Congress passes suicide prevention bill

Acting within hours of each other the week they returned from the August recess, the House and Senate passed legislation aimed at helping prevent suicide. The House passed an amended version of S. 2634, the "Garrett Lee Smith Memorial Act," on September 9th, and the Senate agreed to the House amendments by unanimous consent later the same day. The bill is now on its way to the President for his signature into law.

The bill was sponsored by Senators Christopher Dodd (D-CT) and Gordon Smith (R-OR), and named after Senator Smith's son, who recently committed suicide. The bill passed both chambers of Congress the day before what would have been Garrett Smith's 23rd birthday.

Counselors support hurricane victims

ACA donates portion of book sales to American Red Cross

BY ANGELA KENNEDY
SENIOR STAFF WRITER

Although the sunshine has returned to Florida and the worst of the physical damage is over for the survivors of the hurricanes, many are still picking up the pieces and sorting through the debris. Hundreds are left homeless and some are even jobless, but mental health professionals from across the nation are helping the survivors find hope within the wreckage.

Eric Gentry, a licensed mental health counselor who specializes in trauma therapy, counseled Florida Power and Light Company employees as a contractor through their employee assistance program. In the past few weeks he spoke with more than 250 workers on an individual basis. "We are here to help the employees get the services they need so they can continue to work. We are doing stabilization, individual defusing and debriefing with the employees," he said noting that he is working closely with the union as well as management and the human resources department.

Recently he went to Juno Beach, the "ground zero" of where Hurricane Frances hit, and also the headquarters of FPL.

"There are several employees who have lost everything. One particular lineman told me about his house crumbling down while he was getting out of it. He was almost killed in his vehicle while trying to escape the storm," he said adding that the emotional effects of this type of loss come in phases.

"It takes a whole different set of skills for doing acute trauma or crisis intervention, especially post disaster. There are several different phases of the symptoms. After the event, most people are doing well and most are actually

Continued on page 26

Creativity in Counseling group earns divisional status at ACA

Governing Council approves division, other business items

BY ANGELA KENNEDY
SENIOR STAFF WRITER

Editor's note: In an effort to keep American Counseling Association members abreast of what is happening in the organization, Counseling Today is presenting information from the September ACA Governing Council meeting.

By an unanimous vote of the American Counseling Association's Governing Council, the Association for Creativity in Counseling has become the newest division to sit at ACA's organizational table. This news is particularly exciting for the group of professionals who have worked steadily toward this goal.

ACC was formally recognized by the ACA Governing Council in April 2004 as an organizational affiliate, and the ascension to divisional status rewards the group's growth with the ability to vote on matters that arise during Governing Council meetings.

Cathy Malchiodi represented ACC at the Governing Council meeting and notified Thelma Duffey, who chaired the effort and serves as the division's founding president, that ACC had become an official division.

"I can't begin to say how thrilled I am with the news. The past year has been extraordinarily busy, fast-paced and wonderfully fun as we have worked toward reaching this goal. It's been a treat to correspond with

Continued on page 36

AICA Annual Convention
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The NCE exam you are going to sit for is among the most important tests you will ever take. If you are successful, it will serve as the final hurdle to establishing yourself as a professional in the rewarding field of counseling. If you should fail, your career will be put on hold for an indeterminate amount of time. You have worked very hard to this point. Do not miss this opportunity to take advantage of what has been proven to be the best possible preparatory material available, and to rest assured you have given yourself the best possible chance of passing the NCE.

Gary Arthur, Ed.D., has been teaching the full range of counseling courses at the university level for twenty years. He has also conducted over 40 training seminars for individuals preparing for the NCE exam.
ACA collaborates with government agency on national anti-bullying campaign

"Take A Stand! Lend A Hand. Stop Bullying Now!" was designed to stop bullying, including verbal or physical harassment that is intended to cause harm and that involves an imbalance of power between the child who bullies and the child who is bullied.

The campaign was developed by the U.S. Department of Health and Human Services' Health Resources and Services Administration, in partnership with the American Counseling Association and more than 70 other health, safety, educational and faith-based organizations. In addition, a Youth Expert Panel comprised of 18 youths, ages 9 to 13, provided creative direction during the development of the campaign.

The impact of bullying on children's educational success and personal well-being is tremendous. Among boys, bullying typically involves pushing, shoving and other forms of physical intimidation. Girls tend to bully through gossiping, social exclusion and verbal teasing, but boys frequently engage in these forms of bullying as well. According to the U.S. Department of Education, one in four children who act as bullies will have a criminal record by the age of 30.

The "Stop Bullying Now!" campaign includes a Web-based, animated story featuring a cast of young people who deal with bullies in the classrooms, hallways and grounds of a middle school. With help from teachers, parents and other adults, the bullied characters get support from fellow students who step up to make it clear that bullying is "not cool."

In addition to the animated "webisodes," which will be updated every two weeks at www.stopbullyingnow.hrsa.gov, the campaign will feature television and radio public service announcements distributed through the National Association of Broadcasters' member stations. The campaign website also offers camera-ready print public service announcements and a resource kit about bullying prevention programs and activities that can be implemented at the school or community level. The website and resource kit also provide tools to help in handling individual bullying problems and for creating bullying prevention programs.

For more information on "Take A Stand! Lend A Hand. Stop Bullying Now!" go to www.stopbullyingnow.hrsa.gov or call 888.ASK.HRSA.

The Last Word

"During that time, I was exposed to the downside of human nature. I was really plugged into that population and, consequently, those people are often your clients."

—Bruce Wayne Sullivan

(See story "Serving up wisdom, insights" on page 11)

J.D. Crowe

Vote in upcoming ACA elections

Each year, members of the American Counseling Association have the opportunity to participate in the work of the association by voting in the annual election of officers, both for leadership positions for ACA as well as for divisions and regions that are scheduled to host elections during a particular year.

ACA will mail personalized election ballots to members from mid-November to early December. Candidate information will be posted on ACA's webpage, located at www.counseling.org, as well as in the December edition of Counseling Today.

To be eligible to participate in this election, you must be a member in good standing of ACA, the division or organizational affiliate by midnight on Oct. 51. Thus, your membership renewal must be received by Oct. 15 to ensure that it can be processed on time. To confirm that your membership is current or to renew so that you are eligible to vote in the upcoming election, call ACA Member Services at 800.347.6647 ext. 222.

World Mental Health Day approaches

World Mental Health Day is a global mental health education, awareness and advocacy project of the World Federation for Mental Health, a Virginia-based international mental health organization with members in more than 80 countries. Each year the WFMH develops and distributes a campaign resource document focusing on an annual theme to provide information and resources to participating programs and organizations. The theme for 2004 is "The Relationship Between Physical and Mental Health: Co-occurring Disorders."

While Oct. 10 has been officially designated as World Mental Health Day, organizations in many countries use that day to launch continuing activities lasting for a week, a month or, sometimes, a yearlong campaign on the chosen topic. World Mental Health Day holds unlimited opportunity to increase public interest in, and support for, improved treatment, prevention and promotion efforts in countries around the world.

For further information about World Mental Health Day and the World Federation for Mental Health, contact the WFMH Secretariat at 703.838.7543.

America's HealthTogether teams up with ACA for stress, trauma awareness

America's HealthTogether (AHT) has pioneered a groundbreaking partnership with ACA and other national leading mental health and primary care organizations to respond to America's new exposure to homeland terrorism. Fully supported by the Robert Wood Johnson Foundation, this national initiative seeks to enhance primary care providers' awareness of mental health issues and strengthen their capacity to care for their patients' emotional and psychological needs. After two years of researching the health and mental health impact of a time of high national stress, AHT produced a poster to help educate people on the effects of stress and trauma. Counselors are encouraged to display the poster in waiting rooms, community health centers and local public health departments. The poster can be viewed at the AHT website www.healthtogether.org/healthtogether. To order the free poster, e-mail requests to Margaret Heldring at mheldrin@healthtogether.org.

School counseling research brief online

The Center for School Counseling Outcome Research provides quarterly research briefs that summarize the research completed in the field of school counseling. The Study of Pupil Personnel Ratios, Services and Programs in California brief is now available at http://www.umass.edu/schoolcounseling/briefs.htm.
Get smart

The article "Smarties! the choice campus candy" (Counseling Today, September 2004) contained many inaccurate quotes regarding Ritalin and ADHD. Ritalin does not have a calming effect on the ADHD brain, contrary to Kelly Burch-Ragan's quote. In fact, Ritalin helps both ADHD and non-ADHD people to focus by stimulating the brain's neurons. Burch-Ragan stated that "those not diagnosed with ADHD experience the stimulant-related physical and psychological effects" of Ritalin.

People without ADHD will only experience a "high" from Ritalin if it is used in excessive quantities. They will not get a "high" if it is used as it is meant to be prescribed.

Also, Ritalin does not cause the side effects of abnormal liver function and brain developmental abnormalities. According to the Physicians' Drug Reference (2004) a definite causal relationship has not been established between Ritalin and liver function and brain development.

