoptions.com/providers/Providers.htm

American Psych Systems/APS
apshealthcare.com/provider/ProviderHome.htm

CIGNA
cigna.com/health/provider/

WellPoint Behavioral Health
wellpointbehavioral.com/pro/pro_index.html

Aetna
aetna.com/provider/credentialing.html

Managed Health Network
mhn.com/provider/content.do?mainResource=workManual&category=ww

Ceridian
ceridianprovidersolutions.com/Pages/BecomeAProvider.aspx

Horizon Health Services
www.horizonhealth.com/

We hope this information makes it easier for private practitioners to better serve their clients and to reach informed decisions on which managed care and insurance companies to join.

Correction from a reader: “On page 22 of the latest Counseling Today magazine (July issue), you made reference to the STEP Training. AGS is no longer selling STEP materials. STEP materials can now be ordered directly from www.steppublishers.com.”

The Indiana Counseling Association has tentatively scheduled us to present our private practice workshop in Indianapolis on Oct. 17. For more information, go to indianacounseling.org or call 812.323.8620.

Robert J. Walsh and Norman C. Dasenbrook are coauthors of The Complete Guide to Private Practice for Licensed Mental Health Professionals. ACA members can e-mail their questions to walshgasp@aol.com and access a series of “Private Practice Pointers” on the ACA website at www.counseling.org.

Letters to the editor: ct@counseling.org
**Resource Reviews - With Ruth Harper**

**Depression: What You Can Do!**  
Castle Works Inc., 2008, Public Broadcasting System’s In the Mix Series, $69.95 (DVD), ISBN 1-931843-05-8

It is a sad truth that today’s young adolescents (ages 10 to 15) need to know the warning signs of depression and suicide. This group is the target audience for *Depression: What You Can Do!* The DVD’s purpose is to empower teens to recognize and respond to signs of depression in themselves and others, even when it might seem they are breaking a confidence or promise to a friend in trouble. Depression is explained as an illness, not an indication of weakness, and certainly more than adolescent moodiness. The DVD also clearly addresses self-mutilation, another growing concern among the young.

This excellent new resource from PBS begins with a diverse group of 13-year-olds coming up with their own definitions of depression. The focus then moves to the survival story of a 15-year-old girl who went through serious depression. She explains how her depression started and describes both the details of her worst days and her important decision to seek help.

Her mother’s perspective regarding how she dealt with her daughter during that difficult time is included. “By teens for teens,” the slogan of the PBS In the Mix series, is exemplified by beginning the DVD with the point of view of the youths and the dramatic example of someone their own age who has experienced depression.

Schools with children ages 10 to 14 will want to obtain and utilize this DVD. Showing and discussing it with students prior to the eighth grade is a good idea. At only 22 minutes in length, this DVD can easily be used as a lesson plan for a counselor in middle school classroom guidance. Teachers and counselors may want to team up when utilizing this video, as students are likely to raise difficult questions. The topic of depression can be very sensitive, but the DVD depicts it as an issue that can be effectively treated. In that sense, it truly offers hope to young people who fear that they or their troubled friends might never feel better.

The DVD’s message strongly encourages students to talk with caring adults about depression or related challenges. School counselors are presented as a major resource for all types of counseling, not only career or academic advice. The 15-year-old girl with depression mentions that initially, she didn’t want to talk with the school counselor. Luckily, her counselor was very patient and, eventually, the girl grew comfortable enough to tell the counselor what was going on in her life. The relationship with this caring and effective school counselor made a significant and positive difference in this young woman’s recovery from depression.

The DVD pauses at moments to present checklists of warning signs of depression and suicide, then goes to a parallel checklist of what a young person can do to help. The approach is very straightforward and uses words that are comprehensible to any audience. The DVD concludes with adolescents sharing their experiences with depression and suicide. Shockingly, almost all of them have a story of a friend or family member to tell. They discuss how they handled each situation and the relative success of their interactions.

The Suicide Prevention Resource Center reports (2007) that 21 percent of youths younger than age 18 who died by suicide had made a prior attempt, and 31 percent had told someone they were thinking of suicide. This DVD can literally make the difference between life and death when teens are in crisis. The DVD can give teens the confidence they need to reach out for help when they experience or hear about these circumstances.

The school counselor shown in the DVD gives wonderfully realistic and useful advice to parents, teachers and children about how to interact with someone engaging in self-harming behavior. The PBS and In the Mix crews do a superb job of being pragmatic in their depiction of depression and suicide — issues unfortunately prevalent among adolescents today.

**No More Bets, Please: Overcoming Problem Gambling**  

This 40-minute DVD portrays the life of a gambler from all perspectives, including those of family members, addicts and professional counselors. In the DVD, addicts discuss detailed stories of addiction and how they are surviving, in recovery, today. *No More Bets, Please!* also demystifies some of the issues around gambling by having professional blackjack players and people who build slot machines explain the intricacies behind the games of chance. The DVD graphically illustrates how gambling is a huge risk to the families and friends of those addicted; gambling is compared with other addictions such as alcoholism.

Gambling addicts in treatment, students and counselors in any venue will benefit from viewing this DVD. It
could be used on a university campus for students learning about addictions. Addicts and their families will also find it helpful as a means for strengthening support and understanding of a most difficult habit. Excellent strategies and techniques for staying out of the gambling lifestyle are presented.

All of the addicts depicted in the DVD sought out counseling and attend support groups regularly. They mention their need for ongoing group participation and also the benefits of backing from friends and family. Some, after years of counseling, still contact their therapists as needed. Gambling is a difficult addiction to beat, despite the widespread knowledge that “winning big” is extremely unlikely.

The addicts also speak about the shame felt through the secret life of gambling. The truth about many gambling myths, the effects of counseling and recovery tips for maintaining a lasting change are also shared in detail. Including even more strategies for counselors would strengthen this resource.

As gambling continues to grow as a public health issue, counselors will be seeking additional ways to assess and treat clients with gambling problems. This DVD is a good, useful resource that provides straight talk and hope for gambling addicts and solid information for those living or working with those struggling with this addiction.

*If You Don’t Take Care of Your Body Where Else Are You Going to Live?* and *Bullies Are a Pain in the Brain*

Presented by Trevor Romain, 2004, Porchlight Home Entertainment. $45 each (DVD), Product Nos. 0217 and 0212, respectively

*If You Don’t Take Care of Your Body* teaches young children (ages 6 and up) to get exercise and eat healthy foods. *Bullies Are a Pain in the Brain* shows kids how to talk and interact effectively with bullies. Both DVDs are educational, humorous, interesting and offer sound suggestions to young people. School counselors will find these DVDs ideal for classroom guidance with
children ages 6 to 10. Older children are likely to benefit more from different resources.

Trevor Romain uses language that the targeted age group will understand; ideas are presented in entertaining ways that will catch the attention of most children. The DVDs feature cartoon skits approximately 20 minutes long, which is also appropriate for youngsters. Following the skits, Romain offers direct advice that can be shown and discussed later during classroom guidance.

These DVDs can be used interactively with a class as it watches. Either DVD could serve as a school counselor’s lesson plan for the day. Romain does a nice job of portraying culturally diverse characters; however, diversity among gender roles could be strengthened by adding more active female characters. But overall, these DVDs and related resources at the Trevor Romain website (trevorromain.com) are useful for elementary school counselors.

All DVDs were reviewed by Lindsie Bartley, graduate student, and Ruth Harper, professor, counseling and human resource development, South Dakota State University.

Recent books by ACA members

Book announcements are listed here for informational purposes only. Inclusion does not necessarily indicate an endorsement by Counseling Today, Resource Reviews or the American Counseling Association. Book descriptions are provided by the authors or their publishing houses.

*Coping With Chronic Illness and Disability: Theoretical, Empirical and Clinical Aspects* edited by Erin Martz and Hanoch Livneh, Springer
Covering a range of chronic illnesses and disabilities, this book examines the scientific literature published on how individuals cope in these circumstances. Written for counselors, psychologists, social workers and others who work with individuals with chronic illnesses and disabilities on a range of life issues, the book also offers multiple theoretical perspectives, as well as suggestions for interventions.

*Making the Grade With ADD: A Student’s Guide to Succeeding in College With Attention Deficit Disorder* by Stephanie Moulton Sarkis, New Harbinger Publications Inc.
This easy-to-use guide will help your clients create study habits that work with their attention deficit disorder in productive and positive ways. They’ll also learn how to set up a class schedule with their ADD in mind, get along with roommates and establish a comfortable living situation, stay focused, take notes, study when surrounded by distractions, get help at their campus health center when needed and make time for socializing and extracurricular activities.

*Straight Acting: Gay Men, Masculinity and Finding True Love* by Angelo Pezzote, Kensington Books
In this self-help literature, the author draws upon his personal and professional education and experience as a gay psychotherapist and advice columnist specializing in gender and sexuality. Looking through the lens of masculinity, he examines how cultural norms for American males and antigay sentiment breed traumatic internalized homonegativity in gay men, oppressing them and their relationships. He also provides a basis for change, empowering readers to form new conceptions of masculinity that allow for true intimacy.

Counseling Today is pleased to publish announcements of recent books written or edited by ACA members. If you are an ACA member and have had a book published since the beginning of the year, send an e-mail to Jonathan Rollins (jrollins@counseling.org) with the following information: author’s/editor’s name, ACA membership number, title of book, publisher (no self-published titles please), date published and a one- to two-sentence description of the book’s main focus, purpose or audience.

Each book will be listed only once. However, books listed in this section are still eligible for a full review in Resource Reviews if a copy is provided to column editor Ruth Harper. Due to the volume of books received, a full published review is not guaranteed.
**Counseling Today Quiz – September 2008**

As you are reading the following articles you should be able to answer the questions below. This is an “open-book” exam. Use this page or a photocopy. Mark your answers by pressing down hard and completely filling in one circle per question. Then mail it with a $18 payment to the address below. **Please do not send cash.**

**“Running Down a Dream”**

1. In addition to carrying out traditional counseling functions, Corey notes that counselors now are expected to function in all of the following alternative roles EXCEPT:
   - a. Advocate.
   - b. Educator.
   - c. Consultant.
   - d. Adviser.

2. The majority of cases that Blakely handles in Singapore are __ issues.
   - a. marriage and family
   - b. addictions and substance abuse
   - c. advocacy
   - d. psychiatric

**“Counselor Trainees in the Operating Room”**

3. Morabito notes that all of the following were therapeutic interventions that appeared to be most helpful to patients:
   - a. cognitive restructuring
   - b. imagery relaxation
   - c. spiritually focused meditation
   - d. music therapy

**“Pitch Your Niche”**

4. According to Newport, when and if an area of specialization finds us, it is our to serve that population.
   - a. gift
   - b. obligation
   - c. own lesson
   - d. All of the above

5. According to Burlow, a practice in a specific area of counseling offers the following benefit(s):
   - a. Word-of-mouth advertising tends to be more effective.
   - b. Clients and their friends tend to remember exactly what you do.
   - c. You can target your networking and advertising more productively.
   - d. All of the above

**“Behind the Book”**

6. Arthur and Pederson enlisted the aid of more than ____ contributors for this project.
   - a. 20
   - b. 40
   - c. 60
   - d. 80

7. According to Pederson, each contains hundreds of potentially salient cultural identities.
   - a. story
   - b. chapter
   - c. incident
   - d. interaction

**“The Digital Psyway”**

8. The article notes all of the following about Internet-based counseling EXCEPT:
   - a. It has significant legal, ethical and efficacy implications.
   - b. It requires technology competence.
   - c. It is controversial.
   - d. It is a growing field that is gaining more credibility.

**“The Top Five”**

9. When we live mindfully, we approach each unique moment with:
   - a. curiosity.
   - b. clarity.
   - c. receptivity.
   - d. our full selves.

10. According to Linehan, mindfulness centers on:
    - a. emptiness.
    - b. stillness.
    - c. community.
    - d. observation.
Modern transportation, international business, military operations, opportunities for study and work in other countries. These are just a few factors that have led to vast increases in the number of people around the world who are experiencing the challenges that come with living outside their native land and culture. For the counseling profession, this has meant increased opportunities — and challenges — in serving international migrants while understanding and meeting the special demands of multicultural counseling.

Case Incidents in Counseling for International Transitions is a collection of case incidents that draws on the experiences of counselors from around the world to provide real-life stories of international transitions. The book addresses the psychosocial challenges faced by global migrants, whether moving to opportunities in a new environment and culture or returning once again to their home countries. This practical resource book addresses the nature of the problems and challenges that cross-cultural transitions bring to clients from around the world.

Editor Nancy Arthur is a professor in the Division of Applied Psychology, Faculty of Education, and is a Canada research chair in Professional Education at the University of Calgary, Alberta, Canada. Her past experience has included working as a psychologist in private practice, as well as a counselor for 15 years with the Southern Alberta Institute of Technology, including the coordination of services of international students. She is the author of Counseling International Students: Clients From Around the World.

Coeditor Paul Pedersen currently is a visiting professor in the Department of Psychology at the University of Hawaii. His past teaching experience has included work at the University of Minnesota, Syracuse University, the University of Alabama at Birmingham and six years teaching in universities in Taiwan, Malaysia and Indonesia. He has authored, coauthored or edited some 45 books and more than 200 articles, chapters and monographs related to multicultural counseling and international communication. His service activities have included three years as president of the Society for Intercultural Education, Training and Research.

Counseling Today: What prompted the creation of this book at this time?

Nancy Arthur: Counselors today often work with clients whose counseling issues center on their experience of international transitions. There are increasing opportunities for people to study and work in other countries, and they need to be prepared for living in new cultural contexts and for returning home.

Paul Pedersen: Although there is comparatively little literature on counseling in the international context, there is a rapidly increasing demand by counselors both in the U.S. and in other countries for reliable information related to counseling international clients. We thought stories, critical incidents or case examples would be a good place to start to help readers appreciate the nature of international transitions and to provide conceptual models to guide counseling.

CT: This book presents incidents and analysis from a number of experienced counselors.

NA: We wanted to draw on the experience of counselors with international experience both in collecting the case incidents being presented, as well as in providing responses to the various incidents. We enlisted the aid of more than 60 contributors for this project.

PP: It was important for us to include international authors to open the scope of perspectives for guiding readers on this topic. Our contributors represent counselors living in 12 different countries. Our feeling was that “they” know much more about us than “we” do about them.

CT: Why did you choose to do the book as one of “case incidents”?

NA: We started by collecting critical incidents, but as they grew in length and detail to be more like case studies, we compromised by inventing a new concept of “case incidents.” We wanted to include real-life examples based on the authors’ personal experiences, as well as their experiences in counseling for international transitions. The qualitative data from these incidents will help the reader frame the “right” questions to ask in future quantitative research and in counseling practice.

PP: We also felt that these stories or incidents provided an opportunity for “conversation” between the reader and the incident author about what was done, what was not done, why and with what consequences. Each incident tests the reader’s ability to see counseling from the client’s viewpoint. The incidents are useful to promote class discussion, to test the reader’s competence and to “try on” other approaches to counseling. On the final reading of the book, I counted more than two dozen uniquely unconventional approaches to counseling being used by the incident authors.

CT: Are counselors today being adequately trained to deal with multicultural issues?

PP: Generally, we have not ventured beyond including a “token” course in culture in the typical counseling curriculum and making cosmetic adjustments in adapting counseling theory and methods to a variety of other cultural contexts. By reducing multiculturalism to a list of rules to follow, we are sometimes guilty of nurturing counselors who, rather than
making culture central to the counseling process, find ways to protect the status quo and marginalize culture without breaking the rules.

**NA:** One of the most important foundations in multicultural counseling is being open to multiple points of view. We wanted to provide readers with a variety of case incidents and expert responses to help them strengthen multicultural perspectives. We hope that the book will help counselors to see how international transitions challenge clients regarding their personal cultural beliefs. In turn, we hope that the book challenges counselors to consider their own cultural beliefs and how their views of the case incidents are culturally bound.

**CT:** What steps did you take to ensure a wide range of diversity in the case incidents being presented?

**PP:** Each incident contains hundreds of potentially salient cultural identities. By guiding the authors toward identifying a salient cultural feature, we were able to create a variety of cultural contexts to challenge the reader.

**NA:** And in addition to having an international base of contributors, the case incidents are based in many different parts of the world. The authors have considerable experience of living and working across cultures. The diversity of authorship is reflected in the wealth of theoretical and practical experiences represented in the case incidents and author responses.

**CT:** Do various populations present unique counseling issues, or is there a commonality regarding issues regardless of the country of origin and the culture?

**NA:** The authors have provided insights into the unique issues faced by individuals and groups of people during international transitions. The nuances of individual circumstances always make international transitions unique. At the same time, there are common issues facing people when crossing countries and cultures as they negotiate their identities, relationships and roles.

**CT:** Do you see this book as a theoretical background text or as a practical handbook for counselors working with an international clientele?

**PP:** Both. The saying “nothing is more practical than a good theory” is true. The saying “experience is the best teacher” is probably also true. The incidents offer a variety of different contexts for the reader to test the efficacy of different theories in their application. The book is designed to promote discussion and provoke controversy in the discussion of counseling across cultures seen from a variety of different perspectives.

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Case Incidents in Counseling for International Transitions (Order #72862) can be ordered directly through the American Counseling Association online bookstore at www.counseling.org or by calling the ACA order line at 800.422.2648 ext. 222. The cost is $36.95 for members and $59.95 for nonmembers.

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

Letters to the editor: ct@counseling.org

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What’s in your tech mailbox (Part 2)

This month’s Digital Psyway is a continuation of last month’s discussion on counselor technology tools based on the 2007 Technical Competencies for Counselor Education established by the Association for Counselor Education and Supervision, a division of the American Counseling Association. The ACES competencies were developed with the practicing counselor and counselor educator in mind. In the last issue, we covered the first half of the competencies related to productivity software, tech equipment, multimedia development, statistical software, Internet testing and e-mail. This issue includes the remaining competencies for practicing counselors.

Links to the complete 2007 ACES Technical Competencies for Counselor Education and the other resources included in this article are available on the companion web blog at digitalpsyway.typepad.com.

Competency 7: Be able to use the Internet effectively as a resource for clients and yourself.

The Internet has revolutionized how information is obtained and disseminated, and knowing how to leverage this tool to its fullest is a critical counseling skill. Information is abundant about careers, employment opportunities (for clients and counselors), education and training opportunities, financial assistance/scholarships, treatment procedures, and social and personal information. The question is no longer can I find what I need on the Internet, but rather can I find the best of what I need on the Internet?

Using the Internet effectively entails more than knowing how to open a browser and use Google. Using advanced search techniques such as Boolean search terms (“and,” “or” and “not”), isolating specific phrases or sets of keywords with quotation marks and limiting searches to a specific website or type of file can narrow your search results so you can find the best information more quickly. A quick example: Searching Google for “school counseling” returns about 3,560,000 results. Searching for “school counseling” returns 812,000 results, almost an 80 percent reduction.

Once you have found the information, the next task is to evaluate its quality. Key points to consider when establishing the quality of the information you are viewing on the Internet are the publication date of the page, author (and contact information) and the website itself (a blog versus a government website, for example). Remember, just because something exists on the Internet does not make it credible!

- Susan E. Beck’s Evaluation of Web Sources Guide – lib.nmsu.edu/instruction/evalcrit.html
- The Web Search Help Center – google.com/help/refinesearch.html
- A Short and Easy Search Engine Tutorial – pandia.com/goalgetter/index.html

Competency 8: Be able to subscribe and participate in counseling-related Listservs or other Internet-based professional communication applications.

Participating in Internet-based professional communities ensures that counseling professionals have a vehicle for both sharing and obtaining information and provides a mechanism for maintaining professional connections without regard to time or space boundaries. Whereas Listservs (basically large-scale, topic-specific e-mail lists) and chat rooms were once very common ways to communicate with large numbers of people on the Internet, they are being replaced today with social networks, discussion forums, blogs, RSS feeds and instant messaging.

- CESNET; Counselor Education and Supervision Network – listserv.kent.edu/archives/cesnet-l.html
- COUNGRADS, an International Listserv for Counselor Education Students – coe.ohio-state.edu/dgran ello/listserv_information.htm
- Google Scholar – scholar.google.com
- Google Scholar – scholar.google.com

Competency 9: Be able to access and use counseling-related research databases.

The professional literature and research knowledge base grow each year. Knowing how to access databases enhances a counselor’s practice by providing tools to find meaningful and relevant research-based knowledge. CD-ROM databases of the 1990s have given way to Internet-based databases, such as PsycINFO, ERIC, Academic Search Premier and many others to which university libraries routinely subscribe. Counselors working in the field may be able to access these databases via public libraries or their alma mater’s library, by using tools such as Google Scholar or The Free Library or by accessing online archives of professional association journals.

- The Free Library – thefreelibrary.com
- Google Scholar – scholar.google.com

Competency 10: Be able to use the Internet to locate, evaluate and use continuing education, professional development and supervision options in counseling.

There is an increased availability of continuing education options publicized through Internet channels and user-friendly access to self-study programs for professional development that meet licensure or certification standards. This competency requires counselors to develop skills in searching the Internet to evaluate the appropriateness of, register for and complete requirements for online professional development. Competence in accessing technology-supported education and development options strengthens practice and supports lifelong learning as a core value of the profession.