"High" if it is used as it is meant to be prescribed. Ritalin if it is used in excessive quantities. They will not get a "high" if it is used as it is meant to be prescribed.

I wish to thank Staff Writer Angela Kennedy for the wonderful article she wrote on the youth suicide problem in Northern Ireland, "Teen suicide" (Counseling Today, August 2004).

It is very obvious that Angela did an enormous amount of research on the background of the ongoing sectarian conflict in Northern Ireland, especially the recent 30-plus years of the "Troubles" and the horrible effect it has had on the children and young adults there. Thank you very much, Angela, for your hard work in developing an article that provided historical information and highlighted the hopelessness of today's Northern Ireland youth as well as focused on the super effort your colleagues Fred Bemak and Robert Conyne have dedicated to this project.

As two professionals, they have tirelessly worked to understand a conflict that actually reaches back several centuries—a conflict that will certainly need new ways for professionals to approach its resolution, address deep post-traumatic stress (in fact, it has been suggested that the society is actually in a "post-traumatic stress stage").

Both men have certainly made the first step in offering guidance as a new way forward. Thank you, Fred and Bob! This conflict resolution will most assuredly need the assistance of mental health counselors from the international community to bring in new ideas and methods of treatment. I know that when Bemak and Conyne get to a point of needing volunteers, the mental health community will step up and offer its assistance to bring resolution to this centuries-old conflict—especially helping the youth move on to better lives.

Thank you, Angela, for telling the youths' story!

J. Terry Ryan
Tallahassee, Fla.
Editor's note: J. Terry Ryan is president of The Children of Ireland Group, Inc. (www.childrenoffirland.us).

A call for ACA to promote political action

Hopefully the article by Ratts, D'Andrea and Arredondo, "Social justice counseling: 'fifth force' in field" ("Dignity, Development and Diversity" column, Counseling Today, July 2004) will help the counseling field recognize the larger social context of its work. Social justice issues affect our clients in profound ways that are not often recognized or addressed. Too often, we see their problems and their lives in isolation from social and political forces that have powerful influences.

I agree with the authors that we need to help clients recognize oppressive forces in their lives and find ways to become more empowered. I also agree that we need to advocate for our clients and influence institutions to be less oppressive and more empowering. We can advocate for clients and affect institutions on a daily basis through our interactions with clients, colleagues, collateral professionals and supervisors. However, I would add that ACA as an organization and individuals within ACA should increase efforts to affect political change at every level.

We are in an election year. I believe the results of the election will have profound influences on our work. The counseling profession needs to do more to acknowledge and counteract destructive policies and the politicians who support them. One is the "Patriot Act." This law spells out provisions that seriously limit confidentiality of client records. Post-Sept. 11, 2001, policies have resulted in many of us counseling clients whose civil liberties have been limited, who are harassed and who live in fear of retaliation for problems for which they are guiltless.

Our government has made other decisions that directly impact our work. Many of us who work in the addiction field have treated Vietnam veterans for years. Many of them are oppressed by their addictions, stigma, homelessness, memories of war and mental illnesses. Now...
The leader as a catalyst and servant

Leadership is the act of working in such a way that people and possibilities are brought together in a positive and productive manner.

Quickly now, name the 33rd president of the American Counseling Association! How about the 11th president of either entity? Okay, how about the 33rd president of the United States? How about the 33rd president of the Counseling Association! How about the 33rd president of the United States? Okay, how about the 11th president of either entity? Give up? I don’t blame you. Name is fleeting.

Most of us do not “chunk” into our long-term memories the names of leaders unless they have been heroic, such as Abraham Lincoln, or left their office in disgrace, like Richard Nixon. The reason is fairly simple. We have too many other people and events to remember that are more relevant to our lives. Thus, individual names on the tip of our tongues for a moment usually, over time, become lost in the recesses of our minds.

Therefore, leaders and aspiring leaders take note. Despite the lyrics of the song “Fame,” the majority of us do not “live on forever” in the collective memories of most people. That being the case, “Why lead?”

Just like the motivations to become a counselor, some reasons for aspiring to leadership are healthier than others. Among the best is wanting to make a positive (and hopefully lasting) contribution to the entity of which you are a part. When such is the motivation to lead, the result is often a loss of self within the group. The person becomes immersed in the process of making the group better without becoming concerned for individual recognition. Thus, there is a “flow,” where the person and the entity come together in a synergistic way. In such a process, the leader is a catalyst and a servant. He or she brings people, resources and ideas together with little concern for fanfare or flattering.

Yet, the investment in the purpose and causes of the group bring the leader great inner joy and contentment while furthering the cause of those being served. Who are people like that? How about Dag Hammarskjold, the former Secretary General of the United Nations; Mother Teresa, truly a “saint” to the poorest of the poor in Calcutta; Martin Luther King, the leading civil rights leader of the 20th century; Sequoyah, the creator of the Cherokee alphabet; Cesar Chavez, an indefatigable organizer of poor Chicano farm workers in California; or Gilbert Wrenn and Mary Thomas Burke, who were tireless, warm and insightful advocates for counseling.

While these individuals may have had personal flaws, all were focused on goals outside of themselves. They were aware, in the lyrics of Neil Diamond, that life is “dope too soon,” and delaying what can be undertaken now may mean never accomplishing anything. They may also have read the writings of Abraham Maslow or Robert Greenleaf, who asserted that a meaningful existence focuses on the “we” and not the “me.” Such a stance concentrates on causes full of caring and concern for the betterment of all people. As counselors, we can become such catalysts and servant leaders. The question is, “How?”

There is no simple answer to the “how” question, but like in counseling, there are a number of valid approaches. One way is for leaders to show, through their behaviors, what needs to be done (i.e., leadership by example). This approach can stand alone or even more effectively be combined with leaders “telling and selling” (i.e., explaining and motivating) others to imagine and work toward a vision. Therefore, an excellent strategy on how to lead is for leaders to always do first what they ask of followers while helping members understand the rationale behind the actions.

In that way, everyone becomes mentally, emotionally and behaviorally engaged. For example, if the task is to lobby for a bill in a legislative session, ideally the leader is at the forefront of the delegation — explaining why the group is...
American Counseling Association President Sam Gladding points out in his excellent column on page 5 that ACA's continuing health and growth as the world's largest association for professional counselors relies on a dynamic influx of new leaders.

These leaders, providing fresh and innovative ideas, will come from counselors who are below the age of 35.

That is not to say that counselors in their 40s, 50s, 60s, 70s and beyond do not have much to contribute to the profession. They do. But ACA, as well as our entire society, is at a turning point. The group that has been accustomed to being in charge — the baby boomers — is beginning to disengage from its professional work to focus on post-employment adult development. Often categorized as falling into generations X and Y, counselors 35 years of age and younger are now coming into their prime and are both ready and willing to help set the course for professional counseling.

Note to baby boomers: we need to value and encourage counselors in their 20s and 30s. Quite honestly, we sometimes are not very good at doing that.

Quite naturally, baby boomers tend to judge younger counselors by baby boomer values. Without realizing it, I have found myself caught up in this phenomenon when doing presentations on generational differences. As a boomer, I have found myself describing counselors 35 and younger by their "deficits" — they don’t do things for the "right" reason, they are fickle, they have a short attention span, they won’t focus on one thing at a time, they don’t value learning discrete information, etc.

Then, I did a little self-Rational-Emotive Behavior Therapy and realized that what my mind was labeling "deficits" were really "differences." And just because a younger counselor viewed things differently didn’t mean that my view was better.

In fact, counselors who are in their mid-30s and younger do many things better than more seasoned counselors. To list just a few:

- As a group, counselors in their 20s and early 30s are expert problem-solvers. They excel at developing options and implementing solutions.
- Generation X and Y counselors make counseling fun! They are innovative and creative.
- Younger counselors are very efficient. They can multitask and effectively complete two or three tasks simultaneously.
- Counselors below age 35 really know their technology. They will bring counseling into the digital age in ways that boomers can hardly imagine.
- Perhaps most importantly, 20- and 30-something counselors focus on bringing balance to their lives. They bring Donald Super’s "Career-Life Rainbow" to life by paying attention to family and leisure. And, quite honestly, this scares many baby boomers. We were taught to sacrifice ourselves for our work. Value your ideas and suggestions. Encourage them to join and become leaders in ACA.

Keep to the equation that X+Y=Valued. Both you and our wonderful profession will be better off for it.

David Kaplan is ACA's associate executive director for professional affairs.

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Mentoring needs of an African American male

The number of African American males in counselor education programs across the country is strikingly low. As a black male, not enough can be said about the importance mentoring has played in my ability to navigate the counselor education system.

Having completed my first year in a major counselor education doctoral program, I can now consider my transition a success, but there were many times when I doubted my ability and was unsure if I could adjust to being the lone African American in the doctoral program. The origins of the problems were a mixture of my own struggles and those of my peers, along with general societal issues. Had it not been for the guidance and support of my African American mentor, I don’t think it would have turned out so well.

The decision to go

The decision to move from South Carolina was one of the most difficult decisions I ever had to make. I had found success as a school counselor during the day and pursued a doctoral program at night, and everyone I held dear was still located there. As good as it was, though, I felt something was missing. Even though the instructors and content were exceptional, I still had a feeling that I was not getting all I wanted from the doctoral experience.

After much contemplation, I decided to call a former professor with whom I hadn’t spoken since he moved to Ohio for a new teaching position. He was tremendously excited about his current situation, going on and on about the abundance of resources at his disposal, intellectual freedom, access to K–12 schools and his new level of notoriety from his affiliation with the university.

My interest was piqued, and we began corresponding more frequently as questions concerning the program kept creeping into my mind. Finally, after weeks of discussion, he suggested that I apply to the program. There were so many things to consider. I had a full-time job — what would I do for money as a full-time student? Where would I live? Most important, I needed a supporter who could identify with my situation, and the department only had one African American male who might fit that bill.

Even though solutions for all my fears hadn’t appeared, the potential benefits and excitement eventually pushed me to apply. But, the letter of acceptance brought more anxiety rather than less! Luckily, there was an information session for incoming students the summer before enrollment, where I figured all of my questions would be answered. One more mistaken assumption! I managed to leave the orientation with more questions than answers about whether this was the right place for me.

Not a part of my experience

I attended a Seventh-day Adventist private school from first to eighth grade in Brooklyn, N.Y., that was comprised of 100 percent black students, faculty and staff. I had never met a white person my own age until moving to South Carolina! Experiencing school with both black and white students was so awkward that I managed to only befriend other black students. It was almost as if there were no white students in the school because I didn’t know any on a personal basis.

I managed to go from high school through undergraduate school, without ever having a friend who wasn’t black. During my master’s program, I only had close contact with white people who were in positions of authority — teachers, professors and administrators. Given my limited multicultural exposure, anxiety about transferring to a program where I was the only African American was inevitable.

Sitting through orientation made me realize just how much of a culture shock was in store. It was a fear of being the "token" African American male in the program and of desperately wanting assurance that there would be adequate support once I arrived on campus. No one in my cohort was African American, so there were some questions I wanted to ask that didn’t seem appropriate.

- Which black Greek fraternities are the most active on campus?
- How do professors and administrators in the school perceive minorities?
- How pleased are minorities with their experiences in the program and the college?

It is embarrassing to admit that I was so nervous about fit-

Continued on page 12
Dear Webster's,
Please revise 'learning.' Thanks.

Adult education will never be defined the same way again. Today's real-time world needs a university that can keep up. So we designed our online format to give you immediate value. What you learn one day can impress the boss the next. Sound too good to be true? It was. To learn about our bachelor's, master's and Ph.D. programs, call 1-888-CAPELLA ext. 6146 or go to www.capella.edu/ct2.
When children harm other children: bullying as a form of child abuse

Editor's note: The following is the first of a three-part series. This article endeavors to define bully abuse. In part 2, we will place at the school level to stop the harm that occurs to the child.

Relevant coursework, face-to-face residencies and online programs prepare you to sit for licensure. By Capella University's master's in the area of mental health counseling is the only fully online program in the country to receive approval by CACREP, the accrediting body of the American Counseling Association.

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We're here for you, so you can be there for them.
assembled and the importance of the task at hand — before energetically moving with the group toward the offices of legislators who need to be convinced.

Staying on task and on target is another undertaking leaders need to carry out. While world peace is a noble cause, most groups do not have the resources to be successful in undertaking this agenda effectively. Similarly, while it may be fun to entertain oneself or guests when it may be successful in undertaking this agenda, while others do not. Getting involved in supporting policies and candidates who promote social justice should be a central part of our identity as a profession. Obviously, we need to vote.

Leadership often entails being a catalyst and a servant. While few of us are "pure" and none of us are "flawless," striving to be the leader means yearning to take care of any individual needs aside from those that keep one healthy. Leadership often entails being a catalyst and a servant. While leading is not without its rewards, it strikes me that the satisfaction is best if it is internalized in the heart of the leader and not worn on one's sleeve. After all, who was the 33rd president of the United States? M."

Continued from page 5

We are seeing similar problems in those returning from Iraq. Clients are oppressed by other political forces as well. Unequal access to fundamental rights such as healthcare is one. "Healthcare is a Right Not a Privilege" has been central to the mission of the Haight Ashbury Free Clinics for many years. This was reiterated by Sen. John Kerry in his acceptance speech to the Democratic National Convention, and he proposed a plan to provide coverage for all Americans. It is time for ACA and the membership to acknowledge that some policies and politicians support our efforts for social justice, while others do not. Getting involved in supporting policies and candidates who promote social justice should be a central part of our identity as a profession. Obviously, we need to vote.

However, I am suggesting that ACA and its members do more. We need to volunteer for causes and candidates that promote social justice, we need to contribute financially to organizations and candidates, we need to petition and we need to demonstrate. Get involved! Douglas L. Polcin San Francisco dpolcin@hafci.org

Editor's note: Douglas L. Polcin is a research psychologist with the Haight Ashbury Free Clinics. ACA does not endorse political candidates; however, some counselors have formed the Professional Counseling Fund, an independent political action committee, which can be reached at pcfund@oddpost.com. The Fund is not affiliated with ACA.

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Andrew Helwig, 1154 Loch Ness Ave., Broomfield, CO 80020.
Telephone: 303-466-3191 after 10AM Eastern
Serving up wisdom, insights
Counselor publishes poetry inspired by bartending days

BY ANGELA KENNEDY
SENIOR STAFF WRITER

His empathy and compassion were as evident as the cherry and orange garnishes on the drinks he passed along the bar. His conversing and encouraging words flowed like honey ale off the tap. He listened to the patrons — his friends — with a dedicated ear. He heard their stories of heartache, life, love, death and every emotion in between, all while wiping the countertops and rinsing the glasses.

Bruce Wayne Sullivan spent more than a decade pouring drinks and perfecting his insight into the human condition. While working at a popular club in Memphis, Tenn., Sullivan spent hours conversing with the locals, learning about the people, their lives and their troubles. The bartender was often told he was a good listener, someone who could relate to just about anyone. But, after 11 years of making shooters and blending daiquiris, Sullivan needed a change of pace.

"This one guy came in. He was a big, burly biker type, not the kind of guy you would see crying or showing emotion," said Sullivan. "As usual, Sullivan poured the man a drink. A few minutes went by, and the "biker" began to tell him about his best friend who had just passed away. "All of a sudden, he started walking with tears. I couldn't get him to stop crying, so I poured a shot and sat it in front of the empty chair next to the guy." Sullivan then poured the man a shot and addressed the rest of the bar. "I announced, 'We are going to take a minute to pay attention to this guy's suffering.' I poured myself a shot of soda, and we all raised our glasses to his friend. After that, he dried up and said thanks. I think that was me making him feel better, a counselor. If I was good at talking with people, then that might be a career option."

Soon after that, Sullivan traded his drink recipes for a diploma and became a Licensed Professional Counselor. His bartending days gave him a type of unorthodox training in human behavior that has helped him in his counseling career. He was able to hone his listening skills and perfect his ability to get people to open up to what was truly at the heart of their problems.

"Those slow nights gave me that chance to really read people and get at the underlying meanings of what they were saying. A lot of times, people cloak their problems with words," said Sullivan, adding that those past experiences have helped him to dissect issues with his current clients. "During that time, I was exposed to the downside of human nature. I was really plugged into that population, and, consequently, those people are often your clients."

A shot of poetry

In 1997, while working at a mental health clinic in Tupelo, Miss., Sullivan and a fellow colleague were discussing poetry. Throwing caution to the wind, he shared with her some short poems that he wrote during his days as a barkeep. His intimate understanding of his former patrons was apparent in the lines of his poetry. His counselor persuaded him to submit the poem to G. Louis Rowles, a professor and poet at the nearby Mississippi State University. In the days following, Sullivan received a personal note from the professor, urging him to send his poems to a magazine or publisher. That small encouragement inspired Sullivan to write even more.

Six years later, Sullivan released his collection of poetry, "Reflections from the Other Side: The World Through the Eyes of a Bartender." In the acknowledgements of his books, he thanks Rowles and quotes Leo Tolstoy, "Praise acts so powerfully, not only on the feeling but on the mind."

Sullivan's book is filled with downtrodden and "common folk"-type characters. He translated what he saw, heard and experienced from behind a counter into free verse and rhyme schemes. Though his poems frequently speak of the impoverished and misfortunate, many of the themes are universal and contain an existential and philosophic flair.

"The people I write about are regular people. My audience ranges from educated people to those with only a high school education — anyone who struggles with life. The book represents where many or most people are, have been or on their way back," he said.