- ACA Online Learning – counseling.org/Resources/OnlineLearning.aspx
- NBCC Continuing Education Providers – nbcc.org/continuing_ed_providers
Competency 11: Be able to perform basic computer operation and maintenance tasks.

Understanding basic computer operation and maintenance tasks enables counseling professionals to ensure their digital information is safe and secure. A counselor’s ability to apply basic computer troubleshooting operation allows for increased productivity. Counselors should be able to solve and prevent common problems such as connecting to the Internet or peripheral devices, finding files and folders and having a backup system in place.

Having firewall and antivirus software on your computer and keeping your operating system and applications up-to-date are critical to ensuring your computer system does not get compromised. Thousands of new “malware” programs are created each year, and some require doing nothing more than visiting a website to do damage to your computer. Most recent computer operating systems are now set to retrieve and install updates automatically and have protective firewalls built in. Antivirus software does not typically come with your computer; you will need to purchase it or download free software. Check with your Internet service provider because it may provide you with free antivirus software as part of your service. The links below are free security software and maintenance for Windows-based computers. Apple computers have the necessary firewall/antivirus software built into their operating systems.

- AVG Free Antivirus Software – free.avg.com
- Zone Alarm Free Firewall – zonealarm.com/store/content/catalog/products/zonealarm_free_firewall.jsp
- Basic Computer Maintenance Tips – hubpages.com/hub/basic-computer-maintenance

Competency 12: Be knowledgeable about legal, ethical and efficacy issues associated with delivery of counseling services via the Internet.

The use of the Internet as a counseling tool has significant legal, ethical and efficacy implications. Knowledge of both federal and state laws related to Internet-based counseling and ethical guidelines from professional organizations can ensure that these services meet the legal and ethical standards of the profession as well as contemporary standards for efficacy of practice. Counselors who participate in “cybercounseling” should acquire technology competence related to computer-mediated applications used with this form of counseling delivery.

Internet-based counseling is controversial; the problems and merits associated with it will not be debated here. What is clear is that the world in which our clients live is increasingly permeated with electronic communication. Text messages and e-mail (on computers and cell phones), chat rooms, discussion boards and social networking websites are all mediums for connecting with people. These mediums are supplanting “traditional” face-to-face conversation and allowing people to form relationships they might not have otherwise.

- NBCC’s “The Practice of Internet Counseling” – nbcc.org/webethics2
- American School Counselor Association’s Ethical Standards for School Counselors – schoolcounselor.org/content.asp?contentid=173

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

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For me, one of the best benefits of professional membership is receiving the scholarly journal associated with the organization. In the case of the American Counseling Association, in addition to the flagship journal (the Journal of Counseling & Development), the divisions also publish journals; this collection provides a wide assortment of articles to explore. Although every journal contains articles of high interest, it is my difficult task to select those articles upon which I will comment in this column. The process of selection is a personal one, and my choices are not meant to suggest in any way that these articles are the only ones of value in the current issues of our scholarly literature. My intention is to highlight current research articles, but I will also include some theoretical articles that make important contributions.

For my first Spotlight on Journals column, I have selected two groups of articles that focus on important issues in the field. One group deals with aspects of multicultural counseling, while the other addresses treatment of juvenile sex offenders. The first topic gets considerable attention in the literature, while the second is frequently reserved for highly specialized journals. The new perspectives offered by these articles add to our knowledge base and challenge us to think more broadly about these subjects.

**Assessing multicultural competencies**

As awareness of the importance of multicultural issues in counseling increased in the profession, a number of instruments were developed to assess multicultural awareness, knowledge and skills in counselors and counselor trainees. Existing measures rely on self-ratings of multicultural competence. Brenda Y. Cartwright, Judy Daniels and Shuqiang Zhang point out the problem of social desirability in such methods in “Assessing Multicultural Competence: Perceived Versus Demonstrated Performance” in the Summer 2008 special issue on multicultural counseling of the Journal of Counseling & Development. They used a new measure, the Multicultural Counseling Assessment Survey developed by Michael D’Andrea, in their study. This assessment uses observer ratings of multicultural competencies exhibited in a videotaped role-play of a multicultural counseling session.

As expected, statistically significant differences were detected between observer ratings and self-reported competencies, with the observer ratings being lower than the self-ratings for all competencies. Although the authors do not report effect sizes, they were all large, meaning the magnitude of the differences between the self-reports and observer ratings was substantial. Interestingly, the smallest difference was in the skills ratings. Although the small sample size was a limitation, the efforts to design a more accurate, predictive and objective way to evaluate multicultural counseling competencies is an important step forward for the field.

**Multiculturalism, diversity and social advocacy in CES**

“Multiculturalism, Diversity and Social Advocacy: A 17-Year Content Analysis of Counselor Education and Supervision” by Shannon D. Smith, Kok-Mun Ng, Jesse Brinson and Evgenia Mityagin in the June 2008 issue of Counselor Education and Supervision clarifies the distinctions between multiculturalism, diversity and social advocacy, which are sometimes treated as synonymous terms. Multiculturalism refers to discussions about racial and ethnic groups, while diversity is a broader construct that includes age, gender, ability status, sexual orientation, social class, religion and so forth. Social advocacy refers to active efforts to reduce social injustices in society and is increasingly being emphasized as a responsibility of counselors.

The authors conducted a content analysis of articles published in CES to determine how well these topics had been covered in the journal from 1989 to 2005. Of the 460 articles published in the journal, 17 percent focused on multiculturalism (40 articles), diversity (30 articles) or social advocacy (eight articles). Less than half of these were empirical studies, with slightly more theoretical articles.

Because this journal’s readers are counselor educators and supervisors, it is not surprising that all but one article were geared to that audience, with the exception being written for practitioners. The majority of research articles (62 percent) examined specific diverse groups, while a smaller number (24 percent) focused on specific cultural groups. Importantly, no research article reported on social advocacy issues. Other notably absent topics were indigenous healing, academic achievement, immigration and specific interventions for diverse groups.

Although the authors consider the total proportion of articles on multiculturalism, diversity or social advocacy to be adequate, they encourage more research articles and more attention to social advocacy. They also wisely observed a deficit in
articles on evidence-based practices for counselor training and supervision, and recommended this area be expanded.

**Culturalist perspective ignored?**

Justin C. Perry, Anmol Satiani, Kevin T. Henze, Jackquelyn Mascher and Janet E. Helms addressed the frequently inflammatory subject of cultural and racial differences on standardized tests of cognitive ability in “Why Is There Still No Study of Cultural Equivalence in Standardized Cognitive Ability Tests?” published in the Journal of Multicultural Counseling and Development (July 2008). These authors identified a 1992 article by Helms as a pivotal one in the longstanding (and sometimes acrimonious) debate on this issue.

In that 1992 article, Helms proposed a culturalist perspective to explain the gap in test scores between Blacks and Whites. Unlike the two prevalent views (biological and environmental views), this way of conceptualizing the problem suggested that the gap was caused by cultural bias in the tests and the testing process, and Helms recommended a program of research to test the theory. Perry’s research team then searched for references to the 1992 Helms article in the scholarly literature up to February 2004 and found 74 citations, of which 28 were empirical research and 46 were theoretical. They identified seven general categories and a number of subthemes, but notably absent from the literature was extensive testing of Helms’ theory. Only four studies attempted to investigate any of the questions generated by the theory.

In answering their question, “Why has this research not been produced?” the authors speculate that the research methods required to test hypotheses derived from the theory are complex and labor-intensive to conduct and require the use of sophisticated statistical procedures. The authors propose several lines of inquiry that could be pursued; it would be useful if any researchers chose to rise to this challenge, given the importance of the issue to American education.

**Using an existential approach with adolescent sex offenders**

I worked with adolescent sex offenders in a clinical setting, so I was delighted to see two useful journal articles on this topic. In their article in the Spring 2008 issue of *The Journal of Humanistic Counseling, Education and Development*, “Using Existential-Humanistic Approaches in Counseling Adolescents With Inappropriate Sexual Behaviors,” Mark S. Parrish, Rebecca P. Stanard and Debra C. Cobia recommend using existential-humanistic approaches to treat this population. They acknowledge the prevalence of cognitive-behavioral approaches to treat the sex offending behaviors but also point out the importance of treating comorbid conditions. The injection of existential and humanistic counseling approaches provides the clinician with a meaningful way to address the common issues of depression, trauma, relationships and identity development in this clientele.

The strength of this article is the clarity with which the authors describe how an existential approach can contribute to the overall gains for the client while enhancing the cognitive-behavioral components of treatment. The authors also emphasize the importance of sensitivity to cultural differences in clients and provide helpful guidelines for ensuring culturally competent treatment for this population.

**Strategies for empathy development**

Although the importance of including empathy development in treatment for adolescent sex offenders has long been recognized, Nancy G. Calley and Sherri Gerber provide a specific set of counseling strategies that are incorporated into treatment in a developmental sequence in their article “Empathy-Promoting Counseling Strategies for Juvenile Sex Offenders: A Developmental Approach” (April 2008 *Journal of Addictions & Offender Counseling*, Special Issue on Counseling Clients Who Offend). The strategies are expressive masks, empathy letters, victim-focused offense re-enactment, mock apology, and balanced and restorative justice activities. Each strategy is described in detail and a case illustration is provided from a group-based residential treatment program.

Although no empirical data exist to support these strategies, the authors provide clear rationale for the selection and use of each one and recommend that empirical evaluation studies be undertaken to evaluate this model.

I have shared these two articles with clinicians in the field and look forward to seeing empirical studies of the model in future publications. 🍊

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, the author of Essential Topics for the Helping Professional and is currently working on a book on cyberbullying to be published by ACA. Contact her at sherib@u.arizona.edu.

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Running down a dream

According to the 2008-2009 edition of the Occupational Outlook Handbook produced by the U.S. Department of Labor’s Bureau of Labor Statistics, counselors held approximately 635,000 jobs in 2006. Those jobs were spread across various counseling specialties as follows:

- Educational, vocational (career or employment) and school counselors — 260,000
- Rehabilitation counselors — 141,000
- Mental health counselors — 100,000
- Substance abuse and behavioral disorder counselors — 83,000
- Marriage and family therapists — 25,000
- Counselors, all other (examples provided in the handbook include gerontological, multicultural and genetic counselors) — 27,000

While projections vary by specialty, the Occupational Outlook Handbook says that overall employment of counselors is expected to increase 21 percent between 2006 and 2016, much faster than the average for all occupations. The handbook attributes this growth to a number of reasons, including growing recognition by insurance companies that counselors are well-trained and effective professionals and growing recognition by the public that counselors offer valuable services for a variety of life’s challenges. In fact, according to the handbook, job openings for counselors are expected to exceed the number of graduates from counseling programs.

Given the increased demand for and recognition of their abilities, some counselors are also finding it an opportune time to take the career path less traveled by moving outside the realm of the “traditional” counseling career. And in the process of exploring these “nontraditional” counseling careers, they are making inroads for counselor identity and expanding public perception of what counselors are capable of doing.

“There are many emerging areas within the counseling profession that I do not think existed when I was in my own counselor education program during the 1960s,” says Gerald “Jerry” Corey, professor emeritus of human services and counseling at California State University at Fullerton and an American Counseling Association fellow. “Just one of these career options is crisis intervention and counselors who devote most of their professional time in working with people who are in crisis or who have experienced trauma. Over the past decade, I think there has been increasing interest in working with people who have experienced a wide range of traumatic situations. This requires counselors to develop competencies in a variety of brief forms of therapy and to design alternatives to seeing people for the standard one-hour counseling session in an office. There has also been a great deal of attention over the past decade in working with older adults. Another area that has developed is working with people who are returning from military service, as well as with their families.

“In addition to carrying out traditional counseling functions, counselors now are expected to function in alternative roles, especially if they are working in community agencies. A few of these roles include advocate, consultant, change agent and adviser. Today, counselors have opportunities for going into the community and thinking of ways to assist groups within the community to develop their resources for solving their own problems. In many ways, the range of career options has expanded greatly since the time I entered the counseling profession. These options may be limited only by one’s imagination.”

Corey says the guiding principle he has used to create a meaningful career path for himself is to follow his interests wherever they take him. That has included designing a variety of therapeutic groups as a way to engage college students, conducting workshops throughout the United States and Europe, developing a weeklong residential group course held in a mountain setting each summer for 25 years.

By Jonathan Rollins
Instead, it is probably more fruitful to one occupation that will last a lifetime. Influential at different times throughout a series of stages when choosing their one-time event. Most people go through professional life. Stages discover a more meaningful endeavors, the quality of your personal if you feel good about your professional satisfied with your professional life, this in meaningful activities. If you are not working with students in my teaching career of over 47 years,” Corey says. “It has given me a great deal of satisfaction in being instrumental in helping students move forward in their personal and professional journey. Getting my students to challenge themselves by questioning life and stretching their personal and professional boundaries has always been more significant than merely presenting academic knowledge.”

Counseling career guidance

“Regardless of the specific niche you might carve out for yourself, what I think is of the utmost importance is that you love your work,” Corey says. “If your work is something that you enjoy, then at least half of your waking existence is spent in meaningful activities. If you are not satisfied with your professional life, this can easily affect your relationships and your feelings about yourself. However, if you feel good about your professional endeavors, the quality of your personal life will likely be enhanced.” He offers the following advice to help counselors at all stages discover a more meaningful professional life.

See the big picture. “Choosing a career path is best thought of as a process, not a one-time event. Most people go through a series of stages when choosing their professional career. As with the stages of life, different factors emerge or become influential at different times throughout this career-decision process. Therefore, it may be a mistake to think about selecting one occupation that will last a lifetime. Instead, it is probably more fruitful to choose a broad field of endeavor that appeals to you. Consider your present job as a means of gaining experience and opening doors to new possibilities, and focus on what you want to learn from this experience. Your decisions about work can be part of a developmental process, and your jobs can change as you change or can lead to related positions within the counseling field.”

Be self-aware. “If we know what really interests us, and if we have identified our key strengths and unique personal resources, we will then be able to apply these personal competencies to creating a unique kind of professional life.”

Don’t lose sight of your clients. “My guess is that counselors who are involved in nontraditional jobs have created these positions by staying focused on the needs of their clients within the context of the community. A professional career is not a static entity but rather tends to evolve. As we become steeped in our career, we are likely to find many divergent routes that we can pursue.”

Follow your dream courageously. “For counseling professionals who are interested in ‘thinking outside the box’ (when it comes to their careers), I would most encourage them to have a dream and then have the courage to do what is needed to make this dream become a reality. It can be helpful to talk to colleagues about ways to fulfill your job description in many different and creative ways. If you adopt an experimental attitude, then you can try different ways of making an impact in the lives of your clients. I have never had any regrets about focusing my energy in areas of keen interest and following my passions in doing what I really valued.”

Get your priorities straight. “When I advise college students about pursuing graduate study and a career path, I typically encourage them to discover what excites them and make a decision based on this rather than focus on where they will make lots of money or to limit themselves by doing what is in keeping with current trends. Many of my former students have carved out their own unique career paths that often involve a combination of teaching, practicing counseling, engaging in community work, conducting research, writing in the areas of their professional expertise and being involved in the administration of programs. As Sam Gladding has mentioned in many of his articles and books, creativity is a major facet in a counselor’s ability to tap his or her resources and to develop both personally and professionally. My advice is to think and practice creatively. By attempting to use and develop your creativity, you will find ways to energize yourself and to retain your vitality as a person and a professional.”

Value diversity. “I am convinced that your chances of securing a position in the counseling profession are greatly expanded if you have competencies in working with a diverse range of client populations. In my training program over 40 years ago, there were no discussions of how culture influences the assessment and treatment process, and no multicultural courses were offered. When I began my university teaching, my emphasis was largely on counseling from an individualistic perspective. Many valued colleagues, plus continuing education, provided me with a better grasp of the importance of viewing clients within a cultural context. A number of my colleagues were very instrumental in enabling me to see the limitations of functioning strictly with the spectacles of a counseling psychologist by broadening my scope to consider the person-in-the-environment. Most of the positions you will apply for involve understanding how diversity is an integral part of any treatment program. It is essential that you recognize the ways the client’s culture influences his or her behavior.”

Don’t box yourself in. “Frequently, (counselors) create a professional specialization because of their own interests in a given area or because of their own life experiences and personal struggles. While I think that having a specialty often makes sense, I also think it is possible to become overly narrow in your professional endeavors. If you prepare too narrowly for a specialization, that job may become obsolete, as will your training. I think it is necessary to be competent as a generalist, even if you do have a specialty area. Of
course, once you have established yourself in your career, it is likely that you will find some areas where you want to focus your talents. In short, I think it is possible to be a competent generalist and at the same time create some special areas of interest and expertise.”

Carving out new territory
Call it fate, chance or divine guidance. Whatever you label the guiding force, it appears to have been pushing Paige Valdiserri toward a career in counseling ever since she was a 13-year-old candy stripey holding patients’ hands in the hospital emergency room. “I don’t think anyone should be alone when they’re going through a traumatic event,” says Valdiserri, a member of both ACA and the American Mental Health Counselors Association.

Like many of her colleagues in the field, Valdiserri took some detours before setting on counseling as her true calling. But instead of viewing those detours as wasted time and wasted opportunities, she believes each experience was placed in her path to mold her and, ultimately, to open her eyes to the myriad areas where counselors’ skills and perspectives are needed.

Today, as director of behavioral health for Comprehensive Health Services Inc., an international provider of occupational health services for major corporations and government clients, Valdiserri says she believes she is in prime position to “really create new territory for counselors. I’m really trying to break through and do things that are different.”

Valdiserri went to college to become a teacher, but an early internship with a major credit card company instead led her into the business world, where she took on some managerial responsibilities. She wasn’t the typical manager focused exclusively on bottom line performance with her employees, however. “I wanted to know what made people tick and what was going on with them at home,” Valdiserri says. “I guess I was already doing the counseling thing.”

Roughly six years after first stepping foot in the credit card company and three years after earning her education degree, Valdiserri decided to begin her teaching career. For the next nine years, she taught in various elementary and secondary schools in Maryland and Delaware. Often, it seemed the kids labeled as “tough” or “difficult” were placed in her class. Instinctively, Valdiserri began running little groups in her classroom and found that she loved the process. Eventually, she decided to return to school and pursue a degree in counseling.

After spending a year as a school counselor for 600 students in an urban environment, Valdiserri moved on to a for-profit counseling agency in Delaware. There, among other duties, she worked with local police and other first responders. Compelled by her experiences comforting patients in the hospital emergency room as a teenager, Valdiserri was also in the middle of obtaining her trauma specialty when the events of 9/11 unfolded.

“If you think about it, back then, few people really had backgrounds in trauma,” she says. Still a new professional at the time, Valdiserri found herself working as a crisis counselor at Ground Zero based on her pursuit of a trauma specialty and her knowledge of first responders.

Those tragic circumstances have influenced much of Valdiserri’s succeeding work and, indeed, may have marked something of a turning point for the counseling profession as a whole, she says. “Sadly, 9/11 opened the door for people to see what we as therapists have offered all along,” she says.

Upon moving to Washington, D.C., in 2003, Valdiserri was hired as a counselor and trauma specialist at the Pentagon, where she implemented, facilitated and provided training for a crisis assessment and response team for civilian, first responder and behavioral health workers. She also conducted training programs for the Pentagon’s civilian and first responder workforce concerning grief and bereavement, acute traumatic stress and post-traumatic stress disorder, emergency preparedness, anger, stress management and other areas.

In 2005, Valdiserri was hired as the Pentagon’s first director of employee support services. “I was on call 24/7 to deal with crises and traumatic events at the Pentagon and Site R (the Defense Department’s alternative command site during national emergencies),” she says. “I was the first person (at the Pentagon) to implement the behavioral health component in their mass casualty drills, which prepared individuals before, during and after an event.”

In that capacity, Valdiserri developed programs and trainings dealing not only with PTSD, but also in the areas of stress management, conflict resolution, anger management, substance abuse, suicide prevention and cultural competency. She also facilitated treatment and referral services on a daily basis.

Making inroads for counseling
When her contract with the Pentagon ended in 2006, Valdiserri was approached about coming to work for Comprehensive Health Services (CHS), which provides workforce health and productivity management solutions to a wide range of clients, including Fortune 200 companies and government agencies, and helps them to respond effectively to crises. Commenting on the company’s name to one of its executives, Valdiserri said, “You’re not really ‘comprehensive’ unless behavioral health is part of what you do.” With Valdiserri on board as director of behavioral health, that has changed. As a CHS brochure now explains to prospective clients, “Traditionally, Mental Health was viewed as the treatment after the event. Today, Behavioral Health is a spectrum of services ranging from organizational analysis to training to response and treatment designed to maintain a healthy and productive workforce.”

And this is where Valdiserri believes she makes the greatest impact, not only for her clients, but for the counseling profession in general. Because of her background working at Ground Zero, at the Pentagon, with first responders and with a wide range of government entities at all levels, and because CHS does a large volume of work with government agencies, Valdiserri is making inroads for counselors where once there were mostly dead ends. “The more I get out, the more
I spread the word,” she says. “One of my goals is to get the (federal) government to use Licensed Professional Counselors. The government is used to employing social workers and psychologists. I keep saying, ‘That’s great, but you don’t have enough to meet the need that’s out there. What’s wrong with LPCs?’”