His poems are not sweetly rhymed or obscured with hidden metaphors; they are life-reflecting, honest and real. In his favorite poem from the book, "Broken Dreams," he describes the disappointment of failed aspirations. "We all have broken dreams. You hear all your life that, if you just apply enough effort and work hard enough, then you are guaranteed success. But, that isn't always true. Doing everything right doesn't guarantee results," he said.

In "September Eleventh," Sullivan worked through his own struggling emotions and issues surrounding the terrorist attack on America.

"I longed to travel afar to see for myself, but not just to see, to embrace my fellow New Yorkers. The division of North and South had vanished." Although most of the poems are heartfelt or solemn, there are a few that poke fun at the different characteristics within the cultures of American society. For example, in "A Small Price to Pay," he chides the old Southern mentality that dismisses the enemy of the redneck. "The division of North and South had vanished." Sullivan recently moved back to Opelousas, La., where he spent most of his young adult life. His clients and the change of landscape inspired him to write a second book of poems, "Vodka Tonics for the Soul."

Sullivan produced this work to complement his first book. He handpicked what he believed to be the best of his more serious poems from "Reflections" and added a number of new poems. Most of his previous poems are cognitive and thought-provoking, but the additions to the second book are focused more on imagery and a sense of place.

Now in session

Sullivan, often asks clients if they write in their spare time, and he sees that commonality to connect with them. "If they like to write, then I try to get them to write down their feelings outside of the session — whether they are poets or writers. If they come in with something, then I will read it — if they don't mind — and we will talk about the meaning behind what they have written and how this might be helpful for their treatment," Sullivan said. "Many times, you can write about things you can't really talk about. I can say things in (my writings) about myself or my ideas that I could never really verbally express. Writing really gets at the truth of things. Verbal communication is more spontaneous; writing makes me really think about what is inside of you. It's a more powerful tool to get inside a person and know who they are."

Sullivan said he enjoys reading Russian writers like Leo Tolstoy, Aleksandr Pushkin and Ivan Franko. "I like them because they don't hide their meanings. They write for common people. They don't write for some esoteric or secret group where you have to have a degree to understand what it means, like much of our writers in America. It's simple, yet very deep."

Currently, Sullivan is an ACA member and clinical manager for a rehabilitation agency in Houma, La. For more information on his poetry or to order his writings, visit www.book-surgeon.com.
Continued from page 7

Opening up

Once I finally moved, I arranged to meet with my adviser in order to find out exactly what he expected of me and to inform him of my expectations. I wanted him to know that I wasn’t comfortable enough to try asking them. Consequently, I went away with some of my most salient questions unanswered and an unwavering level of discomfort.

There were so many things that needed to be told. He needed to know about this being my first time as the only African American male in any situation and the fear of being misunderstood by peers or faculty, especially when it comes to my love for rap music and the hip-hop culture. There was the anxiety about being labeled maybe I wasn’t accepted into the program on ability but instead because of our previous relationship or, even worse, accepted just to add program diversity.

I wanted to tell him my anxieties about succeeding academically. My limited exposure to white students had somehow promoted the notion that white students perform well in school with little or no effort. Would I be able to compete with them? The greatest fear was being labeled “the black guy who couldn’t make the cut.” He needed to tell me all of this, but the only thing that came out of my mouth when he asked how I was doing was, “Okay, I guess.”

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How lucky I was to have this man who understood my experiences and so could read beyond my words to reply, “Have a seat. I need to talk to you.” He told me a lot about his graduate experience, where he had similar feelings of isolation and confidence that wavered. He told me that hard work and producing quality products often transcends race, as it had for him and for others in literature he recommended reading. It was exactly what I needed; to have my feelings normalized by someone with a similar background and who looked like me.

I left with a renewed sense of confidence, anxious to begin classes and prove my potential to excel in the program. But doubts that mostly came from inside me remained.

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Handling internal scripts

I have experienced the misperceptions attached to being an African American male and how they repeatedly manifested themselves in me. Showing too much confidence might be perceived as cockiness. Raising issues of race in class discussions can easily get a black man labeled an "angry militant." Not exactly the best images to have when trying to befriended those of other races! Then there is, all too often, the legend of the uncontrollable black libido. I happen to befriend a woman, many will automatically assume that our relationship is sexual. These are just a few misperceptions some have of

Continued on page 33
CounselingToday Quiz — October 2004

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 $12 payment to the address below. Please do not send cash.

"Whose name is on your insurance policy?"
1. The author lists all of the following specific questions to ask yourself about your policy EXCEPT:
   o a. Is my coverage shared with others?
   o b. What kind of policy does my employer have?
   o c. What does my policy NOT cover?
   o d. What is the limit of my policy NOT cover?

2. How does Sullivan describe the person who made him rethink his career choice?
   o a. a big surly biker-type
   o b. a friend with "a monkey on his back"
   o c. a displaced housewife
   o d. a graying, older man, not unlike (his) father

3. In Sullivan's favorite poem, he describes:
   o a. the miracle of transformation
   o b. the disappointment of failed aspirations
   o c. the grief of losing a close friend
   o d. the powerful mask of alcohol

"When Children Harm Other Children"
4. The author offers ___ as a possible reason why bullying as a form of aggression has not been readily recognized as a type of child abuse.
   o a. that our society is too stretched to give the issue appropriate attention
   o b. the fact that so many of us experienced bullying ourselves as children
   o c. that our society and culture has not wanted to accept that children commit acts of abuse against other children
   o d. lack of studies or statistics measuring the issue

"Washington Update"
5. The quoted Kansas legislator pointed out that the state's constitution requires a suitable mechanism for school funding, but not:
   o a. quality control
   o b. suitable education
   o c. a functional environment
   o d. all of the above

6. American Counseling Association members have sent over ___ e-mails and letters to members of Congress and the Administration urging them to support more funding for the Elementary and Secondary School Counseling Program.
   o a. 800
   o b. 1000
   o c. 2000
   o d. 5000

"Self Injury: Barring the body to ease the mind"
7. Kimball notes that when self-injurers' wounds need medical attention:
   o a. that is when they finally get referred to a counselor
   o b. that is when they realize the behavior is a problem
   o c. that they often feel a sense of relief
   o d. that they are often shamed

8. In Kimball's own clinical experience, she has found that people usually do self-injury to:
   o a. end a dissociative episode
   o b. induce dissociation
   o c. stop their thoughts
   o d. punish themselves

"ACA announces new division"
9. The Association for Creativity in Counseling will facilitate a forum at the American Counseling Association Conference to discuss:
   o a. the many faces of creativity
   o b. the collective hopes for what this new association may bring
   o c. the connection between creativity and healing
   o d. both a and c

10. Walsh's "win-win-win situation" includes all of the following EXCEPT:
    o a. a win for the client
    o b. a win for the counselor
    o c. a win for the employer
    o d. a win for the managed care company

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Whose name is on your insurance policy?

BY PAUL L. NELSON
FOR COUNSELING TODAY

You can be sued by almost anyone for anything in today’s litigious world. We hear about extreme, often frivolous, cases for large sums of money in the news. For example, a woman in New York tried to commit suicide by lying on the tracks in the subway. She ended up being hit by a train and later sued the Transit Authority. The court awarded her $14.1 million. In another case, a rancher used a hoist to dip his bull into a vat of insecticide. The bull died because the insecticide should have been used as a spray. Nevertheless, the rancher sued the chemical manufacturer and succeeded in receiving a huge award for the value of the animal as well as for his inconvenience in dealing with the situation.

One of the common elements in lawsuits involving counselors is the allegation that the client suffered emotional distress in the counseling process. In these cases, it is believed that there were unreasonable expectations by the client, which are also passed on to the public (juries) about therapy, resulting in claims awards.

As a counselor, you could be open to this rising litigation trend. According to Towers-Perrin, the Stanford, Conn.-based global professional services firm, tort actions (liability lawsuits) now account for more than 2 percent of the gross domestic product. The firm says that corporate liability insurance premiums rose 33 percent in 2003. Tort reform is being addressed by the government at both the state and federal levels, largely due to the incredible impact lawsuits have had on the medical profession. Many health care providers are leaving their profession. Some are even continuing to practice without professional liability coverage, leaving them vulnerable in the event they are sued.

Some counselors rely on their employers’ insurance providers to cover them in the event a claim is brought against them. Are you one of those counselors? Ask yourself these questions to determine if your employer’s liability coverage meets your professional needs: Am I assured that the professional liability coverage I have from my employer is enough? What kind of policy does my employer have? Do I have enough coverage? Is my coverage shared with others? What fine print does my employer NOT tell me about?

Because of the rise in litigation across the country, more counselors are protecting themselves by purchasing their own individual malpractice policies rather than depending on their employers to cover them in the event they are named in a lawsuit. If you count on your employer or supervisor to provide legal protection and you don’t know the answer to these questions or you find your employer’s insurance is not satisfactory to your expectations, then you could find yourself in a vulnerable position: Inadequate coverage provided by your employer can leave you responsible for unexpected, out-of-pocket expenses.