Valdiserri points to the growing numbers of U.S. military veterans returning from Iraq and Afghanistan who need mental health treatment. But, given her experience working with first responders, she’s also pressing the government to pay more attention to those left at home when service personnel are deployed. “The military is very much like first responder communities,” she says. “If you don’t take care of their families, then they won’t be as operationally sound in their mission.”

Valdiserri is one of the founding members of 4thosewhoserve.org, a national membership organization of behavioral health specialists who focus on prevention, management and support of military and first responder personnel susceptible to or experiencing traumatic stress disorders.

Valdiserri is also active in lobbying for LPCs on Capitol Hill. “And not just to provide treatment,” she says. “We do a lot of different things that the government needs to know about. They really need people with our backgrounds in developing and implementing trainings in behavioral health, along with cutting-edge training for providers that the educational institutions haven’t yet taught.”

One of Valdiserri’s major clients is NASA. As the U.S. government prepares to overhaul its space program, many NASA employees are facing job security issues. Given this circumstance, Valdiserri has regularly traveled to the Kennedy Space Center to train senior management in areas such as stress identification, conflict resolution and disaster response. She was also the keynote speaker at NASA’s Executive Safety Forum on workplace violence. She believes workplace issues will become a prominent focus area for counselors in the years ahead, both in the public and private sectors. “With the economy being the way that it is, people are going to come to work with a lot more added stress,” she says.

**Getting immersed in the client’s culture**

Often, in preparing to provide counseling services to a particular group or population, Valdiserri likes to get her hands dirty – in some instances, literally. For example, when she worked with first responders on identifying and managing stress, she donned fire gear to go through practice fires with the squad and also went out on calls with medics. She accompanied police units during hostage situations and suicide calls so she could develop better situational training for the teams and help them debrief more effectively. The heart of her approach is to genuinely experience and understand the unique culture to which individuals belong. “If possible,” she says, “I like to live in their world, to know what it’s like, yet always remembering to ‘be in it, not of it,’ which was a lesson I learned the hard way.”

Most recently, Valdiserri has again been attempting to immerse herself in a new culture. CHS has a contract with a company that hires Arab American linguists (interpreters) to accompany U.S. soldiers in Iraq and elsewhere in the Middle East. These linguists often die in the course of duty, and Valdiserri was charged with creating and training teams to deliver culturally sensitive death notifications.

To prepare for the task, Valdiserri worked with leaders from the International Institute of Islamic Thought (IIIT), headquartered outside of Washington. The IIIT leaders were extremely generous in sharing their time and knowledge, Valdiserri says, including allowing her to ask questions about their culture, exposing her to prominent authors of Islamic thought and running through scenarios with her concerning delivering death notifications to families from Middle Eastern backgrounds. In the process, Valdiserri has learned about the tone and dialect in which the message should be delivered, how the local Arab community should be utilized to support the family, to whom the news should be confided (the head of the family, a senior relative or a highly regarded neighbor in the community) and the role that offerings of peace, prayer and praise to Allah should play in the notification. The IIIT leaders have also offered to take Valdiserri to a mosque with them to pray so she will have a deeper understanding of the culture and be better able to pass this understanding along to the death notification teams. “They have really allowed me to share in their world,” she says of the IIIT leaders. Valdiserri is also discussing the possibility of living in the Middle East for a short time to further cultivate her knowledge of Arab culture.

Valdiserri is in the process of traveling to major cities throughout the United States to train the death notification teams, which are composed of a professional counselor (mostly ACA members) and an Arab American interpreter. “Bringing all these cultures together, it really opens their eyes,” she says. “You only get one chance to deliver the notification, and it needs to be done with a lot of empathy, compassion and cultural understanding.”

The experience has served to reaffirm Valdiserri’s belief that counselors in training need substantial exposure to multicultural issues in the classroom, while established counselors should seek out opportunities to encounter diversity in their work. “I think we really need to do that,” she says. “The training and education pieces haven’t caught up with how quickly society is moving in a global direction, and diversity is not just the outer layer of the onion taught to us in school.”

Valdiserri also encourages counselors to assume a pioneering spirit to expand the influence and name recognition of the counseling profession. “I want LPCs to start getting paid for their many talents and not just volunteer,” she says. “A lot of my friends call me a change agent because I try to carve niches that haven’t been carved before. I have been very blessed with these opportunities and with how each situation has helped me become a better counselor and a better soul.”

Her career advice for other counselors runs along those same lines. “You have to be really true to your soul and follow your heart,” she says. “Talk to people in the field who are doing a lot of interesting things. And I think it’s good to try a lot of different things yourself. I believe we are here in this world for a definite purpose, and we all have talents and skills to help one another. So become aware, inspire from within and take the path less traveled. It’s so worth the trip.”

Valdiserri invites other counselors to e-mail her at pvvaldiserri@chsmedical.com.

**Letters to the editor:**

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Counseling in ‘recovery’ schools

Andy Finch, assistant clinical professor and school counseling coordinator, Vanderbilt University Human Development Counseling Program

Describe the role of a counselor who works in a recovery high school or collegiate recovery community.

Recovery high schools and collegiate recovery communities serve students in recovery from substance use disorders. The high schools exclusively enroll students in recovery, while the colleges have programs designed specifically for students on campus who are in recovery. Recovery high schools have an average enrollment of about 30 students, while collegiate recovery communities range in size from five students to 70.

Most programs are firmly rooted in aftercare or continuing care recovery support. Most counselors assist with life issues arising from being in recovery or trying to sustain abstinence from alcohol or drug use while enrolled. Relapse prevention includes learning how to live with cravings for alcohol and drugs, establishing non-drug-using peer groups and discovering fun activities that do not involve alcohol or drug use. Building healthy relationships and mending family dynamics play a large role for counselors, as does helping family members understand what is happening for the student.

Studies have shown that over 70 percent of the students in recovery schools also have a co-occurring mental health disorder; these disorders play a more primary role once alcohol and drug use ceases. A high percentage of recovery school students have experienced trauma as well. Counselors must be prepared to assist with the co-occurring disorder and post-traumatic stress.

How did you get involved in this line of work?

I helped start Community High School in Nashville and worked there from 1997 to 2006. In addition, I helped form the Association of Recovery Schools (ARS) in 2002 and currently serve on its Board of Directors.

I completed both the community counseling and the school counseling tracks in my master’s program at Vanderbilt, which made me ideally suited for helping start this new program. A local counseling agency and runaway shelter had heard of Sobriety High (the first recovery high school) in Edina, Minn., and had done two years of planning to open a similar school in Nashville. They hired me as a school counselor one month before the school opened. Due to the myriad issues presented by students, I put both my community counseling and my school counseling skills to good use.

Can counselors make a career of this, or will it be only one aspect of their careers?

Both. There are currently about 30 recovery high schools and 15 collegiate recovery communities nationally. I personally know about 25 counselors for whom this is their career.

Counselors play a prominent role on the staffs of recovery schools. In collegiate recovery communities, counselors may be the only paid staff members. In high schools, counselors are often school leaders and frequently constitute 25 to 50 percent of the staff.

Briefly describe the qualifications or training needed.

Because many high schools work with school counselors from the district, they tend to hire Licensed Professional Counselors and alcohol and drug counselors for on-site programming. While the trend has been to hire mostly alcohol and drug specialists, my feeling is this will change.

We have come to realize that the majority of the students have a co-occurring disorder that presents as primary when the alcohol and drugs are out of the picture. Thus, the broader training of an LPC or mental health service provider is needed. Still, having expertise related to substance use disorders is necessary.

What type of individual would excel at this job?

A person who is flexible and comfortable with change. Every day is different. The dynamics of the group can shift dramatically around the issues of one or two students. While this can feel “chaotic,” the reality is that experiential learning involves allowing students to learn from mistakes.

That being said, having strong personal and professional boundaries is a must. More than in other setting, these counselors see clients regularly outside of session (in the hallways, in the office, at school functions).

Will the need for this type of counseling grow during the next decade?

Definitely. The number of recovery high schools and collegiate recovery communities has nearly tripled since the founding of ARS in 2002.

Why would you encourage counseling students, new professionals or established counseling professionals looking for a new career path to consider this option?

These settings represent some of the best counseling jobs available. Recovery schools provide manageable, sustained client loads in which the counselor gets to see growth over a long period of time. Because almost all students have been through treatment and have 30 days to six months of sobriety prior to entry and are voluntarily enrolled, they display an earnestness and openness to counseling that most practitioners crave.

What makes this career path unique?

Few counseling settings provide as much opportunity to participate in and observe client growth and development for such a long period of time. Average enrollments in recovery high schools range from six months to one year, and there is the potential for a student to stay up to four years in both recovery high schools and collegiate recovery communities. While so much counseling in agencies leaves a counselor wondering about the impact of services, recovery schools allow counselors to see client progression for months and, often, years.

Where can interested counselors get more information?

The ARS website is recoveryschools.org. Most existing schools are members, and their contact information is available here. The organization is planning to launch a job database in the coming months. •
Serving as a parenting coordinator

Michelle Mitcham, assistant professor, University of South Florida Counselor Education Program; Florida Supreme Court certified family mediator and parenting coordinator

Describe the role of a counselor who works as a parenting coordinator.
Primarily, a counselor in this role teaches court-ordered “high-conflict” parents who are no longer together or married how to be effective coparents and offer a united front. The role of parenting coordinator requires the counselor to wear many hats such as mediator, arbitrator and parent educator. It also requires working with the children and communicating with stepparents, grandparents, school personnel, lawyers, judges, guardians ad litem and other professionals involved in the case.

How did you get involved in this line of work?
Before becoming a professor, I was a high school counselor and frequently helped students whose parents were going through a divorce or had already divorced, and I saw the need for this special population. This led me to get certified as a Florida Supreme Court family mediator, and I mediated divorce cases. (Note: For Mitcham’s interview on working as a certified family mediator, access the web-only version of this cover story at CT Online.) I then learned about another role in alternative dispute resolution called parenting coordination. I was intrigued because it married counseling, mediation, conflict resolution, arbitration and education. I immediately registered for training and became a parenting coordinator.

Can counselors make a career of this, or will it be only one aspect of their careers?
Counselors can make a livelihood out of this, but it will take a lot of work, networking, training and practice. Due to the high-conflict nature of these cases, many counselors may opt to do this part time as a way to diversify their private practice. Taking on a full load of high-maintenance, high-conflict cases can contribute to burnout and compassion fatigue.

Describe the setting in which a parenting coordinator practices.
Parenting coordinators oftentimes practice in their private offices. Some court systems have a court-based program whereby the counselors use the mediation rooms/offices in the courthouse.

Briefly describe the qualifications or training needed.
Generally, the minimum qualifications require counselors to be certified as family mediators, licensed as mental health professionals, complete parenting coordination training and have three years of experience.

Will the need for this type of counseling grow during the next decade?
I absolutely believe the need for this innovative intervention will increase. The rate of divorce is increasing exponentially, which will inevitably involve children. Professional counselors, both school and mental health, are uniquely equipped and qualified to provide interventions for this population and, furthermore, are ideal candidates for this specialized training should they be interested in conflict resolution, specifically parenting coordination. This is an opportunity for professional counselors to diversify their practice and meet the needs of a growing population.

Why would you encourage counseling students, new professionals or established counseling professionals looking for a new career path to consider this option?
I would encourage them to consider this option if they strongly believe in advocating for children. It has been one of my most gratifying professional experiences since earning my counseling degrees. When I know I have made a difference in the life of a child who was feeling “caught in the middle” of a loyalty bind and know they are better off as a result of this unique intervention, it makes it worthwhile. As a former high school counselor, I have seen firsthand the negative effects of divorce and high conflict that some of my students experienced. This intervention is truly meant for those counselors who envision their role largely as advocates.

What makes this career path unique?
It is not taught in counselor education or any counseling course in depth, and I don’t know of any certificate programs offered in our field/discipline. The merging of counseling and dispute resolution techniques opens an entirely new career option for counselors and offers flexibility and diversity. It is challenging, yet rewarding. Working in family law systems nurtures a different skill set, which can be rewarding if you desire to work with families who have experienced divorce and separation.

What challenges should counselors know about before diving in?
Know that it may be uncomfortable to do a paradigm shift and take on the role of mediator and arbitrator. Parenting coordination is not counseling; it falls under alternative dispute resolution. Although you use counseling skills, the focus is to follow the parenting coordination court order and translate shared parenting plans in the best interest of the children. Furthermore, it takes time to get connected to the family law community, so don’t quit your day job thinking you can do this full time immediately after becoming certified. Additionally, you have to maintain your certification and earn CEUs, so this can be time consuming and expensive. You must have your own office and have flexible hours to meet the needs of working clients. Safety may be a concern because some of these clients are very angry and may be intimidating, although I have never had a problem.

Where can interested counselors get more information?
The Association for Family and Conciliation Courts provides a journal, excellent information and guidelines on parenting coordination.

Is there anything else you would like to add?
It is important to note the differences in counseling versus parenting coordination. For example, parenting coordination is usually mandated, is not confidential, is focused on the needs of children, is directive and even confrontational. Reporting to the court is required.

Note: For Mitcham’s interview on working as a certified family mediator, access the web-only version of this cover story at CT Online.

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Preventing for, responding to disaster

Julie Uhernik, emergency planner for Denver area health department and disaster mental health volunteer for the American Red Cross

Describe the role of a disaster response team counselor.

Counselors who work in disaster response or emergency preparedness may play many different roles. They may be involved in disaster response planning in areas as varied as effective risk communication to the public during times of emergency or planning around potential mass fatality incidents. The counselor may be included on planning teams working on developing disaster drills, exercises and trainings.

Many counselors are direct responders to acute disaster situations. Some may be asked to assist with ancillary disaster response efforts, working with public health or emergency management teams in mass prophylaxis efforts. In such a scenario, the counselor may provide psychological assistance as preventive medication is dispensed to the public following a bioterrorism event. When responding to acute disaster scenes, counselors can provide triage and psychological first aid. They may identify and support individual and community resilience among survivors and responders.

Counselors are also called upon to be involved in the transition team following a disaster. Involvement can last long after the disaster has occurred. Traditionally, working with communities in the aftermath of disaster has been a primary role for counselors.

I work as an emergency planner in public health and also as an American Red Cross disaster response volunteer. I can indirectly thank the American Counseling Association for leading me into this field. In 2005, I answered the request by ACA and the American Red Cross to assist in Hurricane Katrina relief. Although I was working in public health at the time, I was asked if I might consider moving into the emergency preparedness planning division at a local public health agency. Additionally, I sometimes work with clients in my private practice in the aftermath of trauma.

Can counselors make a career of this, or will it be only one aspect of their careers?

For most counselors, it will be one aspect of their careers. However, there are growing opportunities for counselors as emergency managers in community mental health agencies, public health and emergency management. Counselors can also work as volunteers or hired staff for agencies such as the American Red Cross, Salvation Army and other response groups. Additionally, interested counselors should check with their state public health departments about a statewide registry for volunteer responders.

Describe the settings in which these counselors practice.

Disaster response counselors may be called to work in a variety of settings, many of which are chaotic and unpredictable and may be physically and emotionally stressful. The counselor must focus not just on disaster survivors but on any emergent needs of fellow responders and behavioral health team members. Counselors working in emergency preparedness planning may work in more traditional settings but have a large network of preparedness partners in the community and agencies.

What type of individual would excel at this job?

A counselor who is outgoing and caring and who is able to work in high-stress, uncertain environments. The counselor needs to have a high degree of flexibility and adaptability. The counselor needs to understand that they are not the expert working with a victim, but a support person working with a survivor.

Will the need for this type of counseling grow during the next decade?

I believe this field will only grow as partners and government recognize the value and importance of focusing not only on the immediate physical needs of disaster survivors but on emergent mental health needs as well. Counselors are a strong voice in identifying, supporting and promoting resiliency and coping skills of communities and individuals. Behavioral health needs to be at every table where disaster response is the topic.

Why would you encourage counseling students, new professionals or established counseling professionals looking for a new career path to consider this option?

All counselors should have basic knowledge of emergency preparedness and disaster response. In the future, counselors may be called to share knowledge and expertise within their own agencies and in professional partnerships in the areas of planning, crisis response and disaster response deployment.

For those counselors who are disaster responders, there is enormous satisfaction in assisting people in times of greatest need, as well as supporting and encouraging resiliency and inherent self-efficacy. It is certainly not the typical desk job! It is an area of expertise that involves special training and an awareness that disaster mental health is not doing therapy or counseling in the field.

What challenges should counselors know about before diving in?

Counselors should have a heightened awareness of issues around vicarious trauma and responder burnout. They also must pay attention to personal and family preparedness and support. It is important to ensure that family members are on board with the counselor being away for periods of time and that their needs, including safety needs, are taken care of prior to deployment. It is difficult to be effective as a responder when a person is concerned about those at home.

Where can interested counselors get more information?

Counselors can contact their state health departments, disaster response organizations such as the American Red Cross and federal agencies such as the Federal Emergency Management Agency and the Substance Abuse and Mental Health Services Administration. Counselors can also take online classes about the Incident Command System (see training.fema.gov/IS/erslist.asp). The classes provide a basic understanding of how the counselor fits into the emergency response team as well as the basics of the Federal Emergency Response Framework and plan.
The wide world of sports counseling

Taunya Marie Tinsley, assistant professor, California University of Pennsylvania Department of Counselor Education

Describe the role of a sports counselor.

Robert Nejedlo, Patricia Arredondo and Libby Benjamin defined sports counseling as “a process which attempts to assist individuals in maximizing their personal, academic and athletic potential. This is accomplished through a proactive, growth-oriented approach that incorporates the principles of counseling, career development, movement science, psychology and human development.”

I have a part-time private practice in which my specialty includes sports counseling. I work with youth, high school and college student athletes and their families. Additionally, I provide career planning and development, identity development with adults facing a transition away from sports (via retirement or a career-ending injury, for example), as well as mental health counseling for issues such as depression, anxiety and stress, adjustment disorders and grief/loss. Previously, I was a full-time academic counselor working with Division I college athletes as well as an academic coach for high school student athletes. I provided academic advising, life skill development, career planning and development, as well as personal development.

Can counselors make a career of this, or will it be only one aspect of their careers?

Both! Advisers for athletes are those helping professionals whose responsibilities include academic advising, life skills development, performance enhancement and psychosocial development (career planning and development, identity development, interpersonal relationships, transitions from sport) at both the collegiate and high school levels.

The professional counselor may hold similar positions as an academic adviser for athletes, may be in private practice for clinical and mental health issues or may hold full-time positions within professional sporting organizations, colleges/universities, school settings or community agencies, to name a few. Additionally, opportunities exist to work with international athletes.

Describe the setting in which a sports counselor practices.

Sports counselors can be found working with athletes and/or their families within a variety of settings, such as schools and higher education institutions, community-based agencies, outpatient clinics, private practices, rehabilitation centers, youth organizations, professional and amateur sporting agencies and with international sporting agencies.

Briefly describe the qualifications or training needed.

The sports counselor should have specialized awareness, knowledge and skills beyond the basic counselor preparation and training. Sports counselors should possess a mature multicultural perspective, operate from a holistic and ecological framework, operate from a strength-based model, conduct counseling as a self-reflective practice, engage in ethical practice and possess shared professional values. Additionally, counselors working with this population should be multicultural sports counseling competent. As part of my dissertation research in 2005, I developed the Multicultural Sports Counseling Competencies, which utilize the language and statements from the Multicultural Counseling Inventory.

What type of individual would excel at this job?

Professionally, the individual should be multicultural sports counseling competent and knowledgeable about the NCAA, NAIA or JUCO/NJCAA rules and regulations, knowledgeable about career development issues specific to the athlete population and knowledgeable about playing or coaching competitive sports. Furthermore, the individual should strengthen skills in crisis intervention, stress management, performance enhancement and understanding transferable skills. Personally, the individual should value self-reflection, respect, unconditional positive regard, genuineness, diversity and multicultural experiences. Additionally, the individual should be caring, empathic and willing to serve as a mentor and advocate and have the ability to form cross-cultural, rewarding relationships.

Why would you encourage counseling students, new professionals or established counseling professionals looking for a new career path to consider this option?

The sports counseling field is a unique career path that will be around as long as sports continue to permeate our society. As long as there are sports, there will be a need for specialized counselors to work with the athlete population.

What makes this career path unique?

One, sports are an important and unique cultural thread woven throughout our society. Sports are also a major influence on psychosocial development across the life span. Sports promote socialization, social competence, family bonding and the development of cross-cultural friendships.

Two, the athlete population is a diverse cultural group with special issues and unique developmental needs that differ from their nonathlete peers. Within the athlete population, there are subgroups and diverse populations based on gender, race, ethnicity, religion, the physically challenged, sexual orientation, etc., each with specific developmental needs.

What challenges should counselors know about before diving in?

Ethical issues may arise from counselors’ lack of multicultural sports counseling competence, which may impact service delivery to the athlete population, a unique cultural group.

Another challenge is that the research regarding the athlete population in the counseling discipline is limited. Much of the research regarding the athlete population and sports counseling has been conducted in other academic disciplines, including psychology and movement science. An extensive program of research examining the developmental needs of the athlete population needs to be undertaken within our professional discipline.

Where can interested counselors get more information?

Interested counselors can get more information by joining the American Counseling Association’s Sports Counseling Interest Network. Additionally, they may want to contact colleges and universities that offer training programs or courses.
Counseling in a foreign country

David Blakely, president, Singapore Association for Counselling

Describe your role as a counselor in a foreign country.