Counseling professionals, including school counselors and professionals working for agencies, should carry an individual malpractice insurance policy like the one administered by Healthcare Providers Service Organization (HPSO), an American Counseling Association-endorsed program. At times, the school district or agency will take a position that could prove harmful to the reputation and future of the individual counselor. An employer’s policy is often designed to fit the organization’s needs and to protect its own interests. This may not always be the same as your needs. The organization may claim that the counselor acted outside the expectations of his or her job and leave the counselor without adequate legal defense. If an individual has an individual policy, then he or she can rest assured that his or her personal interest is protected.

For more information on what this individual policy offers, go online to www.hpsso.com or call the ACA Insurance Trust at 800.347.6647. If you are incorporated or are in need of a group policy, dial ext. 342.

Paul L. Nelson is the executive director of the ACA Insurance Trust.

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Counselor as student, client as teacher

Throughout the years that I've been a counselor, my self-questioning stance has taken some hits. Keeping a private practice viable while maneuvering the managed care maze can seem unfeasible. Add working with sometimes-patronizing, multi-degreed fans of the medical model, and one has a sure route to awakening my deepest insecurities.

As the youngest of seven siblings, I learned early that survival meant being or pretending to be "as smart" as everyone else. Early experiences have sometimes unduly influenced my professional judgment. At times, I've felt apologetic about having "only a master's degree," because it can imply that having "only a master's degree," vival meant being or pretending to be a "super" adept counselor who has none of the doubts of a novice. The latter can be seductive. Trust in my own skill is crucial to safeguard against feeling impotent. Hazards arise if, in doing so, I forget my underlying philosophy. I pride myself on keeping my work grounded in a feminist and humanist orientation. This entails advocating against a rigid subscription to the medical model and embracing my own humanness. Despite my sincerity, being in a profession where letters after one's name can be large, I've gone through periods of "talking the talk without walking the walk." My blindness was revealed to me by one client in particular.

Jill's counselor referred her to me to address an eating disorder. On first sight, her anorexia was obvious. Jill acknowledged having "food issues," which she asserted that her counselor exaggerated. This, paired with statements like "If I could, I'd take a knife and cut off this disgusting fat," I surmised that Jill wanted help but clung to the disorder for self-preservation. With her ability to respect the "symptom," we embarked on a path I assumed to be free of pathological premises.

I felt sure of my clinical interpretations after only one session. "Take that," I thought, imagining the egocentrically psychiatric I'd met in the past. The glee I felt was akin to what I'd experienced as a child when I out-argued my older, science-minded brothers. After some hours had passed, however, I found myself reviewing my notes again. Everything about Jill screamed "textbook" anorexic. Treatment was straightforward: stabilize weight and challenge distortions. During the intake, I felt like I'd managed to get past Jill's guardedness. Now, I wondered what had felt like my gifted joining was merely a delusion. Most unnerving was the sense that Jill had assessed me without my awareness. I recalled that she had changed her behavior to match mine, had adopted my metaphors and mirrored my posture. I cringed to imagine that this client might possess more finely honed counseling skills than I.

The plethora of Jill's diagnoses, particularly borderline personality disorder, allowed me to retreat behind a title. Powerful male providers had assigned these labels. My "be a good girl and don't question your elders" tape was activated. I heard Jill's litany of complaints as those of a "borderline." With my clinical "expertise" firmly in hand, I wondered how my focus on Jill's eating disorder might make any real impact. Eating disorders are entrenched, I felt sure in reinforcing some identity. This plan worked well until, two sessions later, Jill stated that she had terminated the treatment. This plan worked well until, two sessions later, Jill stated that she had terminated the treatment. Later, my inner nagging resurfaced. Back to my notes. I recalled that I, as a child, would be allowed into the world of my siblings only to be banished if I became "a pest." I was behaving toward Jill in the same conditional way.

Our work continued, but I noticed a shift, a new accountability, I saw my hypocrisy. I'd behaved as if interpersonal collaboration was shameful and having a true dialogue with a "nicked" client suggested professional incompetence. I realized that what I thought Jill needed was me. I set about trying to protect my image. I had to keep an eye out for my own "therapy-interfering behavior." Self-humbled, I was gratified that Jill's eating disorder symptoms were abating. Jill's treatment with me raised the self-awareness that she was "too much" for me. In Jill's words, the counselor had made her "grow up." She surmised that her counselor derived perverse pleasure in reinforcing some identity of Jill as "crazy."

I urged Jill to address these issues with her counselor. Inside, I wondered if this was evidence of "splitting." Was Jill luring me into being the "good" one? I got on the phone with her counselor. My reach for consultation was likely about wanting external reinforcement that Jill was, indeed, acting from perceptions that were skewed.

Jill's counselor and I agreed that Jill and I should focus on the anorexia. Jill and her counselor would address the transference. This plan worked well until, two sessions later, Jill stated that she had terminated the work with her other counselor and wanted to work with me. "I tired of her saying everything I

Continued on page 23
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and long-lasting effects upon the child who is the victim. Often, the victim of a bully is another child who, for no specific reason, becomes the target of the abuse. Like other perpetrators of abuse, bullies often choose their victims by proximity — a child is targeted by a bully to become the victim due to that child's availability within the classroom and school, on the bus or in the neighborhood of residence. The child remains the target of the bully as long as the bully has access to the child and effective adult intervention does not take place. As with other forms of abuse, children cannot stop the bully — only adult intervention can stop any type of abuse and that includes the abuse by a bully. When adults intervene and stop this type of abuse, other children learn that bully abuse is not acceptable, will not be allowed and that bullies are dealt with directly and effectively.

In conceptualizing bullying as a type of child abuse committed by children to other children, counselors can provide a frame of reference to help school personnel and parents understand how bullies perpetrate physical, emotional and mental harm to a child. In doing so, a school policy can be proposed that is congruent with what children already know through other programs — that the abuse of children is not acceptable and it is against the law. Teachers and school counselors can then work together to stop this form of child abuse in schools and assure that the bully's abuse ceases and the victim is restored to safety and well-being. The families of both the bully and victim can be involved and lend support to their respective children as this process occurs. An outcome not readily recognized is that, when bullies are stopped, it may provide an avenue of intervention and prevention that may help stop the development of perpetrators into adulthood, and prevent the child victim from becoming a repeat victim of abuses later in life.

Bullying is defined as a student's direct and intentional harm to another student, whether that harm occurs in the form of physical injury or threat; emotional abuse that comes from derogatory names, personally demeaning labels, malicious gossip, lies and distortions intended to hurt a child's reputation and character; or the initiation of intentional isolation of the child from peers. Bullying is also transgressed through mental harm that causes disruption to school and educational goals, resulting from an inability by the child victim to concentrate and focus on assignments and tasks; decreases motivation to attend school; depression arising from a child's sense of helplessness that she or he cannot stop the bully; anxiety, worry or fear that the bully will not stop on his or her own; and a generalized sense of dread to attend school because of the anticipation of the bully continuing the abusive behavior. Whether bullies are female or male, they make school unsafe and create both a covert disruption in the daily life of students and an overt control over a classroom or other school environment, such as the lunchroom, gym or playground, by usurping a teacher's or other responsible adult's positive control and influence upon students' academic and social behavior. When bullies prevail, the school environment becomes perilous for a child due to physical harm such as pushing, shoving, hitting, kicking, spitting or tripping; emotional harm such as derogatory names and statements that insult, embarrass, shame, ridicule and humiliate a student; and mental harm whereby a student is not able to feel good about being in the classroom where the bully is, may not participate in class discussions due to fear of embarrassment from the bully, or may seldom volunteer for projects out of a sense of not being accepted by others or anticipating potential rejection by peers.

In short, bullying takes the joy out of learning and attending school and replaces it with a sense of dread and loathing that, each day, the student will once again face the bully, the peer group surrounding the bully's behavior, and the silent bystanders who act — as though they don't see what is happening.

When a teacher or other adult does not intervene and stop the bully's abuse, then a child is left feeling alone and isolated from any help or assistance to make it better and, most importantly, to make the abuse end. When parents are either unaware of the bullying or give ineffective advice such as "ignore it," then a child is left with no one to turn to who will understand how he or she feels and how he or she is experiencing himself or herself in relation to the bully's abuse. Like other types of abuse that occur within a family, bullying takes place in secret. With the latter children are isolated from resources and people who can help him or her or around individuals who do not know what to do to stop the bully's abuse.
Self-injury on rise

The growing phenomenon of harming the body to ease the mind

BY ANGELA KENNEDY
SENIOR STAFF WRITER

Some use razors, broken glass or their fingernails to break the skin. Others bang their heads, swallow metal objects or burn themselves just to know if they are alive. They are young, old, male, female and from different cultures all over the world. But the most tragic thing about self-injurers isn’t how they do it, but the simple fact that more people are turning to this type of coping mechanism.

Self-mutilation, or self-injuring, is the deliberate, direct destruction or alteration of body tissue without conscience. Self-injuring is not a condition but one of the symptoms of Borderline Personality Disorder.