I’m American by birth, but I work and live in Singapore, a Southeast Asian country found just below Malaysia and just above Indonesia (Blakely moved to Singapore with his wife, who is Chinese Singaporean, 13 years ago). Counselors have a variety of roles at the present time. The primary forms are community outreach, family counseling, religious organizations, addictions work, schools (all levels), crisis hotlines, prisons and hospital psychiatric wards. Their roles primarily involve marital and family issues, individual counseling, social education, advocacy and trauma work.

I function as a family counselor in a Methodist church here in Singapore. My primary focus is in helping individuals, couples and families cope with their life situations. Approximately 60 percent of our cases are marriage and family related. In addition, we work with youth and career issues, assist with psychiatric issues, personality testing and marriage preparation, support group work and training of both volunteers and the general public.

What are the career opportunities like for counselors in Singapore?

Counselors have growing opportunities for a career in Singapore. The areas of greatest growth include working with the Ministry of Education (schools), working in the addictions/recovery field and working within the community outreach organizations (called Family Service Centres).

Describe the settings in which these counselors might practice.

Settings include Family Service Centres (nearly 40 in Singapore), religious organizations, primary/secondary schools, the Institute of Technical Education, universities, halfway houses and prisons.

Briefly describe the qualifications or training needed.

You can find greater detail at the Singapore Association for Counselling (SAC) website at sac-counsel.org.sg. There are no legal restrictions on the qualifications of counselors, which is true also for social workers and psychologists. The government has instead chosen to support voluntary professional registration. The requirements for registration have three key components: 300 hours of classroom training in counseling in the form of a postgraduate diploma or master’s degree, an internship consisting of at least 100 hours of clinical counseling and at least 10 hours of clinical supervision and, once graduated, 600 hours of clinical counseling with 60 hours of clinical supervision (10-to-1 ratio). Once registered, counselors must complete 50 hours of continual professional education and 400 hours of clinical counseling every two years to remain on the register.

What type of individual would excel at this job?

There needs to be a personal commitment to growth, with an acknowledgement that counselors at this time are underpaid. The person must be open to flexible and, at times, long hours. The person must have a respectful understanding of the key racial (Chinese, Malay, Indian, Eurasian) and religious (Buddhism, Taoism, Christianity, Islam, Hinduism) identities.

Will the need for this type of counseling grow during the next decade?

Yes, the field will grow. Primarily, the needs related to working in schools and the community will keep the demand steady. The Ministry of Education alone is targeting having nearly 400 counselors.

Why would you encourage counseling students, new professionals or established counseling professionals to consider this option?

Working with schools and with all of our cultural diversity can be very exciting. Additionally, Singapore’s national language is English, allowing you to smoothly communicate with the majority of people with little difficulty. In addition, the rehabilitation field is starting to look into structural and leadership changes, which could provide counselors an opportunity to influence the organizational change.

What makes this career path unique?

The uniqueness of this career path comes from a few angles. It is a powerful experience in cross-cultural issues. And because most clients will be fluent in English, it allows counselors a chance to step beyond the cultural limitations they now experience. Singapore is also well known for its safety. This means people can come to Singapore without fear and experience a different lifestyle.

There is an opportunity to be involved in growing areas of addictions and school counseling in fresh ways here because the field is still so young. For example, Singapore is in the midst of building two integrated resorts, both of which will include casinos. At the same time, the government is working with the social service field to identify how to help families that may need to deal with gambling addictions.

What challenges should counselors know about before diving in?

The most significant challenge is the understanding of and respect for the religious and racial differences. The Singapore government protects each religious and racial group, making sure there is harmony. Any spoken or written material deemed offensive toward a racial group or religion is considered a criminal act. For example, two men in the last year were successfully prosecuted for writing racially offensive blogs regarding the Muslim community.

The challenge is further extended because, due to Singapore’s size, there is a strong international influence. Nearly 1 million of the 4 million people in Singapore are not Singapore citizens. Countries such as Malaysia and Indonesia are so close that you must also learn about their cultures.

Where can interested counselors get more information?

The SAC website at sac-counsel.org.sg. Look at www.mcys.gov.sg for Family Service Centres in Singapore, or look for jobs on websites such as jobstreet.com. I am also open to ACA members e-mailing me (davidb@wesleymc.org) about starting a counseling career overseas. I am a firm believer that it is possible, as long as the person is open to learning, is willing to assume they know a great deal less than they thought and takes the time to see whether their approach/theory of helping fits culturally with where they are considering.
Applying counseling skills to executive coaching

Amalia Stanciu, doctoral student in counselor education, Syracuse University, and research assistant, NBCC International

How did you get interested in this line of work?

It has been a field of interest for me since I was active in training and leadership in a large multinational corporation in my home country, Romania. I had the good fortune to cross paths with Dr. John Anderson, a professor at Wake Forest University. Drawing on his experience as an executive coach, I completed an independent study with him. Of course, none of this would have been possible without the support and openness of the professors in the counseling program at Wake Forest. I plan to include the practice in my career when I return to Europe after my doctoral program. (Note: Stanciu presented a research poster session titled “The Use of Counseling Approaches and Skills to Enhance Leadership Performance Through Executive Coaching” at the ACA Conference in Honolulu.)

Describe the role of a counselor who works in leadership development and/or executive coaching.

In the few studies dedicated exclusively to executive coaching that I came across, these services are differentiated by the targeted population: low and middle management on the one hand and directors or high potential managers, CEOs and vice presidents on the other hand.

Most organizations prefer to coach the former category “in house,” using programs developed by the human resources department. For the latter category, most organizations prefer to contract executive coaching services offered by businesses or private practices in the field of leadership development and consulting.

The counselors I interviewed for my study are coaching executives either through their private practice or working for highly regarded organizations. All of them pointed out that the most important aspect in coaching/executive coaching is building the relationship. This is supported by the results of Brian Underhill and John Koriath’s thorough study that emphasizes that leaders prefer coaches who can build rapport, have some business experience and whose approach matches the organizational culture. Another important role is to assess the client’s current state and motivation and to evaluate the change. A major emphasis is then placed on accountability and on follow-up. These roles are no strangers to counselors.

The executive coaching relationship has more confusing limits than the counseling relationship. The client can call at specific times to ask for a quick coaching session before a business meeting or can invite you to lunch with his family. Because it is not a profession, executive coaching does not have standards or limits except for what is regulated in the contract. Counselors and professionals from other helping fields are usually directed by their professional ethical guidelines.

Can counselors make a career of this, or will it be only one aspect of their careers?

During the counseling program at WFU, I realized how valuable counseling skills would be in various activities in work settings (human resources, management, coaching and so on). This was my motivation for the study in which I focused on how counseling skills can be employed to enhance leadership through executive coaching. So, I believe this activity could become one aspect of a counselor’s career.

Briefly describe the qualifications or training needed.

There are institutions and organizations that offer training and certificates for coaching or executive coaching, but such programs do not adhere to common standards of practice or competencies. I believe that through the nature of their training, counselors are good candidates for coaching leaders and/or executives. Of course, keep in mind the importance of knowing the characteristics of this specific population and the active and competitive environment in which they operate. Compared with counseling, the coach’s input is more directive. The whole process is often more confrontational and includes more frequent and forceful interventions. Sometimes direct advice is requested and given.

What type of individual would excel at this job?

Most of the executive coaches I interviewed held leadership and administrative responsibilities in business, education or counseling before starting on this path. They emphasized the need for immersion in some sort of leadership/business experience as a prerequisite. Many coaches insist on the need to become well-versed in the theory and practice of leadership and management, as well as the specifics of certain industries.

Individuals who are goal-oriented, willing to take risks, comfortable working with power figures and who have the ability to see the big picture seem to fit the profile for executive coaching.

Why would you encourage counseling students, new professionals or established counseling professionals looking for a new career path to consider this option?

Leaders and executives are a population that can be researched and served by counselors. They have been studied in the context of management, business or organizational development, and I think counselors can bring different and novel perspectives to looking at and working with this population.

What challenges should counselors know about before diving in?

Coaching falls outside the regulated scope of counseling practice, so it is important to point out that it is not considered a specialty of counseling. In terms of challenges, knowledge or expertise in business or leadership is required. Second, this is a competitive business in which the coach is basically evaluated by results. Finally, a position/occupation such as this might be seen as confusing for counselors who do not have a strong professional identity.

Where can interested counselors get more information?

Seek out executive coaches with counseling backgrounds and organizations that offer leadership development services, such as the Center for Creative Leadership.

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An innovative internship uses counselors in training to meet the needs of surgical patients

By Karen Broer, Jessica Smerz Chapin and Cynthia S. Kubu

Blue scrubs, surgical mask and cap, operating room, surgical team — not the traditional attire and environment for counselor trainees. There is an increasing need for counselors in the operating room (OR), however. Patients are required to be awake for certain types of brain surgeries, which is understandably anxiety provoking. Emotional distress should be kept to a minimum not only for the patient’s comfort but also to avoid surgical complications.

An innovative clinical experience in the counseling internship program at the Cleveland Clinic in Ohio allows counselor trainees a unique opportunity to bring their knowledge, skills and clinical experience with an emphasis on holistic health to meet the needs of patients having deep brain stimulation (DBS) surgery. Being in the OR and participating actively in surgery can provide counselor trainees a real-time encounter of a patient’s surgical experience and a perspective on the collaborative efforts of a surgical team.

As part of the surgical team, counselor trainees work with the neurosurgeon, anesthesiologist, neurologist, nurses and other support staff.

DBS is a type of brain surgery in which electrodes on thin wires are permanently implanted into specific areas of the brain. These wires travel under the skin to a small electrical unit called a generator. Similar to a heart pacemaker, the generator is placed under the skin of the chest allowing for constant electrical stimulation of specific brain areas involved in select movement and psychiatric disorders.

DBS surgery poses several unique psychological challenges for patients, including an increased risk of physical and emotional distress prior to and during the surgery. Patients must be awake for the majority of the approximately four to eight hours of surgery so that target symptoms are not masked. Although the general surgical target is well established, many DBS centers prefer to include stimulation studies during the surgery to help fine-tune the optimal location for the final electrode placement. These studies generally require the patient’s cooperation during surgery, and patients may be asked to perform motor tasks and/or comment on any motor, sensory or emotional changes that co-occur with stimulation at different sites.

In addition, patients may have physical difficulties such as restless leg syndrome or fatigue that can interfere with their ability to remain immobile for the length of the surgery. Moreover, some patients experience severe anxiety that can affect optimal surgical outcomes. In extreme cases, physical and emotional discomfort has forced discontinuation of the surgery. Providing a counselor trainee in the OR can reduce a patient’s physical and emotional discomfort, decrease demands on the surgical team and help relieve a family’s fears and concerns.

The disorders that DBS surgery is used to treat further emphasize the need for helping patients with anxiety management. The Food and Drug Administration has approved DBS surgery to treat Parkinson’s disease, essential tremor and dystonia. There is also growing use of DBS in a broader range of neuropsychiatric disorders. Clinical trials are investigating the benefit of DBS for the treatment of obsessive-compulsive disorder, depression, pain and...
Tourette syndrome. These patients may be at higher risk for emotional distress during surgery.

**Therapeutic interventions**

Laura Morabito, an intern from John Carroll University, worked with nine DBS patients during her counselor trainee internship experience at the Cleveland Clinic. “The surgical experience was a unique part of my internship,” she says. “It was just amazing to see the surgical team work together and know that I could play a role in helping the patient have a good surgical outcome.”

In describing her experience in the OR, Morabito says she met with DBS patients for two to three counseling sessions before their surgery. She assessed the patient’s needs, created individualized therapeutic interventions and provided education about anxiety management during surgery. The patient was also given instructions and exercises to rehearse at home. “The sessions provide several benefits, including the opportunity to form a trusting relationship, to allow the patient to express any special needs or concerns and to assess and determine appropriate therapeutic interventions that will be practiced in the session and at home,” Morabito says. “The counseling sessions increased the patient’s self-efficacy by being an integral part of the surgical experience.”

She emphasized the importance of seeing patients from a holistic perspective, focusing on their physical, emotional, cognitive and spiritual needs. The holistic orientation helps the patient, who at times may feel overwhelmed by tests, diagnoses and medical-surgical issues. With patient consent, the family can participate in one of the presurgical counseling sessions to provide patient support and to help assuage their own concerns.

Selecting therapeutic interventions uniquely suitable for each patient is important. Studies demonstrate the efficacy and effectiveness of psychological and holistic interventions to reduce anxiety in a variety of surgical patients. There is no research to date investigating techniques to reduce preoperative or intraoperative anxiety of patients undergoing DBS surgery. Several techniques, however, have been

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**Foundations of Disaster Mental Health Training**

*Thursday, March 20, 2009 • 8:00 a.m. – 4:00 p.m.*

ACA will be offering the American Red Cross Foundations of Disaster Mental Health training at the 2009 ACA Conference because we realize that in a disaster environment, mental health services take on a degree of urgency in addition to the level of importance that professional mental health providers deal with on a daily bases. Qualifications to take this training include:

- A current ACA Member.
- Counselors must be licensed for independent practice by a State Counseling Licensure Board. Please note that in a two-tier state, counselors need to be licensed at the higher, independent practice level.
- Counselors must have a valid practicing license at the time of training.
- It is highly recommended that counselors take the American Red Cross Introduction to Disaster online at www.redcross.org.
- Counselors must pre-register to attend the ACA Conference training by January 30, 2009.

To receive registration materials, please contact Debbie Beales at dbeales@counseling.org or 800-347-6647, x306. There are 6.5 CEs offered for completing this training.
Counseling therapy is one approach used in anxiety management. "Cognitive interventions provide a framework for teaching patients to identify and modify cognitive distortions and emotions that stem from fear, frustration or uncertainty about the surgery, thus minimizing the impact of these feelings during surgery," Morabito explains.

Another frequently used technique for surgery preparation is relaxation training. "Teaching patients how to elicit the relaxation response through various techniques, including visualization, guided imagery, breathing and meditation, has been used effectively both pre- and postoperatively to enhance outcome and recovery," she says. "I found that my own prior training and personal practice with relaxation greatly enhanced my ability to help the patient. I would use some of these same relaxation techniques on myself before a surgery, enabling me to be totally present for the patient."

Adds Morabito, "Music can often be used to reduce patient stress before and during surgery, and patients often bring in their personal CDs for use during surgery."

Religion and spirituality are therapeutic factors that can help in adjustment to traumatic events. "Spiritual issues often arise as patients prepare for surgery, and exploring these themes before surgery helps with difficult life situations," Morabito says. "Spiritually focused meditation has the potential to enhance coping during surgery."

"Cognitive restructuring, imagery relaxation in combination with deep breathing and spiritually focused themes were the three therapeutic interventions that appeared to be most helpful to patients," Morabito notes in reviewing the surgical cases. "Physical and emotional distress also were reduced by providing warm blankets and massage, holding the patient’s hand, humming, providing encouragement and playing soothing music."

Staying attuned to anxiety

Monitoring anxiety levels before and during the surgery can help determine when a therapeutic technique should be implemented and the effectiveness of that technique. A scale from 1 (minimal anxiety) to 10 (maximum anxiety) can be used with personalized anchoring of the scale (for example, 1 may be equated to how relaxed the patient felt while sunbathing during his or her last vacation, and 10 may be equated to the patient’s anxiety level while driving in a snowstorm last winter).

Introducing the anxiety rating early in the preoperative counseling sessions and using it throughout the initial meetings with the patient can increase the ease of use during surgery. Blood pressure and heart rate can also be useful indicators for monitoring anxiety during surgery. Counselors can monitor a patient’s anxiety levels immediately before, during and after a therapeutic intervention to assess its effectiveness.

The counselor trainee’s vigilance of the patient’s emotional and physical comfort allows medical personnel to devote uninterrupted attention to surgical procedures. Increasing patient concerns are quickly conveyed to the surgical team. While the intermediary role of the counselor trainee is comforting to the patient, it also provides an important source of up-to-date information for the surgical team concerning the patient’s status. In addition, having someone available to inform family members about the patient’s progress during surgery is reassuring and comforting. Surgery can be challenging and stress provoking for family members who are waiting throughout the long ordeal.

With nine DBS surgeries in her internship experience, Morabito is well acclimated to the OR. Conversely, John Carroll University counselor trainee Sara Sayre shared her thoughts after participating in her first DBS surgery. "Assisting a patient through DBS surgery was an incredible experience," she says.

“It was rather intimidating to walk into the OR for the first time. However, the counseling skills developed through my education and internship experience prepared me to think on my feet and support the patient through what can be an exhausting surgery, both physically and emotionally. While the experience of assisting a patient in the OR is quite unique, the techniques I used are some I would use with patients in an outpatient counseling setting, including deep breathing and guided imagery. I believe the patient finds comfort simply by the presence of the counselor trainee.”

“DBS patients endure both physical and emotional strain in order to have this potentially life-changing surgery,” Sayre adds. “The courage and strength I observed in these patients is something that will stay with me throughout my career.”

Other considerations

Providing of a counselor trainee in the OR has the potential to help patients and families manage the emotional discomfort that often accompanies DBS surgery. The experience also expands the counselor trainee’s skills. It is important to note, however, that difficulties and limitations do exist.

Although appropriate therapeutic interventions may be planned, the nature of the DBS surgery provides a highly variable context in which an abrupt revision of treatment may be required. Unplanned events can occur during surgery. The patient may have an unforeseen emotional reaction to the operation, planned strategies may not relieve the patient’s anxieties, the patient may contemplate discontinuing surgery during the operation or the technical aspects of the surgery may not go as planned (for example, brain mapping may take longer than expected). Deviations from planned techniques should be expected, and improvisation may be necessary. Knowledge, skill, clinical experience and a comprehensive understanding of the patient’s needs are important when working with surgical patients.

Techniques used with DBS patients have been demonstrated to be helpful in treating anxiety and mood disorders. However, it is important to validate a treatment in the particular context in which it is applied. Therapeutic intervention in the OR is a new service, and it has relevant differences from the standard contexts in which the techniques have traditionally been supported. While application of these techniques is theoretically sound, appropriate empirical investigations are necessary to objectively investigate the treatment outcome and understand which techniques are most beneficial. Similarly, not every
Letters to the editor: ct@counseling.org

patient may benefit from a particular therapeutic intervention or even need an intervention, and research is needed to differentiate those who will and will not benefit from various techniques.

Although a relatively new field, providing counseling to patients undergoing DBS surgery presents great potential for helping patients and their families cope with the emotional difficulties that often accompany this surgery. As DBS is used to treat an increasing number of disorders, there is a greater need to manage patients’ discomfort during surgery. The provision of an appropriately trained and experienced counselor trainee during DBS surgery has the potential to become a common and viable treatment for surgery-related anxiety.

For counselor trainees at the Cleveland Clinic, the opportunity to work with DBS patients in surgery is unique. The clinical experience is one that fosters formation and development of a holistic perspective to patient care. This holistic perspective is the core and foundation to counselor training and the counseling profession.

Karen Broer, a member of the American Counseling Association, is a staff psychologist in the Cleveland Clinic Neurological Institute and, as part of the Allied Health Education Council, is director of the counseling program. Contact her at broerk@ccf.org.

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Becoming a volunteer is the best way to connect with fellow ACA members, develop your leadership skills, and become an integral part of the American Counseling Association – all while making a difference in the counseling profession. As a student volunteer you will have the opportunity to meet and interact with leading counseling professionals. You will also find a wealth of information regarding future career choices, so become a part of ACA’s graduate student volunteer program at the 2009 Annual Conference & Exposition in Charlotte, NC (March 19-23).

ACA is seeking up to 100 graduate student volunteers willing to work a minimum of 12 hours during the conference. In exchange for your time and commitment, ACA will waive one-half of your registration fee. We are also pleased to offer graduate students who have previously volunteered in this program full reimbursement for their registration fee.

The deadline to sign up for this program is Friday, January 30, 2009. For more information about this program, please go to the ACA website at counseling.org/Students/GetInvolved, or contact Robin Hayes at 800.347.6647 ext. 296.
Developing a climate of access, equity and excellence in education for all students will be the topic of C. Adolfo Bermeo’s keynote at the 2009 American Counseling Association Conference & Exposition in Charlotte, N.C., in March. Bermeo is a senior scholar with the Pell Institute for the Study of Opportunity in Higher Education and works closely with the Council for Opportunity in Education in Washington, D.C., serving as a faculty member and lecturer at the council’s seminars for counselors and educators throughout the United States.

“Our primary interest (at the Council for Opportunity in Education) is studying low-income, immigrant or first-generation college students. We look at the populations and the issues impacting their pathway to higher education, graduate school and professional school,” says Bermeo. “We also are looking at — for those students who do make it to and through higher education — what are their reasons for success? What makes them click in a society that typically denies educational opportunities to poor people and to the vast majority of immigrant students and closes the door on underrepresented students?”

Throughout his more than 40-year career, Bermeo has collaborated with state, national and international organizations as an outspoken advocate for opening the doors to higher education for low-income, first-generation college, historically underrepresented and immigrant students. He is also an advocate for social justice for those who have been denied access to the benefits and rewards of higher education in American society.

In late 2005, Bermeo retired from UCLA, where he was associate vice provost for student diversity and community college partnerships, director of the Academic Advancement Program and a faculty member in the Cesar Chavez Center for Chicano/a Studies. While at the university, Bermeo moved the Academic Advancement Program and its 6,000 students from the margins to the center of UCLA academic life. Under his leadership, the program increased the graduation rates of African American and Latino/a students from 45 percent in 1985 to 83 percent in 2005. His development of the Academic Advancement Program’s Pedagogy of Excellence and his commitment to high expectations, high standards, a multiracial academic community and the graduation of students dedicated to transforming society earned the program international recognition and made it a model for best practices in working with underrepresented and underserved students.

In the classroom, Bermeo both challenged and encouraged his students, connecting their academic work to their life experience, while setting high expectations and rigorous academic standards. An immigrant himself, Bermeo has been a strong advocate for Latino immigrants, and particularly undocumented students. At UCLA, he was instrumental in establishing a student organization advocating for the rights of undocumented immigrants on campus.

Coming to America

Bermeo emigrated with his family from Mexico to the United States in 1959 at the age of 15. At the time, he did not speak English. His father worked as a day laborer. And for the first time in his life, Bermeo recalls, he realized that his family was poor. Still, while his father was not formally educated, Bermeo credits him with serving as his most important role model.
“I worked with my father from the age of 9 until about 19, doing physical labor, but he was always talking about education,” Bermeo says. “He was a big boxing fan and taught me a lot about the sport and about its history. And while he would talk to me about boxing, he would always weave the stories about how the most famous boxers were able to excel. That guided me. He would talk about Joe Louis, a champion in the thirties and forties. Joe Louis always said, ‘You can knock me down, but you can’t knock me out.’”

Bermeo used that quote from Louis to motivate students both at UCLA and during his early career as a faculty member and administrator at Compton Community College in South Central Los Angeles. “I would talk to students about how doors aren’t always open, things might not go how we want them to go and you might get knocked down, but you are not knocked out. You’ve gotten this far. You have gotten through a system that is designed to keep you out and filter you out, but you have made it in. That philosophy came from my dad.

He understood that higher education was what he and my mother, uncles and grandmother came to the United States for — to open doors for their kids.”

Bermeo also drew on his experiences and background as an immigrant to connect with and inspire students encountering similar situations. They responded to his struggles, hopes and dreams by likening them to their own, he says.

“As a teacher and counselor (for Job Corps) early on in my career, it became clear to me that we were doing something special, work of significant importance, even though society didn’t necessarily say that,” Bermeo says. “Working in Compton (at the community college) for 15 years, nobody said, ‘Boy, you are doing wonderful things!’ But it was clear to me that I was. I was making a difference in my students’ lives.”

**His message to counselors**

The past several years, Bermeo has collaborated with ACA members Courtland Lee, Don Locke and Howard Smith to present seminars and conferences through the Council for Opportunity in Education. The ACA members heard Bermeo speak on several occasions and believed his message of overcoming adversity would resonate with attendees of the ACA Conference.

“There’s been such a big social justice movement in counseling, and there has been a lot of talk about social justice within ACA over the past few years,” says Courtland Lee, a past president of ACA and a leading voice in the areas of social justice and multicultural issues in counseling. “Many people are talking about how counselors need to be involved as advocates, but a lot of it has been lip service. Adolfo is someone who really does walk the walk when it comes to social justice issues. He’s been doing it long before anyone in ACA thought about the term. He’s been a passionate advocate for those marginalized populations for most of his career.”

Lee adds that during ACA’s partnership with the Council for Opportunity in Education, he, Locke and Smith worked closely with Bermeo in presenting training sessions for counselors across the country. “During these training seminars, Adolfo would usually close the training...
with a speech,” Lee says. “They were always really powerful, and people were truly moved — sometime to tears — by what he had to say. He really is a passionate speaker, and we always knew we wanted him to come be a keynote for ACA.”

Bermeo says he will discuss how ACA members can guide individuals who have internalized the message of being “at risk” and help them discover their inner strengths. In turn, this will facilitate success and push them toward excellence.

“During my undergraduate and graduate career, I too internalized those messages that society sends to poor people,” he says. “I didn’t think I could make it, that I wasn’t university material. I used to tell my students that I thought I was the one mistake that the university made in admissions. They would laugh, but they also nodded their heads. They felt that too.”

He adds, “The universities are very good at dealing with children of privilege, but they are not very good — in fact, they are terrible — at dealing with children of struggle. My path was to finally realize that I could do something to facilitate the success of these children of struggle.”

During his address to ACA Conference attendees, Bermeo anticipates sharing some of the most effective methods he has discovered for not only connecting with students, but also inspiring, encouraging and advocating for all populations and ethnicities.

“Counselors, counselor educators and vocational counselors and even mental health professionals need to be part of the process of opening access to those who have been left out,” he emphasizes. “The whole spectrum of counseling professionals really can play a huge part in helping the underserved gain the fruits of our society, and there is no better way to gain those fruits than with the opportunities of higher education. It’s important for us as good counselors, teachers and therapists to know how we can use our professional and human skills to encourage those who have been left out to come in. That’s the message I’m going to bring to the conference.”

Now in retirement, Bermeo continues to study and advocate for the transformation of American society and for equity for immigrants.

Additional keynote
Judy and Dennis Shepard lived a nightmare when their son Matthew died following a brutal attack that authorities determined to be a hate crime. Judy Shepard keeps Matthew’s spirit alive in the poignant messages she has been delivering to audiences for more than a decade. As a keynote speaker at the ACA Conference & Exposition in Charlotte, she will share her message about what professional counselors can do to help make our communities and schools safer for everyone, regardless of race, gender, religion or sexual orientation. Look for a full-length feature on Shepard next month in Counseling Today.

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Letters to the editor: ct@counseling.org
NBCC and ACA: An organizational relationship

On behalf of the Board of Directors of the National Board for Certified Counselors, I would like to extend our compliments to the American Counseling Association for taking the bold and progressive move toward a new format for communication with the profession. NBCC appreciates ACA’s invitation to provide contributions to Counseling Today, knowing that such a gesture exemplifies the strong relationship the organizations have formed over time. This cooperation continues to benefit the profession of counseling.

In 1989, during my first month of working for NBCC, I was told that I needed to meet Rich Yep, “the guy who knows everything about ACA and government.” I was impressed with Rich and his knowledge. He was gracious with me in my naiveté about legislation and generously shared valuable background about our counseling world. It is a pleasure now to work with a man who has our history and politics in his experience. With our regular e-mails, which occur most often at late hours rather than 9 to 5, Rich and I have come to appreciate our different roles and the passion we bring to them. These kinds of interactions are the essence of good organizational relations.

Working with Rich, who is now ACA’s executive director, on a variety of issues has stimulated further collaborations between NBCC and ACA, and it is from this joint effort that we can continue to promote the profession for the benefit of all counselors. Our organizations each represent more than 40,000 counselors, and with an overlap of approximately 40 percent, our combined organizational voices are loud. Both Rich and I hope to continue exploring avenues of cooperation — in fact, we do that with regularity. We share a vision in which our respective organizations, working together, provide greater opportunities for counseling to grow. Rivalry would only diminish our efforts.

This is not to say that the missions of ACA and NBCC are the same. In fact, there are some important distinctions between membership and certification organizations. The conception of NBCC came from leaders of ACA and the Association for Counselors in Education and Supervision. NBCC was not only a professionalization initiative, but also an organization that could promote regulation in support of state licensure for private practitioners. The response from the profession back in 1982 was remarkable. Within three years, more than 17,000 counselors had applied for certification, and almost all of them were ACA members (then called the American Personnel and Guidance Association).

NBCC was headquartered in the same building with ACA from 1982 until 1992, when NBCC moved its headquarters to Greensboro, N.C. From the onset, the unprecedented growth of the two organizations provided both support and challenges. ACA was the initial management company for NBCC. We paid for those services until NBCC was more able to have a discreet staff. We grew in size and complexity and finally needed to look for more space that we could purchase. That initial local search eventually ended in a national move to Greensboro.

Through the years, NBCC credential holders, National Certified Counselors (NCCs), became vocal about other benefits that an organization as large as NBCC could offer besides certifying them and promoting licensure in the mostly unregulated states. In 1982, only a handful of states such as Virginia, Texas and Alabama regulated counseling. The use of the National Counselor Examination for Licensure and Certification grew as new state boards saw the economy of using an existing national exam. From the beginning, NBCC was more than a certification board advocating for professional standards; as a specialty testing company, we conducted counseling research and utilized that information in national examinations. We complemented ACA advocacy and also began to develop our own areas of expertise.

Various NBCC Boards have ventured into many suitable projects that support professionalizing counseling, such as coalescing with other counseling organizations and establishing standards that complement the training standards created by the Council for Accreditation of Counseling and Related Educational Programs. We also support avenues for continuing education as well as provide service to our student community. Additionally, NBCC has been very active in government projects such as state lobbying, federal lobbying and disaster response. In the late 1990s, NBCC focused its attention on helping the state licensure movement. Specifically, we have made more substantial contributions to every state licensure committee beginning in 1998.

NBCC is aware that our certificants have become more active in supporting their communities. Many have volunteered their time and services to those affected by the recent natural disasters. Others have become active in licensure advocacy efforts, including those in California and Nevada. As NCCs expand what they do, our scope of activities may expand to continue our public protection mission.

Professional counseling organizations such as ACA and NBCC can work together effectively. Our goals may be simultaneously divergent and unified. In the end, clients and counselors benefit.

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It almost seems counterintuitive to suggest that broadening your market as widely as possible is not the best strategy for building a private practice. But many experts and experienced practitioners alike say that narrowing your focus — developing a specialty or niche — often improves business prospects and makes work with clients more satisfying and successful.

While it is wise to first develop a sound foundation of general knowledge as a counselor, having a specialty area — whether couples work, children’s issues, trauma or eating disorders — can help a private practice attract clients who want to work with an expert. The approach can also make marketing more efficient. And, experts say, counselors often grow to feel more confident about their work as they train themselves thoroughly in a specialty area and gain effectiveness with specific clients.

“Developing a niche is primary to establishing yourself as a clinician in the community where you wish to practice. And it should come from an area about which you have a passion and where you have specialized training,” says Phyllis Mogieliski-Watson, associate director of training at the Chicago School of Professional Psychology and immediate past president of the Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling.

**It finds you**

The primary reason for choosing a niche is most often an abiding interest in a particular type of client — or because a specialty presents itself. “Most of us back into something. It is then pretty much common sense. If you like the work and are pretty good at it, do it,” says Robert Walsh, who has a private practice specializing in work with adolescents. However, counselors are obligated to get additional training, if necessary, when they find opportunities to specialize, emphasizes Walsh, who, along with Norman Dasenbrook, is coauthor of *The Complete Guide to Private Practice for Licensed Mental Health Professionals.* The two also write the **Private Practice in Counseling** column for *Counseling Today* and provide “Private Practice Pointers” for the American Counseling Association website.

“I didn’t set out to necessarily find a specialty. It found me,” says Susan Hoppenworth, who has been in various private practices for 30 years. Having developed a strong reputation among insurance companies, she is now working in Asbury, Iowa, primarily with third-party reimbursements and employee assistance programs. “My first job after graduate school in 1984 was with a residential treatment facility for adolescents,” she says. “It was the only job I could find and, consequently, I developed a specialty working with families and teenagers. This has served me well, even at the present time.” She later worked for a clinic and specialized in chemical dependency, earning certification in that area as well as a license for mental health counseling. These experiences provided her with unique qualifications in her community and fueled a successful private practice.

ACA member Ann Doherty, a past leader with the International Association of Addictions and Offender Counselors, has a practice in which she works with families and also serves as a mitigation specialist, investigating the mental health and personal histories of persons charged with capital offenses. She likes the combination of clients and has carefully calculated how much work she needs and wants in both fields, logging 20 daytime billable hours of mitigation work during the week and about 10 hours a week of evening hours for a family practice.

**Benefits of diversity**

“I appreciate diversity in a workday, and my two practices offer this,” Doherty says. “In each practice I meet people who are facing or who have faced tremendous problems and stressors. The practices offer a balance with the intense presence that is required to counsel people in my counseling practice or obtain the stories of their lives in the mitigation practice.” She notes that the more mundane business aspects of the counseling practice, such as billing, marketing and making referral contacts, and the organizational work of mitigation investigation provide “a good change of pace and perspective.”

“I have a very strong feeling about this,” says Nancy Newport, a counselor based in Fairfax, Va., who began specializing in trauma issues after the Peace Corps asked her to see its returning enrollees and her reputation grew in that...
niche area of counseling. “When and if an area of specialization finds us, it is our obligation to serve that population — to help those clients and train ourselves,” she says. “And when we can’t help, to refer them to someone who can.” Newport, like many of her colleagues in the counseling profession, has developed more than one niche, also specializing in couples work and premarital consultations.

Larry Burlew, a professor and counseling program coordinator at Montclair State University in New Jersey and a past president of the Association for Adult Development and Aging, says there are two ways to think about choosing the proper niche. Quoting the ACA Code of Ethics about the boundaries of competence, he notes that sometimes counselors choose an area of expertise independently by training sufficiently and then marketing themselves. The other approach is to obtain the appropriate training after they have identified a need — what Burlew terms “letting the community guide them.”

“For example,” he continues, “through your practice with a community agency, you might see a lot of cases of adolescents experimenting with drugs or being oppositional to parents, so you can identify a need in the community for someone to specialize in adolescent development. Then your chance of success seems greater. If you don’t already have the appropriate training, you would get it before advertising that specialty.”

**Marketing a specialty**

Word-of-mouth advertising and other marketing efforts tend to be more effective with a practice in a specific area of counseling, contends Burlew, a member of ACA. “When one has a specialty, I have found that clients and friends of clients tend to remember exactly what you do,” he says. “The specialty seems to stick in the minds of people faster or more intensely. … I also think you can target your networking and advertising more productively.” For example, he says, having a niche allows counselors to develop marketing material that “speaks to the client population, their friends, their loved ones and their professional caregivers.”

Juliet Austin, a counselor, author and speaker from Vancouver, British
How to choose a niche market

Juliet Austin, a counselor and an expert on niche markets for helping professionals, says there are six key points to consider before choosing a specialty.

1. Brainstorm. Think about what people want. Talk to clients and others about the need in a community. Read and watch the news. Pay attention to trends in society, changes in the way we live and the way these things affect our lives.

2. Choose a passion. Pick an area to specialize in that really interests you. “It is a lot easier to motivate yourself to market to a population of people that you enjoy working with,” Austin says. “Also, passion and enthusiasm are often contagious.”

3. Understand the niche. Gather as much information as possible about the specialty you wish to explore, including specifics about the immediate and surrounding community where you would practice this specialty.

4. Size things up. A niche practice has to provide enough clients to survive but not so large that you don’t have a focus. Consider whether people really have a need for a specific type of service or whether there are many others already serving that need.

5. Know where to go. Research ways and places to reach clients in need of your specialty so you can market to them. Make sure you can reach that group easily and cost effectively.

6. Consider more than one niche. There is nothing wrong with having more than one niche, although you will have to guard against allowing either one (or both) to become watered down. Also be aware that it may take more time and effort to market to more than one niche.

ACA member Robert Walsh, an expert in developing private practices and a counselor specializing in adolescent issues, offers some of the possible areas that can form the basis for a niche counseling practice:

- Substance abuse
- Teenagers
- ADD/ADHD
- Weight control
- Play therapy
- Art therapy
- Biofeedback
- Smoking cessation
- Employment/coaching
- Career counseling
- Financial counseling
- Geriatric care
- Stress/anxiety
- Depression
- Motivation/organization
- Anger management
- Dance/movement
- Grief/loss
- Divorce
- Children of divorce
- Wellness/health issues
- Eating disorders
- Pastoral counseling
- Children with learning difficulties
- Hypnosis/relaxation exercises
- Group therapy
- Gambling
- Marital issues
- Victims of rape or abuse

Columbia, who has written on the topic of specialty niches agrees. “People prefer specialists as opposed to generalists when they are seeking a service professional,” she says. “If you were looking for a counselor for help with problems you were having with your partner, wouldn’t you rather see one who specialized in couples counseling as opposed to one who sees everyone? It is also much easier to get known in your field when you are seen as an expert.”

Walsh says specialists can market their practice more easily by speaking or writing on a topic and by making themselves readily available to other professionals. He even suggests developing business space in conjunction with other professionals in a field. For instance, he says, counselors interested in children’s issues might consider subletting space from a pediatrician.

He adds that managed care and employee assistance programs often want counselors to have an area of expertise, then work closely with those who practice the specialty successfully.

Austin notes that specializing can also prove beneficial on the Internet, where search engines will more quickly and clearly sort out professionals in any given niche area.

Before you start

A region’s demographics are one thing a counselor should consider before trying to establish a niche practice, Austin says. While Hoppenworth’s specialty and qualifications were especially valuable in Asbury, for instance, other areas might not have the same level of need. Narrowing a practice in a way that doesn’t meet an existing need will make it difficult to survive, Austin says. She emphasizes that while a choice of specialty should be based on what opportunities come the counselor’s way and what issues the counselor feels strongly about, the decision should also be made with knowledgeable information of the market.

“A lot of times, counselors know what niche they want and what they would be good at, but they are reluctant because they think they will fail,” Austin says. “They should move ahead. A niche can help someone in private practice thrive, but they have to move wisely with good information.” She also suggests that counselors test their specialty in their local area gradually to gauge the likelihood of success.

Mogielski-Watson concurs that niche practices often need to take root and grow slowly. “The more you practice and the more successful you are in an area,” she says, “the stronger your niche becomes, and the respect for your specialty naturally develops.”

Jim Paterson is a school counselor in Maryland and a frequent contributor to Counseling Today. Contact him at mypat@radix.net.

Letters to the editor: ct@counseling.org
Rick Balkin, President

I am honored to have the opportunity to serve AACE as president. I believe we are off to an exciting year with our national conference in Dallas from Sept. 19-20. I appreciate the opportunity to work with such excellent professionals and colleagues who truly contribute to the professional development of AACE members and the counseling profession as a whole.

Last year, under the leadership of Donna Gibson, AACE set out to expand the comprehensive nature of our organization, including not only testing and measurement but also other elements of assessment such as education, evaluation and research. These ideas are reflected in our statements of purpose, and we hope to attract more members who find these attributes to be a good fit in their professional development and expertise.

At the ACA Conference in Hawaii, Jerry Juhnke, from the University of Texas-San Antonio and a past president of AACE, gave a keynote address at the AACE breakfast. He clearly expressed the essential role that assessment plays in the counseling profession. Counseling services related to diagnosis, treatment planning and evaluation do not occur without assessment expertise.

At times, the practice of assessment by qualified counseling professionals has been challenged. AACE will continue to work with ACA, NBCC, FACT and other associated professional organizations to protect the rights of counselors with respect to assessment practices. We will also continue to work with other professional divisions within ACA to collaborate on assessment standards and practices that may enrich the counseling profession.

Carolyn A. Greer, President

Today’s aging population in the United States is reaching unparalleled numbers, and the numbers continue to grow in ways never seen before. Along with those numbers come additional mental and physical health needs as people live longer and experience many aspects of living that have not been dealt with before. Much research is indicating that this aging population will be working longer and living their lives differently from that of previous generations. That presents both a unique opportunity and a challenge for AADA. Therefore, my goals as president of AADA are:

- Provide ways to increase the visibility of gerontological counseling for meeting the needs of an aging population by collaborating with other organizations that are interested in an aging population but do not yet know the value of counseling
- Encourage more counselors to become interested and educated about an aging population and learn how important counseling can be to increasing the happiness, well-being and productivity of this group
- Address this population’s concerns to policy-makers and money brokers
- Help counselors to understand the needs across the life span that affect each developmental stage and their impact upon the next and future stages

Shane Haberstroh, President

I am truly honored to serve as ACC president this term. Creativity and the creative arts have framed my personal, academic and professional experiences. As a founding board member of ACC, I am proud to belong to an organization that values the synergy between creativity, relational development and diversity.

My goals are founded on principles of creativity and relational development in a pluralistic society. During my term, I will seek to strengthen the association’s growing national and international membership base. We will continue to enhance our membership infrastructure as a way to keep members informed. Using the ACC website and other technologies to connect our membership, I envision creating an online community where members share resources and professional opportunities and dialogue about creativity in their work. In this way, barriers of distance and time can be overcome, allowing members to access an inclusive ACC community.

Furthermore, I will continue to broaden our membership base and leadership to include national and international...
representation. To reach this goal, we have asked members to volunteer for ACC committees and other division projects and will continue to seek members’ involvement. I will also collaborate with other ACA divisions and regions to strengthen our connections at the national level.

Finally, the ACC Board has worked diligently to develop relational competencies for counseling practice, surveying our membership about their professional and personal relational experiences. From these narratives, we have begun developing and refining our framework for relational competencies in counseling practice. Another goal of mine is to assist the board in developing the next phase of this work to ultimately translate this body of knowledge into well-articulated practice competencies. Once again, it is a privilege to serve ACC. I look forward to our ongoing development and growth. If you have any questions, contact me at shane.haberstroh@utsa.edu.