Joan Kimball, a therapist at Western Washington University counseling center, first started researching self-injurious behavior seven years ago, and she is currently writing her dissertation on the subject. In her years of study, she has spoken to hundreds of adolescents and adults about self-injury — trying to find the truth, the common denominator, the answer to “why.”

“I think there is quite a bit of diversity among those who self-injure in any way. It used to be that a typical self-mutilator was female, white, middle to upper class and intelligent. But, subsequent research has found that in at least some studies, males tend to self-injure as often as females — maybe for slightly different reasons. It is not limited to any racial, ethnic or social economic group,” Kimball said. “What you will find, are similarities in trauma. Some kind of event in their lives that has been very difficult for them to process and it has left emotional scars. Children of sexual abuse are highly represented among those who self-injure. In one study, it was as much as 75-90 percent.” She added that what she finds most disturbing is the age the behavior begins — as early as seven according to recent research. “But, the thing that intrigued me was that 25 percent of self-injurers said that they started self-injuring in sixth grade or younger; 60 percent said they started in seventh or eighth grade and 12 percent in ninth grade.”

She noted that self-injuring often is an experimental or transitional behavior that many young individuals will outgrow, but not everyone does. “In my research, eight percent of the college students surveyed acknowledged self-injuring. Although, this is lower than the percentage reported among adolescents, eight percent is still significant, and disturbing.”

Kimball said there are many questions that remain to be answered regarding self-injury. “We still don’t have it really nailed down as to why people choose self-injury as opposed to other ways to regulate themselves,” Kimball said, noting that gender differences, treatment models and multicultural comparisons are areas that need to be further explored. “There are not many, if any, cross-cultural studies. There are some researchers who are looking at different ethnic groups within the U.S., and there has been some research done in Britain, Australia, Japan and other countries. But looking cross-culturally to see what factors might be present in two cultures, or how they might be different — none of that has been done,” she said.

Wendy Lader, clinical director of the Self-Abuse Finally Ends (S.A.F.E.) Alternatives program and co-author of “Bodily Harm: The Breakthrough Healing Program for Self-Injurers” said, based on her clinical observations and other professional studies, that 1,400 out of every 100,000 people in the general population have engaged in some form of self-injury.

“Feeling nothing, nothing but feelings” In the book, “Cutting: Understanding and Overcoming Self Mutilation,” psychotherapist Steven Leverson said the overwhelming feelings of the self-injurer go beyond frustration. “Self-mutilating behavior means the mind has slipped away from its ordinary context or perspective, losing sight of the impracticality of pain and danger in order to commit an act that will bring an immediate solution (however unrealistic or temporary in nature) to emotional pain.”

There are two types of self-injurers: those who want to escape their feeling and those who want to feel something — anything. “I think that when people first start self-injuring they are overloaded and feeling too much — too much anger, stress, sadness, frustration — so they cut. And, it does help them to mute those feelings. However, when it becomes habitual, and they have learned to get rid of all their feelings; then, they get very numb. They have stufed those feelings away, and now they are left wanting to feel something,” said Lader.

Most self-injurers say they feel empty or have no feeling of pain at all when they are injuring. “After the act is complete, the pain can indeed be excruciating, but it also feels oddly comforting, soothing — alive. On the other hand, some self-injurers say they do feel pain during the act of injuring, but that it doesn’t stop them from proceeding. Seeing with their own eyes the wound they are pro-
Religion is fine, but we do not allow ourselves to be抬升ed up to a higher power, and we do not allow ourselves to be抬升ed up to a higher power, and we do not allow ourselves to be抬升ed up to a higher power, and...
At other times, the child faces the bully alone, due to adults who do not understand or readily acknowledge that the bully is threatening the child's emotional, physical and mental well-being or who may minimize the extent of the bully's behavior by not acting directly to stop the bully from abusing the child.

When adults inadvertently condone or overlook the bully's abuse, they reinforce the bully's control over the child and the peer group where children's social development is taking place. Consequently, adults who fail to intervene and stop bully abuse take the role of passive bystander and unintentionally role model a passive reinforcement of bully abuse for other children who look to them to intervene or give direction on how to deal with this aggressive behavior in another child.

Whether intentional or not, the result is the same when adults do not step in and stop the abuse by the bully — they sanction the bully's behavior, allowing this form of child abuse to continue, prevent positive intervention with both the bully and the child victim, and give the message to other children that bully abuse is accepted — a dangerous message for all concerned. While this is seldom the outcome or intention of any adult, it happens in schools where effective intervention has not occurred or does not occur on a continuous basis throughout the school year and intervention has not been followed through by school personnel to assure that the bully's behavior does not recur. Often, teachers will know that bullying is occurring but may not feel comfortable or confident enough to intervene or simply may not know when to intervene. Therefore, it is especially important for teachers, who have the most contact with students, to be provided with education about bully abuse, be given information on positive interventions that stop bullying from taking place at each grade level and are afforded a human resource within the counseling office to whom they can make a referral for both the identified bully and the targeted victim for follow-up and intervention within the family and later follow-up within the school throughout the school year.

Along with education on bullying and positive and effective intervention methods within the classroom, a stated policy against bullying that is communicated throughout the school year by administrators and teachers to students and parents is also needed to maintain awareness about bully abuse and that it is not to be tolerated within the school community where children come to receive an education. A school policy that is already in place that is part of the ongoing dialogue about the stand against child abuse and the school's goal of keeping children safe within their community gives credibility and support to a school's anti-bullying policy and action plan.

For example, recognizing that bullying is a social problem in our schools and that the assault of another student is not accepted and will be dealt with by teachers, the guidance office and school administrators is a firm and fair policy for all students and parents. Taking the view that bullying is a form of child abuse that can be committed by children to other children is similar to recognizing that child abuse does occur; rather than denying this trauma happens to children, we own it as occurring within the community at large and as potentially occurring within the school community. Establishing a zero tolerance for bully abuse within the school environment is similar to the zero tolerance in our society for the abuse of children. Training for school personnel and teachers on how to prevent and intervene quickly with the bully and to make a report to the guidance office is similar to prevention programs against child abuse and referral programs that are hopefully available within schools already.

Making a referral to the school guidance office, where contact with the parent for intervention with the bully can take place and scheduling of an intervention conference, assures that the child victim is protected and the bully is identified as having a problem that must be addressed by both the school and the family. The victim is also identified as needing assistance and support at the family and school level and his or her integrity restored within the classroom, with peers and within the school. School counselors become resources for teachers, children and parents to stop bullying within our schools and can create or restore a positive school environment, one in which all children are respected and their right to a safe learning environment is assured by the adults who are in place to teach that children are the priority in education and that the children's well-being comes first.
Finding Your Way
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Promoting the dignity and development of persons with physical challenges

More than 43 million people with physical challenges live in the United States. These individuals possess a variety of personal strengths that enable them to cope with the unique stresses that they routinely experience in their daily lives. Regardless of the particular strengths that these individuals possess, it is important to note that the well-being of even the most resilient person can be adversely impacted by environmental barriers that effectively undermine his or her sense of dignity and potential to realize his or her full psychological, educational, social, economic, and career potential.

Given the sheer number of persons with physical challenges who live in our society, it is safe to say that counselors will frequently encounter individuals who are distinguished from others by their unique physical characteristics — characteristics that their environments are too often ill-suited to accommodate. Despite the frequent contact that counselors are likely to have among persons with physical challenges and the tremendous potential that counseling practitioners possess in terms of promoting the dignity and development of these individuals, most practitioners are ill-prepared to implement helping strategies that are intentionally designed to empower persons in this growing population.

With this backdrop in mind, this month's column is intended to serve a threefold purpose. First, it explores some of the issues counselors face when working among persons with physical challenges. Second, we identify some of the specific competencies counselors need to acquire to work in an ethical manner among persons with physical challenges. Finally, we describe several intervention strategies that counselor educators and students in a master's degree program used to address the needs of persons with physical challenges at the university where they work and study.

What's in a name?

Several multicultural experts suggest that persons with physical challenges constitute a unique "cultural" group. Some of the factors that contribute to this line of thinking include the recognition that persons with physical challenges

- Frequently share a set of beliefs, values, needs and ways of viewing the world that are often different though certainly no less valid and legitimate from those manifested by their temporarily able-bodied counterparts.
- Possess personal strengths that are often overlooked by persons in the dominant cultural group in general and by many counselors who work with these persons in particular.

When viewing persons with physical challenges as a unique cultural group, it is important to reflect on the sort of name or label we use to identify them. This is a very important consideration because, as several experts in multicultural counseling have pointed out, the naming process

- Shapes the way we conceptualize people who are identified as being a part of a distinct cultural group that has been and, in many instances, continues to be unfairly treated and marginalized by persons in the general society.

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* Can positively or negatively affect counselors' abilities to realize the sort of psychological liberation that is an inherent part of becoming culturally competent mental health professionals.