American College Counseling Association

Kevin Gaw, President

This year, the Executive Council will be working on a new strategic plan for the association that will be presented to the membership for consideration. This plan will focus on immediate association concerns as well as where ACCA can go in the future. We will explore the realities of conference planning and the possibilities of hiring an association manager-like professional. We will explore approaches to increasing membership and ways to further enhance the membership experience. Our exploration will also examine collaborative relationships with other professional associations within ACA and beyond — what makes sense and where ACCA should be putting its energy. And we will be planning for the Fifth National ACCA Conference to be held in St. Louis in October 2010! We also need your help — there are several great leadership opportunities specifically designed for ACCA members to assume.

College counseling is about the whole person. College mental health practitioners, whether social workers, medical practitioners, therapists, counselors, clergy, career counselors, psychologists or personal counselors (just to name a few), are all invested in student development and success. With the increase in the severity of presenting concerns on college campuses today, we must all work together to provide excellent and comprehensive services for our students. One critical issue for us (and our administrators) is never to forget the importance of the student development process as we prepare for and respond to discreet clinical events.

As your president, thank you for your confidence in me. We have an exciting year ahead of us, and I look forward to serving and representing you. Never hesitate to contact me or any of the Executive Council members. We are here to serve you and the association!

Association for Counselors and Educators in Government

Sharon Seesholtz, President

In this time of increased operational tempo within the Department of Defense and the Department of Veterans Affairs, it is of utmost importance that professional counselors within ACEG continue to enhance their skills and knowledge base. My goals for ACEG this year:

■ Continue to provide a world-class Professional Development Institute in conjunction with the ACA Conference & Exposition in Charlotte, N.C. We have a two-day PDI set for March 19-20, 2009, with the topics related to family issues, post-traumatic stress disorder as well as the “new” GI bill passed by Congress in July and the Myers-Briggs Type Indicator.

■ Continue to expand membership throughout the Department of De-

fense, the U.S. Coast Guard and the Department of Veterans Affairs

■ Develop a marketing plan to attract more graduate students and interns

Association for Counselor Education and Supervision

David M. Kleist, President

I enter my year of presidential service well-prepared and guided by my predecessor, Judi Durham. My goals for the coming year are as follows:

1. Continuing the work of Judi Durham with her emphasis on social justice and advocacy in counselor education. Counselors will need continued and expanded exposure to effective and creative means to advocate for clients and the systems in which we all live.

2. Further the stated vision and mission of ACES via meeting the goals outlined in the strategic plan. I intend to share with ACES members the goals achieved to date and upcoming areas of activity as developments occur via aceonline.net.

3. Specifically related to the fourth commitment of the ACES vision statement (“Provide and disseminate premier research and scholarship”), I and the Executive Council will assess the attitudes of ACES members, ACES editorial board members and outgoing Counselor Education and Supervision editors toward scholarship in CES and perceptions toward its future success as a vehicle for dissemination of scholarly work. Our journal needs to be seen as the site for seminal research and quality conceptual articles related to counselor education and supervision. My goal is to intensify the focus of CES on scholarly work tied to our vision and mission statement and explore ways to expand the visibility of CES to the larger educational community.

4. Organizationally, 2009 will be the time to review our two-year cycle of ACES Conferences. I, with the assistance of President-Elect Tom Scofield, will begin to develop an evaluation process...
Anneliese A. Singh, President

My goals for our division during the next year are strengthening our community, supporting queer youth and addressing social justice issues. From our first-class journal and newsletter to our conference events, I will ensure our members stay connected to the most current and pressing issues in LGBTQI counseling. Our division was born out of an attempt to survive heterosexism within our profession, and now it is time for our division to thrive! We welcome new members and also celebrate our longtime members. I would like to see our division exceed 1,000 members this year, and we will also be working on establishing our first divisional conference.

The second goal of supporting queer youth is a must for our division. With the recent murder of queer adolescent Lawrence King by his 14-year-old classmate, and with suicide the No. 1 cause of death for queer adolescents, we must find ways to support and nurture the resilience of all our youth to express their gender and sexual identity within family, school and community environments that are safe.

The third goal of social justice is a fitting one considering the recent reemergence of those within ACA who support conversion therapy. Our division is a voice of reason, research and advocacy that will be at the table to counter those who believe gender and sexual identity can be “changed.” I will also work with other divisions to ensure that ALGBTIC grows stronger through interdivisional collaborations on social justice issues. We will continue to address the ways the “isms” (e.g., racism, sexism) affect our community, and I will also ensure that transgender concerns are central to our division. Encompassed in all these goals is my commitment to making ALGBTIC a beloved community for all those working to end heterosexism and other oppressions.

Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling

Francene E. Haymon, President

“A visionary counselor embraces the exploration of different worldviews to seek human self-understanding.” — Francene E. Haymon

It is my humble pleasure to extend greetings to all who are interested in AMCD. Our association encourages and welcomes new members, supports current members and appreciates service rendered by our Executive Council and the Past Presidents Council. AMCD has the prestigious honor of having an award-winning professional journal and the signature Multicultural Counseling Competencies.

Please allow me the opportunity to share with great pride the AMCD focus goals for this year.

The first goal is to design and implement a Service Day for community outreach services. Hopefully, each year AMCD will provide a Service Day Project in every ACA Conference city. The first Service Day will take place in 2009 in Charlotte, N.C. The Service Day Committee has been established and is in the process of planning a counseling training program. Future programs could include research workshops, motivational seminars, tutoring and study skills and community employment networking.

The second focus goal is to maintain AMCD commitment to the global community. In 2009, AMCD/ACES will sponsor the Counselor Southern Africa Experience.

The third focus goal is to continue the Summer Leadership Program for emerging leaders. To strengthen AMCD and keep our essential legacy, leadership training is vital. The Summer Leadership Program will be a three-day experience in strategic planning, communication, grant writing, dissemination of research materials, problem solving and consultations.

I know I stand on the shoulders of past leaders. However, it is my desire as the 2008-2009 president of AMCD to provide guidance to continue excellent professional multicultural counseling and development.

T reasure yourself.

American Mental Health Counselors Association

Victoria A. Sardi, President

It is an honor to serve as AMHCA’s president. I look forward to continuing the initiatives and efforts of previous AMHCA leaders. AMHCA has been actively involved in a national effort to respond to the critical concerns of our nation’s unmet mental health needs. The stigma associated with seeking treatment for mental illness has often become generalized to anyone seeking treatment for an emotional need or concern; this in turn has greatly impaired a more effective utilization of mental health services. For more than six years, AMHCA has promoted mental health awareness by encouraging the U.S. Postal Service to create a “Mental Health Awareness” stamp. AMHCA has obtained more than 20,000 signatures from citizens in support of this stamp, and this project will continue to be a goal for the coming year. My other goals are:

- Membership and mentorship: Enhance membership involvement and retention by providing and encouraging members to access AMHCA leaders and become involved at the local and national levels
- Professional identity and advocacy: Promote the identity of mental health providers as valued professionals in the mental health field.
American Rehabilitation Counseling Association

Yolanda Edwards, President

I am honored and privileged to serve in this position and foresee a successful year. I am committed to achieving these goals together with the ARCA Executive Council, the members of ARCA and the consumers we serve. The motto for my presidency is “It is not ‘my organization,’ it is our members’ organization.” Listed below are the goals for my presidency.

- Collaboration and partnerships: To engage in active collaborations and partnerships with other national professional organizations and consumer groups. We have worked in partnership with CORE and CRCC in the past. Now we need to extend our partnerships to consumer groups as well as international rehabilitation counseling groups.
- Legislative issues: Support AMHCA’s Public Policy and Legislation Committee in meeting our national and state legislative agendas.
- Chapter outreach: Support state chapters by fostering stronger connections to AMHCA through leadership trainings, mentoring future leaders, enhancing communication among state chapters and developing opportunities for collaboration.

I feel so fortunate to have such talented and committed AMHCA staff members, AMHCA Governing Board members, regional directors, committee members, chapter leaders and members to turn to this year to help make these goals a reality. Together, I am confident we can continue to grow and strengthen the association. I welcome the opportunity to hear your feedback and concerns. Feel free to e-mail me at ysardi@gwu.edu.

American School Counselor Association

Counselor licensure: Our association has been very instrumental on licensure as it relates to rehabilitation counselors. We need to continue to work toward identifying states where opportunities exist for inclusion of rehabilitation counselors.

Strategic plan for ARCA: One of the main goals is to have in place a five-year strategic plan for the association. During the fall ARCA Board meeting, we will be working on our strategic plan for the organization.

American School Counselor Association

Jim Bierma, President

In his book Good to Great, Jim Collins says good organizations become great by keeping the flywheel turning. ASCA started turning the flywheel several years ago, and it is spinning rapidly, gaining momentum on ASCA’s course to greatness. So I have a simple goal as president this year: to keep the flywheel turning and, when necessary, to stay out of the way so people can do what they do best and what only they can do. My role is to maintain the momentum so the flywheel stays on the current course.

The success of the current course is amazing. ASCA’s annual conference in June was its most successful ever, with more than 2,000 attendees and 186 exhibitors. In addition to the incredible keynote speakers and breakout sessions, we had a lot of fun at our social events, such as our first-ever casino night, and even raised almost $7,000 for Habitat for Humanity. Our magazine, ASCA School Counselor, just won another award, and our membership continues to grow, with a 15 percent increase during the past year. More importantly, we are working with school administrators, teachers and other stakeholders to educate them about school counseling in the 21st century. We are also working with legislators to pass legislation such as the Put School Counselors Where They’re Needed Act, sponsored by Linda Sanchez (D-Calif.), and to secure funding for the Elementary and Secondary School Counseling Program.

ASCA is exploring many initiatives that will allow the organization to build on its successes and forge ahead in new directions. The school counseling profession is growing and changing every day, and ASCA is growing and changing with it. This is a great time to be a school counselor and a great time to be a part of ASCA.

Association for Spiritual, Ethical and Religious Values in Counseling

Lisa Jackson-Cherry, President

This has been an exciting year for ASERVIC, and I am blessed to follow in the footsteps of those who have made such wonderful contributions to the organization. The first National ASERVIC Conference was held at Lake Junaluska, N.C., June 15-17. The conference theme, “Illuminating the Path for Training and Practice,” focused on the integration of ASERVIC’s Nine Spiritual Competencies into practice and research for clinicians and educators. Immediately following the conference, a small group (Summit II) worked intensively to explore ASERVIC’s next initiatives. Based on these initiatives, the goals for 2008-2009 include working on:

- Developing a framework for a national credential consistent with the goals and mission of ASERVIC.
- Developing CEU opportunities from conference proceedings.
- Reviewing the current Nine Spiritual Competencies endorsed by ACA.
- Exploring a 2009 conference (at the strong request of participants at the 2008 conference). We will keep you posted!

In addition to the strategic planning conducted during the Summit II, goals for this year include:
Goals for my presidency include:

- Continuing to monitor the needs of members to meet the needs of the diverse membership
- Continuing to increase participation of graduate student members in ASERVIC
- Continuing to support strong scholarship in the areas of spiritual, ethical and religious values in counseling
- Increasing collaboration and involvement with state ASERVIC chapters

ASERVIC will continue to carry out its general mission of integrating spiritual, ethical and religious values into the counseling process. This will be accomplished through the creation of an environment that empowers and enables the expression, exploration, development and research of evolving spiritual, ethical and religious values as they relate to the person, to society and to the profession of counseling and human development.

Association for Specialists in Group Work

S. Lenoir Gillam, President

It is an honor to serve ASGW, the organization that has been my professional home for almost 20 years. My goals for 2008-2009 involve several interrelated issues: education and training, diversity and membership. Although our next national conference will not be until 2010, ASGW-related events at the ACA Conference in Charlotte, N.C., and the work of state branches offer training opportunities for our members. These experiences enhance accessibility of group work training and create opportunities for current and prospective members to collaborate on ways to advance the research, process and practice of group work.

Supporting branch development and collaborating with colleagues in other professional associations is likely to continue fostering diversity of membership and ideas, expanding the way we conceptualize and use group work and strengthening our impact on service, research and practice. In addition, The Journal for Specialists in Group Work, The Group Worker (our newsletter) and our website (asgw.org) continue to keep members abreast of current group work research and/or connected to ASGW information and events. Furthermore, we have developed products available for purchase, such as books and training videos, that are designed for group practitioners and educators. In addition, the following standards can be accessed for free at asgw.org: ASGW Professional Standards for the Training of Group Workers, ASGW Best Practice Guidelines and ASGW Principles for Diversity-Competent Group Workers.

I am thankful for the leadership of so many dedicated members and welcome opportunities to have new members join us. Your membership is important to us, and I am eager to hear your thoughts about how to continue strengthening ASGW!

Counseling Association for Humanistic Education and Development

Mike Walsh, President

I look at C-AHEAD as a dynamic and diverse organization capable of great things in the future. As someone who strongly identifies with the humanistic roots of the organization, I am honored to serve as president so we can continue some of the good work we have done in the past as well as nurture and grow our membership in the future.

Vehicles for this growth include the development of member benefits; positive and dynamic collaboration with other divisions, branches and regions; and, of course, the contributions of our talented and committed membership. I see the organization as a wonderful venue for member expression, for fostering the humanistic “discussion” within the field and for advocating for humanistic counseling and educational principles.

Goals for my presidency include:

- Development of a continuing education arm of C-AHEAD designed to meet the needs of our members
- The sponsoring of discussion and debate within the field with regard to humanistic counseling and education through the presentation of debates and presentations at annual ACA conferences
- Continuation of the Empty Plate Project
- Provision of high-quality and useful information to our members via our newsletter and journal

Our talented membership already has several incredibly exciting projects under way that have the potential to help build and strengthen the infrastructure of C-AHEAD for years to come. Of course, I am committed to continuing the strong tradition of C-AHEAD through the support and retention of our existing members, along with the recruitment and retention of new members.

Now more than ever, a humanistic approach to counseling and education makes good sense. I look forward to working collaboratively with the membership to ensure the quality of the bright future . . . AHEAD!

Counselors for Social Justice

Eric J. Green, President

In the coming year, the CSJ leadership hopes to continue building on the work of the early years of the division leadership. CSJ will continue to carry out its mission to readjust the focus of counseling to an agenda that brings increased equity, access, participation and harmony for all. Moreover, I want my presidency to reflect a focus on children, especially those who are disenfranchised, marginalized, affected by poverty and abused.

The theme of CSJ in 2008-2009 is “Advocating for Children: Lifting Up Every Voice.”

Specific areas of concentration for 2008-2009 include:

September 2008 | Counseling Today | 59
Increasing CSJ membership by 20 percent
Supporting the Texas Counselors for Social Justice chapter as it grows
Teaming with other associations and chapters of ACA in projects focused on social justice as it relates to counseling and counselor education
Speaking out on behalf of sociopolitical issues, especially those affecting marginalized children, in a timely fashion
Marketing and soliciting manuscripts for the Journal of Social Action in Counseling and Psychology
Maintaining an active support network online and in person for engaging in social justice activities in schools and communities
Building something tangible that will help children in need for years to come

International Association of Addictions and Offender Counselors

Todd F. Lewis, President

I am honored to serve as IAAOC president and privileged to be associated with a great ACA division composed of dedicated and hardworking professionals. My transition and task for this year have been made easier thanks to the consummate leadership of our past president, Simone Lambert, who, along with other past IAAOC leaders, has moved our division in exciting directions.

In many ways, my goals for 2008-2009 are extensions of the positive developments of the past:
- Persistently exploring innovative ways to expand our website
- Continuing to acknowledge and expand awards and recognition for excellent contributions to the addictions/offender field and counselor education by IAAOC members and leaders
- Pursuing greater collaboration with other ACA divisions
I also would like to expand the growing use of technology as it relates to inter-division communication among IAAOC members and leaders and strengthen IAAOC’s commitment and service to promoting growth of state chapters.

I will strive to promote IAAOC’s continued support of students, new professionals and members, who will continue to have opportunities through research grants, scholarships and networking opportunities at the 2009 ACA Conference in Charlotte, N.C.

A continued area for IAAOC expansion is greater collaboration with other ACA divisions, perhaps by creating collaborative task forces, engaging in joint publication opportunities and cosponsoring events at the ACA Annual Conference. My vision for IAAOC is consistent with its mission statement, especially in “providing leadership in the advancement of the fields of addictions and offender counseling.”

I look forward to working with IAAOC’s many talented and professional members and leaders. Considering the many lives negatively affected by addiction, I am honored to serve as president and pledge to carry on IAAOC’s vision of being “a high quality resource organization which supports prevention, treatment, research, training and advocacy for the addicted and forensic/criminal justice populations.”

International Association of Marriage and Family Counselors

Mary Ballard, President

What a privilege it is for me to assume the presidency of IAMFC. Having served on the Board of Directors for several years, I am eager to initiate new ideas and strategies to address the ever-changing needs of the IAMFC membership.

Advances in technology create exciting possibilities for communicating more effectively and for providing continuing education opportunities. In this next year, I will focus on improving and expanding IAMFC’s current vehicles of communication and the professional development opportunities available to the membership. The IAMFC website will receive a new look and format. Podcasts and other downloads will be made available, along with a host of other services and links aimed at meeting membership needs. The quarterly newsletter, The Family Digest, will also receive a makeover under the direction of its new coeditors, Kevin Fall and Justin Levitov. And, finally, I will work with the Board of Directors to revive the IAMFC conference that was postponed due to Hurricane Katrina. More to come on that later!

I believe that IAMFC exists primarily to meet the professional development needs of its membership, the practicing professionals, counselor educators and graduate students who go out every day and work to help couples and families help themselves. If IAMFC is to continue being a viable organization, we must continually assess those needs and find ways to meet them. Such is the challenge of my presidency, and I am looking forward to the challenge.

If you have an interest in moving IAMFC forward, I invite your active participation. E-mail me your thoughts and suggestions at Mary.Ballard@selu.edu. Together, we can be the division marriage and family counselors turn to for support, knowledge and camaraderie! I hope to hear from you.

National Career Development Association

Judith M. Hoppin, President

“Inspiring Career Development Practitioners” is the theme of our conference in July 2009 and the emphasis for the 2008-2009 year. Our country is experiencing dramatic changes in the local, national and global labor market with occupations emerging and declining and work being outsourced and in-sourced. Adult clients experiencing job loss must retool for jobs that may be viable in the near and distant future. We have thousands of...
Robert C. Chope, President

NECA is a dynamic organization committed to offering professional leadership and training to people who work in employment services and career development settings. Our members hail from a diversity of work settings, including private practice, business and industry, community agencies, colleges and universities, and federal, state and local government.

My presidential theme for 2008—2009 is “Employment Counseling: The Primary Ingredient in Achieving Social Justice.” Following in the tradition of Carolyn Kalil, our past president, and with our exceptional NECA leaders, I will strive to increase the size of our membership through the successful continua-

tion of the NECA Work-Life Institutes and Workforce Development Institutes coordinated by Kay Brawley. I will also align our organization with other ACA divisions such as the National Career Development Association. The NECA Journal of Employment Counseling has a new editor, Roberta Neault, who has assumed this responsibility after the many years of stellar service provided by Norman Amundson.

My goals for the coming year include:
- Involving larger numbers of graduate students in our division
- Creating a cadre of presenters with interests in social justice activities to speak at our institutes and national meetings and provide articles for our journal and NECA e-news
- Developing new ideas for those who are the most disenfranchised and underrepresented among our potential client base
- Initiating new ideas with regard to social entrepreneurship
- Improving our web presence and providing continuing online answers to questions that our members and potential members may have about employment issues
- Continuing to offer Global Career Development Facilitation along with training in True Colors
- Collaborating with organizations that provide distance counseling such as ReadyMinds
- Continuing to develop a stronger relationship with the Department of Labor

Midwest Region

Jean Underfer-Babalis, Chair

Welcome to the heart of the country, the Midwest Region of the American Counseling Association! I, Jean Underfer-Babalis, M.Ed., PCC-S, am truly honored to be serving as the Midwest chairperson this year and feel very privileged to have been elected by my peers to the position. Being a professional counselor is not just a job for me; it is a passion. Professional counselors are so fortunate to be able to assist humans in changing their lives, surmounting and transforming pain or suffering and bettering the human condition in some fashion.

Given this privilege, the theme I have chosen for this year is “Developing Professional Counseling Identity Through Effective Leadership.” The focus this year will be assisting the 13 state branches in the Midwest Region, primarily by offering productive and worthwhile workshops to develop their state leaders in the areas of identifying emerging leaders, marketing their state branches, addressing state finances, promoting advocacy, running efficient and effective organizations and dealing with legal and ethical issues that impact professional counseling.

The Midwest Region Leadership and Development Conference is being held Oct. 2-4 in the Chicago area at the Hotel Orrington (hotelorrington.com) in Evanston, Ill. The conference is being held right across the street from Northwestern University in a lovely community. Registration is available at www.counseling.org/midwestconferences.htm. Take a look at what we have planned thus far, with more exciting surprises to come (www.counseling.org/midwest/MWR_Fall_2008_Conference_Brochure.pdf).

The Midwest Region is a friendly bunch. We would love to see each and every one of you. I can promise you that to the best of my ability, you will walk away with some knowledge and/or skills that will improve your leadership abilities. The rest of the year, I plan to assist the state branches in whatever manner is meaningful to each state.

North Atlantic Region

Terry Mitchell, Chair

The goal of the NAR is to create a climate for the exchange of resources, ideas and services that are relevant to the re-
region, productive to the growth of helping professionals and useful to the people we serve regarding issues with guidance and counseling, maintenance of participation, administration of regional programs and education of ACA members.

Other NAR goals for the coming year are:

- Offer our branch leaders and members a traditional fall leadership assembly and conference
- Create a three-year treasurer’s position and eliminate the chair-elect-elect position beginning September 2008
- Work toward reactivation of four NAR state branches: Massachusetts, New Hampshire, Rhode Island and Vermont
- Serve as a liaison between ACA and NAR branches to facilitate timely communications
- Continue to support and work with ACA’s Task Force on Branch and Divisional Relationships
- Continue to support and work with the current ACA president and members of the Committee for Branch Development
- Continue to support and communicate with our Governing Council representative
- Establish periodic NAR leadership conference calls
- Improve communications with all NAR branch leaders and members to ensure that they have an active voice in the direction of our region, as well as in ACA
- Develop, maintain and improve utilization of the ACA regional website link
- Implement a mentors program for new emerging leaders and for reactivating branches
- Discuss ways to share responsibilities for helping our fellow branches and work toward unifying and strengthening our region
- Provide a network of supportive and caring professional counselors

### Southern Region

**Jeffrey Freiden, Chair**

Southern Region is entering an exciting new time for growth and development of our region and within our branches. New ideas and creative leadership have excited members as we work to make the counseling profession stronger along with our state counseling associations. I have worked with our incoming board and branch leadership to develop these goals for Southern Region.

1. **Technology**
   - Establish a permanent website that will contain readily accessible information for our members, including news, region information and archived seminars from our conferences.
   - Continue to use our Listserv to share counseling information among our membership and to broadcast breaking counseling news.
   - Work to help branches establish their own websites and Listservs at our Little Rock, Ark., conference in October.

2. **Strategic thinking**
   - Implement the ideas and plans that were developed using strategic thinking under the previous administration of Jeff Siskind.
   - We have created a permanent Strategic Thinking Committee that will continue to monitor the implementation of previous ideas and facilitate the development of new ideas and plans for Southern Region.

3. **Diversity**
   - Southern Region has established a committee that will work with branches and ACA to encourage minority counselors to become new leaders within Southern Region.

4. **Branch development**
   - Southern Region’s National Branch Development Committee will work with ACA to encourage counselors to join ACA and their state counseling associations. This committee will also work to foster a collaborative alliance among all national counseling divisions and ACA.

### Western Region

**Mary Schroeder, Chair**

1. **Communication**
   - Establish and promote communication between and within branches and divisions.
   - Increase communication and share information on activities via ACA website.

**Action plan:** Regularly update the Western Region webpage with branch and conference information and link documents for reference and sharing. Submit regional news updates from branches for publication in *Counseling Today*.

2. **Diversity**
   - Identify, recognize and promote diversity within branches and divisions with a focus on military culture and support for veterans, their families and community resources.

**Action plan:** Encourage and provide strategies for recruitment and retention of multicultural representation in branches and divisions, including identification and training for emerging leaders.

3. **Student recruitment/emerging leaders**
   - Provide opportunities for emerging leaders to participate in Western Region leadership training and support branch leadership initiatives.

**Action plan:** Recognize that emerging leaders can span age, experience and status within the branch membership. Write a continuing grant to fund identified emerging leaders and provide ongoing support for emerging leaders.
IAAOC seeking editor for journal
Submitted by Simone Lambert
slambert@vt.edu

The Executive Committee of the International Association of Addictions and Offender Counselors is seeking applications for editor of the Journal of Addictions & Offender Counseling, IAAOC’s premier journal. JAOC is published semiannually and contains scholarly articles that support effective counseling and rehabilitation programs for people with substance abuse problems and other addictions and adult and/or juvenile public offenders.

Selection criteria for the position include the following:

- Previous experience as an editorial board member (at minimum) and/or as a journal editor
- A publishing record that includes scholarly publications in refereed journals
- A history of involvement in and contribution to ACA through its divisions (particularly IAAOC), organizational affiliates, branches, governing bodies and/or committees
- An understanding of and commitment to the mission of IAAOC
- A clinical history of working with addicted or incarcerated clients is a bonus

The appointment of editor is for a three-year term beginning July 1, 2009. It is possible for the editor to be reappointed for a second three-year term.

Applicants must be ACA and IAAOC members. For an applicant to be considered by the IAAOC Executive Committee, the following material must be submitted via e-mail:

- A letter of intent that includes the applicant’s interest in becoming the editor of JAOC, intended editorial direction for the journal, areas of expertise and research (for example, counseling organizations to which he/she belongs, licenses, certifications, articles and presentations), clinical experience and any editorial and/or board experience.
- A current curriculum vitae
- A statement from an administrator of the applicant’s institution or organization describing support for the appointment (if applicable)

All applications must be received no later than Sept. 1. Late or incomplete applications will not be considered. The Executive Committee will screen all candidates and make its decision by Nov. 15. Send application material to IAAOC President Todd Lewis at tflewis@uncg.edu.

Emerging Leader Grants being offered by ACCA
Submitted by Greta A. Davis
davis_greta@yahoo.com

New professionals and/or graduate students interested in pursuing careers in college counseling are encouraged to apply for American College Counseling Association Emerging Leader Grants to attend the American Counseling Association Conference from March 19-23, 2009, in Charlotte, N.C. The deadline to apply is Wednesday, Dec. 10.

Preference will be given to those applicants who demonstrate a commitment to college counseling through scholarship and/or service. Recipients will receive a grant that covers the cost of early registration and the ACCA Breakfast and Business Meeting. Application materials are available online at collegecounseling.org. Questions? Contact Angela Shores at angela@shores-group.com.

Also save the date for the Fifth National ACCA Conference, which will be held Oct. 6-9, 2010, in St. Louis.

In other news, ACCA is seeking an energetic, visionary, innovative and technologically savvy webmaster to maintain the existing website and provide recommendations for redesign. Knowledge and experience related to managing websites is required, as is membership in ACCA.

The ACCA webmaster will be under the direction of the ACCA Executive Council and will be provided a $500 stipend and National ACCA Conference registration. Interested ACCA members should provide the following materials to Tina Alessandria at kalessandria@wcupa.edu by Oct. 1: a formal letter of interest in the position, a résumé and example websites managed.

ALGBTIC seeking articles for professional journal
Submitted by Ned Farley
nfarley@antiochseattle.edu

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

Articles should focus on one of the following areas (indicate in your cover letter which of the four areas best fits your article):

- New research in the field of counseling
- A review of the literature that critically integrates previous work around a specific topic
- Introduction of new techniques or innovation in service delivery within the counseling field
- Theoretical or conceptual pieces that reflect new ideas or new ways of integrating previously held ideas

All submissions should be prepared according to the guidelines of the Publication Manual of the American Psychological Association, including the use of citations and references and inclusion of nondiscriminatory language.

All work should be done in Microsoft Word. When submitting articles, make sure to include author contact information, including phone and e-mail. If accepted for publication, final manuscripts should be publication ready when submitted. It is the responsibility of authors to secure permission to use any copyrighted materials within their manuscripts.
The first two days of the conference will feature 42 two-hour mini-sessions on a wide variety of topics of interest to mental health professionals. The final two days of the conference will offer participants an opportunity to select from four different 15-hour Learning Institutes.

Among the scheduled mini-sessions:

- “Care for Trauma-Affected Clients Through the Narrative Genogram,” Karin Jordan
- “Creative Couples Counseling,” Mark Young and Ryan Carlson
- “Creative Humor at Work,” Sandra Meggert
- “Mild Traumatic Brain Injury and Post-Traumatic Stress Disorder in Returning Combat Soldiers: Implications for Assessment and Diagnosis,” K. Dayle Jones, Tabitha Young and Bryce Hagedorn
- “TCKs and ATCKs in the Globalized Century,” Bea Wehrly
- “When Death Visits a School: Childhood Response to Death, Loss and Psychological Trauma,” Fidan Korkut and Dean Owen

The Learning Institute program will feature the following:

- “Wellness and Habit Change: Promoting Positive Change in Self and Others,” Jane E. Myers and Thomas J. Sweeney
- “Romancing the Brain: Conflict Resolution in Recovery,” Cynthia Moreno Tuohy
- “Shadow Work: Re-energize Your Life Now,” John and Nicola Kurk
- “Getting Here: How to Enhance the Caregiver’s Life Journey,” Robert M. Bollet

Please visit the EB-ACA website at online-infos.de/eb-aca/main.htm or eb-aca.org for updated conference and hotel registration information.

For further information, contact 2008 EB-ACA Conference Chair Rick Sidley at richard.sidley@us.army.mil.

NECA training initiative focuses on changes in relationships

Submitted by Kay Brawley
kbrawley@mindspring.com

Life is all about change and adapting to change, even if we do not ask for or plan
ASGW invites applicants for Peg Carroll Scholarship

Submitted by Lorraine Guth
guth@iup.edu

The Association for Specialists in Group Work Awards Committee invites applicants for the $2,000 scholarship given annually to honor Marguerite “Peg” Carroll, former ASGW president and pioneer in group work. The purpose of the award is to support the study of group work and further the understanding of group dynamics. Any student interested in the field of group work is eligible for consideration.

Applicants are requested to respond to the following questions:

1. There are many types of group experiences such as therapeutic and/or counseling, decision-making, task oriented, psychoanalysis, quality circles, classroom meetings, etc. What area interests you the most and why?

2. Where would you obtain training in your area of interest? Be specific in respect to trainers, institutions, workshop sponsors, etc. In addition, describe your intended degree program, if it applies.

3. In what setting(s) and with what population do you hope to use your expertise?

4. How do you plan to assess if you and your groups are making progress? Have you had any experience with these evaluation tools? Explain fully.

5. List the types of groups in which you have participated. Describe their duration and the positive and negative aspects of each experience and your role (participant, leader, intern, etc.).

6. Describe your participation in professional organizations related to group work.

The application should have a cover sheet with name, address, home and work phone numbers, e-mail address, Social Security number and the names and contact information of those writing letters of recommendation.

Letters of recommendation should be solicited from three professionals in the field familiar with the applicant’s work with groups. Letters should be forwarded directly from the recommendation source to the address listed below.

Electronic submissions are preferred and may be submitted to kelly.mcdonnell@umich.edu. Submissions via regular mail should include three typed, double-spaced copies of the application to Kelly McDonnell, Western Michigan University, Department of Counselor Education and Counseling Psychology, 3102 Sangren Hall, Kalamazoo, MI 49008. Applications and recommendation letters must be received by Jan. 31. The scholarship recipient will be announced at the ASGW Luncheon at the ACA Conference in Charlotte, N.C.
BULLETIN BOARD

COMING EVENTS

Biennial Adoption Conference
Oct. 24-25
New York
St. John’s University, in collaboration with Montclair State University and Rutggers University, is pleased to announce the Fifth Biennial Adoption Conference, “Identity and the Adopted Teen: Surviving the Crucible of Adolescence.”

The conference will focus on the exploration of these various challenges to identity formation in adopted adolescents. The universities are announcing a call for papers and presentations. They are also seeking exhibitors and sponsors. For more information, call 718.990.5460 or visit adoptioninitiative.org.

10th Annual Energy Psychology Conference
Oct. 24-26
Toronto
Practitioners and nonprofessionals alike will gather to bridge the gap between conventional and alternative therapies at this event hosted by Meridian Seminars in association with the Annual Energy Psychology Conference.

Attendees are invited to come away for a weekend of learning and spiritual processes with hundreds of like-minded professionals. The lineup of star presenters provides an excellent opportunity to meet and learn from the best of the best in the field of comprehensive energy psychology. For information and to register, visit torontoepc.com.

APHA Annual Meeting and Exposition
Oct. 25-29
San Diego
The American Public Health Association’s 2008 Annual Meeting and Exposition invites attendees to learn from experts in the field, hear about cutting-edge research and exceptional best practices, discover the latest public health products and services, and share public health experience with peers.

The APHA Annual Meeting & Exposition is the oldest and largest gathering of public health professionals in the world, attracting more than 13,000 national and international physicians, administrators, nurses, educators, researchers, epidemiologists and related health specialists. APHA’s meeting program addresses current and emerging health science, policy and practice issues in an effort to prevent disease and promote health. For complete details, go to apha.org/meeting.

Wisconsin Counseling Association Annual Fall Summit
Nov. 1
Wisconsin Rapids, Wis.

The theme for this year’s summit will be “Journey Through the Seasons: Counseling Along the Developmental Life Span.” For questions or further information, please contact Charles Lindsey at 920.424.1475 or lindseye@uwosh.edu.

EB-ACA Fall Conference
Nov. 6-9
Wiesbaden-Niedernhausen, Germany

The 49th Annual European Branch-American Counseling Association Fall Conference will focus on the theme “The Power of Counseling: Care for the Client and the Caregiver” and will be held at the Ramada Hotel Micador. Visit the EB-ACA website at eb-aca.org for hotel and conference registration information. For further information, contact Rick Sidley, 2008 EB-ACA conference chair, at richard.sidley@us.army.mil.

FYI

Call for submissions, manuscripts

Richard E. Watts is the new editor for Counseling and Values, the journal of the Association for Spiritual, Ethical and Religious Values in Counseling, a division of the American Counseling Association. Counseling and Values is a professional journal of theory, research and informed opinion concerned with the relationships among counseling, ethics, philosophy, psychology, religion, social values and spirituality. Its mission is to promote free intellectual inquiry across these domains. Professionals whose research agendas include topics salient to Counseling and Values are encouraged to submit their work for review and possible publication.

All manuscripts should be submitted electronically to Watts at watts@shsu.edu. For a copy of the guidelines for authors, go to www.counseling.org/Publications/JournalsAuthoringGuidelines.aspx.

The Journal of Poetry Therapy: The Interdisciplinary Journal of Practice, Theory, Research and Education is an interdisciplinary journal seeking manuscripts on the use of the language arts in therapeutic, educational and community-building capacities. The journal includes bibliotherapy, healing and writing, journal therapy, narrative therapy and creative expression. The journal welcomes a wide variety of scholarly articles, including theoretical, historical, literary, clinical, practice, education and evaluative studies. All manuscripts will be submitted for blind review to the JPT editorial board. E-mail Journal of Poetry Therapy editor Nicholas Mazza at nfmazza@fsu.edu for complete submission guidelines.

Adultspan, the journal of the Association for Adult Development and Aging, is soliciting articles for a special edition focused on developmental impact of trauma and crisis on young and midlife adults, to include physical and mental health issues. The editors are interested in research or conceptual pieces related to natural disasters as well as manmade trauma (e.g., service in war zones, terrorism, violent crime).

General articles are appreciated on topics such as career development and adulthood; substance abuse/food addiction in adults; case-based articles on life span issues; teaching gerocounseling on the graduate level; and alternative family issues of gay and lesbian adults of any stage.

All submissions, both general and special issue pieces, should be e-mailed directly to Catherine Roland at rolande@ mail.montclair.edu. Contact Roland for complete submission guidelines.

Bulletin Board submission guidelines

Due to Counseling Today’s new magazine format, submissions for the Bulletin Board must be 100 words or less beginning Sept. 1. All entries must be submitted via e-mail to akennedy@counseling. org with “Bulletin Board” in the subject line. Paragraphs should be in an MS Word document, single-spaced, justified and Times font in black. Please provide a contact person with an e-mail address or phone number to call for more information. Submissions are subject to editing. The rolling deadline is the first of every month by close of business for publication in the following month’s issue.
Obituary

William Fennessee
Loss of sight in fourth grade didn’t stop beloved counselor educator

William Fennessee, associate professor and coordinator of the Alabama A&M University Rehabilitation Counseling Program in the School of Education died July 16, 2008, at the age of 57. Fennessee was a native of Mount Pleasant, Tenn. He earned a bachelor’s degree in psychology from Austin Peay State University in Clarksville, Tenn., a master’s degree in rehabilitation counseling from the University of Tennessee and the Rh.D. degree in rehabilitation administration from Southern Illinois University-Carbondale.

In coordinating the graduate training program in rehabilitation counseling at Alabama A&M, Fennessee implemented a curriculum with concentrations in deaf and hearing impairments and blind and visual impairments.

Fennessee was affiliated with numerous professional organizations, advisory boards and community organizations. He was a member of the American Counseling Association, American Rehabilitation Counseling Association, International Association of Marriage and Family Counselors, National Association of Rehabilitation in the Private Practice Sector, the National Rehabilitation Administration Association and the North American Riding Association for the Handicapped, among others.

Fennessee was a member of the Chi Sigma Iota Honor Society and was also the recipient of numerous awards for his achievements. He was both a Certified Rehabilitation Counselor and a National Certified Counselor.

Fennessee was highly recognized by students and colleagues for his commitment to quality teaching and concerned advising. He expressed the highest level of dignity, character and humor.

The reflection of colleague Sandra Powell revealed a few of the many wonderful and funny memories friends and colleagues had of Fennessee. “I doubt there was a topic that William could not discuss,” Powell said. “He read broadly and was interested in everything. He was the most intelligent individual I have ever known. He learned about life and achieved his education in a world of darkness, as he lost his sight in the fourth grade after a fall. He learned to do things and accept challenges, like gardening and horseback riding.”

Fennessee volunteered at the Madison County (Ala.) 4-H Horse Club for several years and also served as a People to People International delegate on trips to Egypt and the United Kingdom. He also presented on topics such as “Farming With Blindness” for the National AgrAbility Project Training Workshop and “Don’t Prejudge Persons With Disabilities” for the Alabama Cooperative Extension System. He was also a board member of the Huntsville (Ala.) Rehabilitation Foundation.

Colleagues remembered Fennessee as someone who cared about people, cared about teaching and cared about his program and keeping it accredited. He often went the extra mile to help students and friends. These and other sentiments were expressed during an on-campus memorial service July 25. “Dr. Fennessee will be sorely missed,” said Beverly Edmond, interim president at Alabama A&M. “He was indeed an inspiration to both his students and colleagues.”

Interment took place at Hunter’s Cemetery in Mount Pleasant, Tenn.

DID YOU KNOW?

ACA members can download complete issues of Counseling Today from the website.

Visit counseling.org, click on "Publications," then click on "Counseling Today."
Parity of Insurance Coverage for Mental Health and Substance Abuse Treatment

House and Senate negotiators have reached agreement on landmark legislation to require most private health insurance plans to offer parity of coverage for mental health and addictive disorder services. Although most states have enacted mental health parity laws, these laws vary from state to state, and their protections don’t apply to self-insured health plans. Like the separate House (H.R. 1424) and Senate (S. 558) parity bills approved by each chamber earlier this year, the House-Senate compromise version of the legislation would prohibit health plans covering more than 50 employees from using treatment limits or financial requirements on mental health and addictive disorders unless such limits and requirements are used for substantially all other covered services. The legislation also would require parity of coverage with respect to out-of-network coverage. If a health plan offers out-of-network coverage for general medical services, it would also have to cover out-of-network services for mental and addictive disorders.

Congress needs to pass parity legislation before adjourning this year. Otherwise, work on the issue will start over from scratch with a new Congress and a new administration next year, and mental health policy work will likely take a backseat to consideration of broader health care reform proposals.

Counselors are strongly encouraged to call or write their representatives and senators to ask them to pass mental health and addictive disorder parity legislation before the end of the 110th Congress.

Who to Contact
Your Representative and Senators
Capitol Switchboard
202-224-3121
www.house.gov
www.senate.gov

Suggested Message
“I am calling to ask the (representative/senator) to help pass mental health and addictive disorder parity legislation this year, before Congress adjourns. Mental and addictive disorders are real — and are treatable — and we should no longer tolerate discriminatory health insurance coverage practices. Congress has a golden opportunity to approve what will be a historic step forward in mental health policy. Please work to pass parity legislation now so that the issue doesn’t get put off any longer or get derailed next year by other priorities.”

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

Internet briefing paper:
www.counseling.org/publicpolicy

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

More School Counselor Bills Introduced

Congress adjourned for its monthlong August recess without taking any significant action this session on the reauthorization of the No Child Left Behind (NCLB) Act, which is up for renewal this year. Nevertheless, members from both chambers continue to introduce legislation to increase the number of school counselors in America’s neediest schools.

In July, Sen. Bob Casey (D-Pa.) introduced S. 3347, the Put School Counselors Where They’re Needed Act, which aims to put more counselors in struggling secondary schools. The bill would create a competitive grant program under NCLB to help reduce the dropout rates at low-performing secondary schools. The bill is a companion to H.R. 3439, also named the Put School Counselors Where They’re Needed Act, introduced last year by Rep. Linda Sanchez (D-Calif.).

Also in July, Reps. Ed Towns (D-N.Y.) and Linda Sanchez and Sens. Blanche Lincoln (D-Ark.), Hillary Clinton (D-N.Y.) and Thad Cochran (R-Miss.) introduced a bill to increase the number of school counselors in qualified low-income schools. H.R. 6654 / S. 3364, the Increased Student Achievement Through Increased Student Support Act, would authorize grant funding to form partnerships between higher education institutions that train student support professionals and local educational agencies serving low-income student populations.

The American Counseling Association supports these bills and is working to gain cosponsors to improve chances that the legislation will be incorporated into a bill to reauthorize NCLB. To help with this, counselors are encouraged to contact their senators and representatives and ask them to sign on as cosponsors if they have not done so already.