Disagreement abounds in the lay and professional communities about the "correct" word or phrase to use when discussing issues related to people with physical challenges. Among the various terms that people frequently use to describe these individuals include disabled persons, persons with a disability and people with physical challenges, to name a few. It is important to note that the term "disabled" is most often used to describe people whose unique physical characteristics lead them to being treated in differential (and often unfair) ways by others. It is much more than going along with what some people refer to as using the "politically correct" terminology of the day. Instead of trying to conform to what is deemed as being a politically correct way of acting in a given time, we suggest that counselors need to thoughtfully reflect on the psychological and interpersonal implications of using specific labels when discussing issues related to people in this unique cultural group.

For instance, using the term "persons with a disability" promotes a psychological perspective that not only fosters sympathy rather than fair and respectful treatment, but it also unintentionally disempowers people who are distinguished from others by their unique physical characteristics.

The term "persons with a disability" fosters a more positive psychological perspective in that it implicitly highlights our common humanity. However, it also acknowledges that some individuals have a physical condition that limits their abilities to fully engage in many of the opportunities that their temporarily able-bodied counterparts are able to access and experience in our contemporary society.

Although the latter term is thought to be more respectful than the former, other persons in the counseling profession feel that another term is necessary to more effectively promote the dignity and development of people who are distinguished from others by their unique physical characteristics. This perspective
emphasizes the importance of:

- Avoiding the use of any terms that may unintentionally contribute to subtle forms of psychological disempowerment (which may occur when the "disability" is used to describe persons in this unique cultural group).
- Abandoning terms that inadvertently lead counselors to overlook counseling strategies that are effective for persons who are differently abled. Differences in ethnicity, culture, and behavior are not the same as physical abnormalities. Physical differences between individuals make various psychological, emotional and behavioral changes without directing equal time and energy in advocating for environmental changes as well.
- Embracing labels that will promote our own psychological liberation by leading us to think about human diversity in more affirming ways — ways that help us avoid viewing human differences from a deficient perspective.

Keeping these points in mind, we deliberately use the term "persons with physical challenges" in this column. In doing so, we hope to promote a perspective that emphasizes the inherent value and worth of all persons, regardless of whatever ways they may be different from other people in society. It is also our intent to use this term to emphatically point out that environmental conditions are much more disabling to persons with physical challenges than the unique physical characteristics that these people possess. This point underscores the notion that counselors, who provide service to persons with physical challenges, are themselves challenged to not only assist the clients in learning new coping and stress management skills but also in directing even more time and energy to foster the dignity and development of these individuals by advocating for the elimination of disabling environmental conditions.

### Acquiring new multicultural and advocacy competencies

To work effectively, respectfully and ethically among persons with physical challenges, counselors need to acquire a host of new professional competencies. The set of multicultural and advocacy competencies that are necessary to acquire the knowledge and skills that will enable them to effectively "exercise institutional intervention skills on behalf of their clients" (Multicultural Counseling Competency No. 27). This professional competency requires counselors to be able to effectively advocate for the rights of physically challenged persons by calling for support and changes within the organizations and institutions in which they are a part — changes that reflect the value that organizations and institutions have for human diversity.

The set of advocacy competencies that were recently endorsed by ACA provide additional guidelines that counselor educators and practitioners will find helpful in promoting the sort of organizational and institutional changes that are briefly described above. Three of the ACA-endorsed advocacy competencies are particularly relevant for the present discussion. These advocacy competencies direct attention to the need to (1) identify external environmental barriers that adversely impact a person’s development, (2) train students and clients in self-advocacy skills, (3) help students and clients to develop self-advocacy plans, and (4) assist students and clients in carrying out action plans.

The following section discusses how these competencies were implemented in an organizational development intervention that was intentionally designed to stimulate environmental changes in the College of Education (COE) at the University of Hawaii — changes that would elevate the dignity and foster the development of persons with physical challenges who wanted to promote access to and expansion of the resources that are available in the COE.

### Identifying barriers and developing an action plan

The first step in developing this intervention involved identifying the specific environmental barriers that existed on campus in general and at the COE in particular. To investigate this issue, one of the faculty members of the Department of Counselor Education required her students to conduct a campus-wide accessibility study of selected buildings and classrooms and to evaluate the types of student services that were available to persons with physical challenges as a class project in one of her counseling courses. In designing this course assignment, the instructor had students work in teams to complete checklists, that were designed to assess the types of environmental barriers that exist in various settings. Upon completing these checklists, students summarized their findings and made recommendations for readily achievable changes that would not cause financial hardships to the university or the COE. This learning activity not only increased students’ awareness of the unique needs of persons

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**Will you be able to help her future?**

**The PREVENTION RESEARCHER**

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**Counseling Today in October 2004**

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functioning better than they were before the event. During that time you do little. You 'duct tape' them and put them on the back and say go."

Research has shown that individual and community functioning after a traumatic event usually increases. "Most people want to pitch in and help. That can last for 36 hours to a couple of weeks. Then, the acute stress symptoms start to set in. You start seeing irritability and more motor agitation. People are frustrated that they can't get things done fast enough," he said.

Many people feel like they are running in place and are trapped in "red tape" of insurance claims and financial burdens. "They can't get things resolved and they are struggling trying to get things back to normal, but intervention is still basic listening and supporting. I won't tag any pathology on anyone until at least 30 days afterwards," he said.

Usually about a month after the event, people come to a fork in the road. "Then after about four weeks, you start seeing people either progressing or regressing. They are focused on the future or they start showing serious posttraumatic symptoms such as difficulty sleeping, nightmares, not engaging in daily activities, becoming isolated or increasingly irritable. They may have difficulty relating to family or coworkers or they could be numbing themselves with substances — those need a little bit more specialized interventions."

Diane Fojt, president and CEO of Corporate Crisis Management in Tampa Fla., has 26 years of experience in crisis intervention, education, training and medicine. "We are dealing with fear and exhaustion, especially with those who are still in shelters. I don't think anyone gets a good night's sleep on a cot in a room with a couple of hundred people," she said noting that the chaos of evacuating and being displaced can be disorienting and stressful.

Fojt agreed with Gentry that under these circumstances, counselors should not try to diagnose behavior at this time. "In general, you are not dealing with pathology. You are dealing with normal reactions to an abnormal event. Most of the people you come across are coping to the best of their ability," she said.

Lending a hand
Several ACA members traveled to Atlanta for mobilization training by the American Red Cross Disaster Mental Health team. The training explains the Red Cross structure on disaster relief operation, paperwork involving financial aid and psychological intervention that the DMH uses to help survivor and on-site staff.

After the training, volunteers were assigned to work for 12-day deployments at Disaster Relief Operations sites associated with the hurricanes. Currently, volunteer recruitment is still underway and an additional training session is being planned.

"The Red Cross covers the cost of travel, lodging and gives a daily allowance to cover food. For these DROs, volunteers should know that the temperatures are in the 90s and it is humid. These are hardship operation assignments," said Susan Hamilton, American Red Cross Disaster Mental Health Officer. "Counselors can expect that the demands on their skills will be high and sometimes there will be down time when they will need to just pitch in and provide assistance to whoever needs it at the time," said Hamilton. "But the value in volunteering is that they really do make a difference."

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Reaching out to help when it is most needed....

During the recent hurricane disasters hitting the southeastern United States, the American Counseling Association worked with the American Red Cross to deploy professional counselors to help those in need.

This current effort is one of many that have resulted from the multi-year partnership that the American Counseling Association has forged with the American Red Cross to provide disaster mental health relief services for both natural and human made disasters.

Perhaps you would like to help, but your schedule does not permit you to leave your worksite.

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During the month of October, the American Counseling Association will donate one dollar for every book purchased from our catalog to help those who have been so severely impacted by the hurricanes.

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When your catalog arrives, take a look, buy a book and know that you are also helping those in need.

All current ACA members will receive the new Publications Catalog this month, but you can also go online to order at: www.counseling.org/publications. To order over the phone, call ACA at 800-347-6647, x222 from 8:00 am to 7:00 pm eastern time Monday through Friday.
The bill makes changes to the current law authorization of grants for youth suicide research, training, and technical assistance centers, and would set up two grant programs for the design and implementation of early intervention and prevention strategies aimed at decreasing youth suicide: one for state-sponsored or -designated statewide programs, and one for public or nonprofit organizations or consortiums of states for designing programs to complement them.

In passing the legislation, the House added language requiring that states and other entities receiving funding for youth suicide prevention and intervention activities "obtain prior written, informed consent from the child's parent or legal guardian for assessment services, school-sponsored programs and treatment involving medication related to youth suicide conducted in elementary and secondary schools," except in case of emergency of instances where parental consent cannot reasonably be obtained. Negotiators also added language clarifying that suicide prevention efforts would not be applied to families who object based on moral or religious beliefs.