Who to Contact
Your Representative and Senators
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202-224-3121
www.house.gov
www.senate.gov
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- **September 26-28**
  Treasure Island, Florida 15 hrs
- **October 17 - 19**
  Pocono Mountains, Pennsylvania 18 hrs

**2009**

- **January 2-4, 2009**
  Treasure Island, Florida hrs 15hrs
- **March 28- April 4**
  Kauai, Hawaii 50 CEU Hrs
- **May 22-31 2009**
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- **July 20 -31**
  Machu Pichu, Peru 50 CEU Hrs

This new action method can be applied to all aspects of recovery including:

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**Connie Miller NCC, LPC, TEP**
The International Institute of SoulDrama®
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DHL offers ACA members preferred association member pricing. Members previously participating in ACA’s Airborne program will be automatically transferred to the new DHL program. To find out more about your DHL benefits and set up your account, or if you have questions regarding your current account, please contact the dedicated association hotline at 1-800-MEMBERS (1-800-636-2377, 8 am - 7 pm, ET) or log onto www.membersales.com/ACA.

GEICO Auto Insurance – The GEICO Auto Insurance Program offers ACA members quality car insurance with complete 24-hour sales, policy, and claim service. Call GEICO today for a free rate quote at 1-800-368-2734, or go on-line at www.geico.com/ratequote/aca.htm.

Hertz – Your Hertz American Counseling Association discount CDP#42253 is the key to great savings. Go to hertz.com for Hertz reservations, services, and special offers. For phone reservations, call Hertz at 1-800-654-2200. Be sure to include CDP# 42253 on all your reservations.

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Share your Member Benefits with a Future ACA Member!

1. Member Referral Name
   Full Name __________________________ M.I. ________ Last Name __________________________
   (e.g., "Robe" not "Rob")
   Mailing Address __________________________
   City __________________________ State/Province ________ Zip ________ Country ________
   Organization __________________________
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2. Select Your ACA Membership
   [ ] $155 Professional: Individuals who hold a master’s degree or higher in counseling or a closely related field from a college or university accredited by the Council for Higher Education Accreditation. Proof of academic credentials may be requested.
   [ ] $155 Regular: Individuals whose interests and activities are consistent with those of ACA, but who are not qualified for Professional membership.
   [ ] $89 New Professional: Individuals who have graduated with a masters or a doctorate within the past 12 months. Status is good for one year. Please indicate date of graduation (month/year) _______/____ and institution __________________________
   [ ] $89 Student: Individuals who are enrolled at least half-time in a college or university program. Please indicate date of graduation (month/year) _______/____ and institution __________________________

3. Make A Voluntary Contribution (Tax Deductible)
   Optional, but a great way to get involved!
   [ ] ACA Foundation $ __________
   [ ] David K. Brooks Jr. Distinguished Mentor Award $ __________
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4. Total of Membership Dues
   Want to avoid dues increases, save on postage, and reduce paperwork? Join now for 2-years at the current rate(s) by simply doubling the current dues.
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   ACA Membership - 2 years $ __________
   Voluntary Contribution(s) $ __________
   (Check fund at left)
   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) that can include appropriate sanctions up to suspension or expulsion from ACA and public notice about any such action.

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5. Payment Method
   Total amount enclosed or to be charged $ __________
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ACA among sponsors of congressional briefing

In July, the American Counseling Association cosponsored a congressional briefing on Capitol Hill titled “Increased Student Support Equals Increased Student Achievement.” The purpose was to highlight the need for more school counselors, school psychologists and school social workers in low-income rural and urban schools and to gain support for pending federal legislation that would address this issue.

The briefing was held in conjunction with Rep. Edolphus “Ed” Towns (D-N.Y.), Rep. Linda T. Sanchez (D-Calif.) and Sen. Blanche Lincoln (D-Ark.). Other cosponsors included the American School Counselor Association, the National Association of School Psychologists and the School Social Work Association of America.

Towns, Sanchez and Lincoln have introduced the Increased Student Achievement Through Increased Student Support Act. This legislation would authorize grant funding to form partnerships between higher education institutions that train school counselors, school social workers and school psychologists and qualified urban and rural low-income school districts to train and place these student support professionals in underserved districts. This bill would not only improve the availability of student support services where they are needed most, but is designed to improve the working conditions in our nation’s underserved schools to increase student achievement.

The panel of experts at the briefing included Judith Wicker, special education coordinator for Mesa County Valley School District 51 in Grand Junction, Colo.; Dixie Bryson, school psychology specialist for Conway Public Schools in Maumelle, Ark.; and Elizabeth “Beth” Aldonas, principal of Glen Forest Elementary School in Falls Church, Va. Each panelist spoke about how schools in underserved communities suffer disproportionately from a lack of support services from school counselors, school psychologists and school social workers. Many of these schools share one social worker, school psychologist or school counselor with neighboring schools or don’t have any of these personnel available to them at all. The panelists noted that with the poor ratio of personnel to students, it is often difficult to effectively address the needs of students.

The panelists also spoke about the important roles, responsibilities and impact of school counselors, school psychologists and school social workers working in schools in their communities. In addition, the panelists emphasized the need to form partnerships between higher education institutions and qualified urban and rural low-income educational agencies to train and place these student support professionals in underserved districts.

Staff from ACA and other professional organizations, as well as congressional staff, were on hand to answer questions and discuss the policy implications of the Increased Student Achievement Through Increased Student Support Act.

For additional information, contact Chris Campbell at 800.347.6647 ext. 241 or ccampbell@counseling.org.

SAMHSA launches Homelessness Resource Center website

The Substance Abuse and Mental Health Services Administration has introduced a new Homelessness Resource Center website designed to support individuals working to improve the lives of people affected by homelessness who have mental health conditions, substance use disorders and histories of trauma.

The social networking site is designed to help users network with other providers of homelessness services to share knowledge and experiences. Users can also access resources from the library, download resources and practical tools, rate and comment on content, post helpful information and learn about upcoming events. Topics such as how to reach out to the homeless, the transition from homelessness, health care, self-care and housing are included to promote recovery-oriented and consumer-centered homeless services.

For more information, visit homeless.samhsa.gov.

Counseling Today wins six awards

Counseling Today staff members recently learned that they had received a total of six awards recognizing outstanding editorial content and design in a pair of publications contests. CT was honored with three Communications Concepts APEX Awards for Publication Excellence and three Publications Management Magnum Opus Awards.

This year’s 20th annual APEX competition attracted nearly 4,500 entries from various magazines, newspapers, newsletters and other publications. CT has received 10 APEX Awards since 2005. This marks the first year that CT has been honored with Magnum Opus Awards. The publication won one Silver Award and two Honorable Mentions. Judges from the Missouri School of Journalism and other leaders in the custom publishing industry reviewed each entry.

Senior writer Angela Kennedy won an APEX Award (her fourth overall) in the Health & Medical Writing category for her May 2007 article “Bound With Pink Ribbons,” about using group therapy to help women with breast cancer. She received an Honorable Mention from Magnum Opus in the Best How-to Article category for her October 2007 story “Silent Sorrow,” about helping couples cope with early pregnancy loss.

Graphic designer Carlos Soto won an APEX Award (his second) for Maga- paper & Newspaper Design & Layout for the overall layout of the January 2008 issue of Counseling Today. He was also recognized with an Honorable Mention from Magnum Opus in the Best Feature Design category for the April 2007 article “Calling for a Shift in Strategy,” which...
appeared in CT’s “Multicultural Issues in Counseling” theme issue and dealt with using culturally sensitive interventions to help stop the spread of HIV/AIDS in sub-Saharan Africa.

Editor-in-chief Jonathan Rollins received an APEX Award (his third) in the Feature Writing category for the September 2007 article “Students Lacking Education on Healthy Relationships,” which dealt with dating violence on college campuses. He also took home a Silver Award from Magnum Opus in the Best News Story category for “Addictions Don’t Have Age Preference,” an October 2007 article about overlooked addictive behaviors in older adults.

**ACA National Awards right around the corner**

The ACA Awards Committee announces the start of the nominations process for the 2009 ACA National Awards, which will be presented at next year’s ACA Annual Conference in Charlotte, N.C.

ACA members can nominate one or more fellow ACA members who have made noteworthy contributions to the counseling profession at the local or state levels. ACA divisions, organizational affiliates, branches, chapters, regions or committees may also submit nominations. All nominations must be postmarked by Oct. 31.

Complete information is available on the ACA website at www.counseling.org under “Resources,” or you may request a 2009 National Awards Packet by calling ACA Member Services at 800.347.6647 ext. 222. Nominations may also be submitted by mail to ACA 2009 National Awards, c/o Holly Clubb, 5999 Stevenson Ave., Alexandria, VA 22304.

Nomination packets are available from ACA. To request a packet or for more information about the nominations process, call Holly Clubb at 800.347.6647 ext. 212 or e-mail hclubb@counseling.org. Be sure to indicate whether you are requesting an application as a professional committee member or as a student representative. The packets are also available on the ACA website at www.counseling.org.

**Nominations open for ACA committees**

ACA President-Elect Lynn Linde is seeking nominations for ACA committee appointments. She will be appointing professional members to each committee to serve a three-year term and a student representative to each committee for a one-year term.


ACA members may nominate themselves or be nominated by other ACA members. Nominations are due Dec. 1 and must be sent to ACA Headquarters, c/o Holly Clubb, 5999 Stevenson Ave., Alexandria, VA 22304.

Nomination packets are available from ACA. To request a packet or for more information about the nominations process, call Holly Clubb at 800.347.6647 ext. 212 or e-mail hclubb@counseling.org. Be sure to indicate whether you are requesting an application as a professional committee member or as a student representative. The packets are also available on the ACA website at www.counseling.org.

**NCDAs honors Pope with Eminent Career Award**

Mark Pope, professor and chair of the Division of Counseling and Family Therapy in the College of Education at the University of Missouri-Saint Louis, received the National Career Development Association Eminent Career Award at the association’s Global Conference in Washington, D.C., on July 10.

Selection of the award recipient is based on a nominee’s overall contributions to the field of career development. The individual must have exhibited sustained and significant accomplishments in a range of career development activities, including contributions in the areas of theory, practice, leadership and scholarship.

Pope is a past president of the American Counseling Association, NCDA and the Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling. He also served as editor of The Career Development Quarterly. He is the author of six books, 31 book chapters and 36 journal articles, and has given 135 professional presentations, including keynote addresses and presentations at career development conferences in China, Australia, Canada, Singapore, Malaysia, Hong Kong, Scotland and the United States.

**ACA’s Campbell presents at NCDA Conference**

ACA Associate Director of Public Policy and Legislation Chris Campbell was a featured presenter at this year’s NCDA Global Conference held July 9-11 in Washington, D.C. The conference theme was “Public Policy and Advocacy: Finding Our Voice and Making It Heard.”

Campbell, along with Bridget Brown, executive director of the National Association of Workforce Development Professionals, and Stephen DeWitt, senior director of public policy for the Association for Career and Technical Education, delivered a presentation titled “Policy Implications for Delivering Career Development in K-20 Education System.” Attendees learned about how career development services are (and should be) delivered in the kindergarten through postsecondary education system.

Campbell gave attendees an overview of current federal K-12 career development policy and school counseling, with a special focus on No Child Left Behind. Brown spoke about the Perkins Career and Technical Education Act and the intersection of Workforce Investment Act/Youth programs with K-12 education. DeWitt spoke to attendees about transition from K-12 to postsecondary education.
vigilant about protecting our children and youth from this darker side of technology. Counselors, teachers, parents and adults need to be increasingly cognizant of what is happening in the personal lives of our children and youth. We don’t have the luxury of remaining silent (not that we ever really did) when we know a child is being picked on, hoping that he/she will either handle it or that the bully will move on to another target.

Quite truthfully, we still don’t know the breadth of the potential harm and impact of cyberbullying. What we do know is that up until now, bullying was a silent killer of self-esteem, hope and confidence. It sometimes ends in the loss of life, either by suicide or mass retribution, fueled by a slow-burning anger and shame that eventually turns to rage. Today, in addition, bullying is loud, visible and often performed on a world stage thanks to the many forms of technology available. We must educate, prevent, respond and stand strong, with zero tolerance for verbal and physical abuse, and stop bullying of all types.

Elie Wiesel said, “This is the duty of our generation as we enter the 21st century — solidarity with the weak, the persecuted, the lonely, the sick and those in despair. It is expressed by the desire to give a noble and humanizing meaning to a community in which all members will define themselves not by their own identity but by that of others.”

Let us join together in this spirit to strengthen our communities and help our children thrive as they enter this new season.

With pride,
Colleen ♦

How About You?

In an effort to reduce our paper usage, ACA is Going Green by providing many of its member communications electronically. You can Go Green with us, by updating or providing us with your email address.

Log on to the members-only area of counseling.org by entering your username and password. Once logged on, click on “MANAGE MEMBERSHIP” then select “Update your contact and address information” and proceed to update your information.

If you do not know your username and/or password, please contact Member Services at 800-347-6647, x222 (M–F, 8 am – 7 pm, ET), or email membership@counseling.org. Likewise, please use the same contact information if you have any other questions, comments or concerns about your ACA membership.

Staying connected to you is how we stay connected to the counseling community.
Reach Out and Recruit (ROAR) a "Professional" Member

DOUBLE WIN CHALLENGE!

Now through December 31, 2008

For each new "Professional" member you recruit, you will strengthen the American Counseling Association (ACA) by broadening our membership base, and expand your own network of colleagues. And of course, WIN BIG!

Participate in our new "Professional" member recruiter’s program and:

■ You may win cool cash or a gas card!
■ Receive accolades and honors in Counseling Today, ACAeNews and on counseling.org
■ Enjoy recognition and praise at the 2009 ACA Annual Conference & Exposition held March 19-23, in Charlotte, NC.

How does it work?

For each new "Professional" member you recruit, your name will be entered into two drawings to win cash or a $250 gas card. Yes, that’s two chances to win! For each new “Professional” member recruited, the prize cash drawing will increase by $25.00. The more you recruit, the bigger the cash reward, the better your chances to win! Definition of an ACA “Professional” member: 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.

Three ways to recruit!

1. Simply log on to counseling.org/ROAR, download the recruiter’s membership application along with the recruitment letter and member benefits brochure and pass it along to your colleagues - remind them to write your name on the “Referred by” space of the application to receive credit for your referral;

2. Encourage your colleagues to log on to counseling.org and select the "Join ACA" link for instant signup - remind them to write your name in the “Referred by” space to receive credit for your referral; or

3. Have your colleagues contact the ACA Member Services Department at 800-347-6647, x222 or 703-823-9800, x222. Make sure they state your name as their referral in order to receive credit.

Double Win fun ends December 31, 2008, so get started now! If you need assistance with recruiting new “Professional” members, please contact Denise Williams, Director of Member Programs at 800-347-6647, x303, 703-823-9800, x303 or dwilliams@counseling.org.

Remember - the more you recruit, the better your chances to win! Read the rules and eligibility on counseling.org/ROAR for further details and track the size of the prize. Let’s start recruiting today.
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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.

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ACA Members: If you are seeking a position you may place a 4 ½-word ad for $10. This is a one-time insertion only.

Deadlines: Vary per issue. Contact Kathy Maguire at 317.873.1800 or kmaguire@counseling.org for further details.

Direct all copy or inquiries to Kathy Maguire via e-mail at kmaguire@counseling.org.

Phone: 317.873.1800
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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.

Counseling Today reserves the right to edit all copy, request additional documentation where indicated and to refuse ads that are not in consonance with these practices. ACA is not responsible for any claims made in advertisements nor for the specific position title or working of any particular position listed in employment classified ads.

Counseling Today is in Hawaii.

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PRIVATE PRACTICE
New Grad
Are you a new graduate from an accredited Masters Clinical Psych or Counseling program? Do you need supervision? Would you prefer to go straight into private practice rather than do clinic work? If you answered yes, then I can not only provide referrals but I can teach you first hand what most of your pros have told you is impossible. I’ve been an LCPC for 12 years and was one of the first in line when IL allowed us to receive 3rd party reimbursement. I’ve learned a lot over the years and I am willing to share my knowledge. I am looking to “hire” and I use that term loosely, a new grad interested in working in the far northern suburbs. If interested, please contact me at dana@danasteiner.com

JOHN JAY COLLEGE OF CRIMINAL JUSTICE, CUNY.
Assistant/Associate Professor
Tenure Track Position, Psychology Department, anticipated for Fall 2008 pending budget approval: ASSISTANT/ASSOCIATE PROFESSOR with strong teaching/research/clinical record in COUNSELING or COUNSELING PSYCHOLOGY, for NY license eligible MA Program in Forensic Mental Health Counseling. A degree in counseling or counseling psychology is required. Send
cover letter, CV, statements of teaching & research interests, and 3 reference letters to Dr. Maureen O’Connor, Chair, Psychology Department, John Jay College of Criminal Justice, CUNY, 445 West 59th Street, New York, NY 10019. For more information: moconnor@jjay.cuny.edu John Jay College is an Equal Employment Opportunity/Affirmative Action/Immigration Reform and Control Act/Americans with Disability Act Employer. The Psychology Department at John Jay College, with 35 full-time professors, has just created a new MA Program in Forensic Mental Health Counseling, to complement its MA in Forensic Psychology. We also have a Doctoral Program in Forensic Psychology located at John Jay College, and we participate in a Doctoral Program in Criminal Justice. There are several distinguished professors in the department including Saul Kassin, Cathy Widom and Steve Penrod. For further information about John Jay College, please see www.jjay.cuny.edu The Department is searching for a professor who will take an active role in teaching in and developing the Counseling Program, and who is active in publishing in Counseling journals and/or who has participated in ACA activities. Research and/or experience in the forensic area, broadly defined, is a plus but not at all a requirement of the position, as the program is primarily to train counselors (with some forensic specialization). Likewise, administrative and/or teaching experience in a Counseling program would be valued.

TENEXAS

TEXAS A&M UNIVERSITY

Assistant Professor

The APA-accredited Counseling Psychology Program announces a tenure-track position at the rank of Assistant Professor beginning Fall 2009. Applicants should have earned doctorate in Counseling Psychology, Counselor Education, or a closely related field. Primary responsibilities of the hire will include a) conducting and publishing original research; b) supervision of graduate student research; c) teaching and clinical supervision of bilingual doctoral and master’s level counseling and school counseling students; d) collaborate with senior faculty on securing external funding; and e) work collaboratively with colleagues across the school psychology, bilingual, and special education programs. Preference will be given to applicants whose research interest and expertise are consistent with the general mission of the program and focus in Mexican American/Latino youth. (see program website: http://cpsy.tamu.edu The faculty member filling this position will be joining an institution committed to growth and excellence. The Department of Educational Psychology was ranked 18th among educational psychology programs nationally in the latest U.S. News & World Report rankings of graduate programs. Many faculty in the department are affiliated with the university’s Mexican American/Latino Research Center (MALRC), the only Latino-focused research center in the state of Texas. Faculty members in the department have secured over $7 million in annual external funding. The Counseling Psychology program has secured over $1.6 million in external grants and contracts over the past five years. Applicants should submit a cover letter documenting the following:

Evidence of research and/or publications in an area related to Mexican American/Latino youth.

• Potential for success in securing external research funding.

• Describe how multicultural issues have been or will be brought into courses.

• Describe previous activities mentoring minorities, women, or members of other underrepresented groups.

• Previous experience and/or interest in collaborating with school districts.

• Ability to provide bilingual clinical supervision.

Submit cover letter, vita, reprints, and three letters of recommendation to Dr. Linda Castillo, Search Committee Chair; 4225 TAMU; Department of Educational Psychology, Texas A&M University, College Station, TX 77843-4225. The review process will begin November 11, 2008. Applications will be accepted until the position is filled. Detailed information about the position is provided at: http://cpsy.tamu.edu/articles/open_positions Texas A&M University is an affirmative action/equal opportunity employer committed to diversity.

WASHINGTON

CENTRAL WASHINGTON UNIVERSITY

Assistant Professor, Mental Health or School Counseling.

Department of Psychology. One tenure-track assistant professor position in either mental health and/or school counseling, beginning September 16, 2009. Applicants must have an earned doctorate (preferably from a CACREP-accredited program) in counselor education, counseling psychology, or closely related discipline by September 15, 2009; Washington state licensure as a mental health counselor or certification as a school counselor (or licensed/certification eligible). We prefer applicants with proven ability to work with students from culturally diverse backgrounds. Responsibilities: teach counseling-related courses at the graduate level in addition to psychology courses in the undergraduate program; supervise counseling practica, and serve on master’s thesis/project committees. Ellensburg is home to year-round recreational activities and has more than 300 days of sunshine per year. Screening of applicants will continue until position is filled. Complete job announcement is available at www.cwu.edu/~psych/ or contact Dr. Robert Brummer, Chair, Mental Health -Counseling Search Committee: brammerr@cwu.edu. AA/EOE/Title IX Institution.

WISCONSIN

CLINICAL PSYCHOLOGY ASSOCIATES

Licensed Psychotherapist

Clinical Psychology Associates, a growing outpatient psychotherapy practice near Milwaukee, is looking for one FT or two PT therapists to join our energetic, cohesive group. Excellent opportunity to build a lucrative practice. Please contact Paul Hamilton, Ph.D. DrHamilton@wi.rr.com 262-251-1112. wwwclinical-psychology-associates.com

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