While parental consent and involvement can, in many cases, help improve the assessment and treatment of minors at risk of committing suicide, mental health advocates felt that the House's amendments served only to codify the stigma against receiving mental health services and would erect an unnecessary — and potentially lethal — barrier to accessing services. Ultimately, however, the Senate agreed to the House's amendments in the interest of enacting the bill.

The legislation also includes the "Campus Care and Counseling Act" (S. 2215 / H.R. 3593), establishing $15 million in authorization during the next three years for a new competitive grant program to institutions of higher education to "enhance services for students with mental and behavioral health problems that can lead to school failure, such as depression, substance abuse and suicide attempts." Eligible entities for the grant program include college and university psychology, college and university counseling centers, college and university psychological service centers, mental health centers and other programs.

It is important to note that the bill authorizes funds for suicide prevention grants. Money must still be set aside during the appropriations process to fully fund the measure. For more information, contact Dara Alpert in ACA's Office of Public Policy and Legislation at 800.347.6647 ext. 242, or by e-mail at dalpert@counseling.org.

Read ACA's briefing paper on this topic at www.counseling.org/public.

ACA joins KCA in fighting for state's school counselors

Similar to many states, schools in Kansas vary widely in their level of financial support. Unlike most states, one of its courts has ruled that the state's government is in violation of the Kansas constitution's requirement that it make "suitable provision" for schools. In issuing this ruling last year, Shawnee County District Judge Terry Bullcock cited a study commissioned by the state's legislature, which found that Kansas schools spend an additional $1 billion per year in funding above the current level of $2.7 billion provided by the state. The state appealed the ruling, and the Kansas Supreme Court heard oral arguments on the issue at the end of August.

Even before the Supreme Court hearing, however, the Kansas legislature began exploring ways to make education cheaper to provide, including limiting or eliminating access to school counselors. The Select Joint Committee on School Finance held a hearing on Aug. 23 on how to define a "suitable education." The hearing was an attempt to lay the groundwork for focusing the state's resources narrowly on math, English, science and social sciences programs. According to lawmakers, doing so would help the state defend itself against future court cases related to education funding. One legislator pointed out at the hearing that, while the state's constitution requires a suitable mechanism for school funding, "there is nothing requiring a suitable education."

At the request of the Kansas Counseling Association, American Counseling Association President Sam Gladding submitted a statement for the hearing, urging the committee to maintain support for school counselors, stating "Counseling services are a necessity in schools — not an extra that can be cut." Gladding cited statistics showing the effectiveness of school counseling services and noted the nationwide trend toward hiring more school counselors. In 1998, the average U.S. public school student-to-counselor ratio was 561:1, while in 2003 that ratio had dropped to 477:1. Gary Price, president of the Kansas Counseling Association, testified in person at the hearing, as did other counselors. In his statement on behalf of KCA, Price cited counselors' important roles in the areas of academics, personal development, mental wellness and career development and guidance.

The Kansas Supreme Court's ruling on the school funding...
Get into action, get what you want from life

Have you been thinking that life has not worked out like you planned? Does it seem that those optimistic visions you used to hold have surrendered to reality? Instead of bemoaning things that haven’t happened or didn’t work out, you might try these tips and get into action to get you closer to your dreams. While there is no magic formula to make all your wishes come true, there are things you can do to achieve better relationships and get closer to the goals that you set in life.

Get over anger, blame or helplessness. Forget past hurts or abandonments. When you get closer to the goals that you set in life.

Find your own voice. Past relationships may have left you unsure of yourself or reluctant to express your feelings. Learning to voice your preferences, both positive and negative, will move you toward more honest living and loving. Don’t worry that speaking up will make you selfish and overbearing. Finding your voice is not about being bossy or always getting your own way. It’s just about being honest and understood.

Banish myths about ideal relationships. We’re all just human and so are the people with whom we fall in love. There is no “perfect mate” who will meet your every need. But, there may be someone who can accept your real self (if you are brave enough to reveal who that is). Partners who care about us and get it right more than they get it wrong make our lives rich and challenging.

Identify your personal strengths and interests and put time and energy into nourishing them. If you’re a singer, sing. If you’re a great accountant, manage some money. Instead of trying to be someone you’re not, try enhancing who you already are. Whatever it is that you do well, do it frequently and proudly. Rewards will follow.

Learn to say “no.” Set limits with people. Know when you’ve done enough. Saying no is not the same as being selfish. Saying no to excessive demands on your time, talent or goodwill creates room for the things that you really want to say “yes.” Saying no avoids the resentment and anger that comes from agreeing to things you really don’t want to do.

Get into action. Take steps, even small ones, to move toward what you want. Take one daily action to move you closer to your desires: make the first phone call, rewrite your resume, organize your closet. We usually know the end result we want but often fail to take the first step. Don’t wait until you feel like doing it — just begin.

Create balance in your life. If any one area of life is consuming all your time, look at small ways to make a shift. Do you need to cut back on work? Initiate more social contacts? Increase family time? A balanced life reflects attention to each of the following areas: physical, social, emotional, work/productivity, intellectual and spiritual.

Examine your beliefs about men/women, husbands/wives, family and relationships. Do these reflect what you truly believe and value, or are they remnants of what you learned and absorbed from your family of origin? Some old beliefs that keep us stuck might be “I need to be married to be happy”; “You can have a successful career or a successful relationship, but not both”; “If you really loved me, you’d know what I need.” Make sure that the beliefs that are driving your present life embody who you are and what you really want from life.

Try living without masks. Whatever you are is fine. If you change to fit in with others, you’re not living authentically. People will love the real you if you will just let them see who that is. In fact, without masks, you are more likely to attract people into your life who share your values and interests.

Be OK alone. Take the time to discover yourself. Find whatever it is that restores you and give a few minutes each day to nourishing yourself in solitude. A life that is too busy can easily crowd out moments of reflection that reconnect you with your core self and your reason for being.

Mary DuParri is a Licensed Professional Counselor, National Certified Counselor, speaker and group facilitator in private practice in Chesterfield, Mo.
case is expected later this year, and the Kansas legislature will convene for its 2005 session in January. Regardless of the court's ruling, education funding will be a hot topic next year, and it will be imperative that Kansas lawmakers hear from counselors. ACA is continuing to work with Kansas counselors to ensure that school counselors are viewed as an essential component of the education system.

Tardy appropriations process may include increase for "ESSCP"

Only one of the 13 annual appropriations bills had as the federal government's fiscal year came to a close last month. The 13 appropriations bills fund federal programs for the new fiscal year which began Oct. 1. With each passing day, the likelihood increases that Congress will need to come back to finish up the appropriations process. The Senate held a late-night session after the Nov. 2 elections. As the process moves along, the American Counseling Association continues to spearhead the fight for increased funding for the "Elementary and Secondary School Counseling Program" ("ESSCP") fund. "ESSCP" funds counseling services to tens of thousands of elementary school students in 99 school districts in 31 states and the District of Columbia. Our work—and more important, that of grassroots advocates—appears to be paying off. On Sept. 9, the House approved the $142.5 billion FY 2005 Labor–Health and Human Services–Education appropriations bill by a vote of 388–13. The House bill would provide $33.8 million for "ESSCP," the same amount the program received in FY 2004. In including this funding, the House rejected the elimination of the program proposed by President Bush in his budget request earlier this year. With the federal government facing record-breaking deficits, maintaining funding for the program is almost a victory in itself, but we must be poised to do even better.

On Sept. 8, the Senate Appropriations Subcommittee on Labor–Health and Human Services–Education approved its version of the same spending bill and included $36 million for "ESSCP." This is a $2.2 million increase above last year and the highest funding level yet for the program. The bill next goes to the full Senate Appropriations Committee and then to the Senate floor. While the Senate's funding number is still well below the $470 million that ACA and other organizations had originally requested, it is a significant step in the right direction. ACA and other organizations have been working closely with congressional staff and members on the issue, but we believe that member support is what made the difference. In the last six months, ACA members have sent more than 1,000 e-mails and letters to members of Congress and the administration, urging them to support more funding for "ESSCP." This work is yielding results. However, we need to maintain this pressure as the appropriations process continues. Refer to the ACA Action Page in the September 2004 issue to find out what you can do today to make a difference. Thank you, and keep up the good work!

For the latest information, visit ACA's Public Policy website at www.counseling.org/public.

ACA, NEA, ASCA discuss closer collaboration

With 2.7 million members, the National Education Education Association is far and away the largest education advocacy organization in the country. NEA's membership consists primarily of teachers but also includes every other type of employee found in an education setting. This includes counselors, and the NEA Counselor Caucus is stepping up its efforts to ensure that NEA addresses the needs of school counselors and related school services professionals. The current chair of the NEA Counselor Caucus, Laura Jo Severson, also happens to be the president-elect of the Washington Counseling Association. Severson has been working for closer collaboration between her professional organizations: NEA, ACA and the American School Counselor Association. The process began with a face-to-face meeting among Severson, Patti Rabalais, NEA senior professional associate for special education needs, and Scott Bartow, ACA director of public policy and legislation, during NEA's Representative Assembly held this past July in Washington, D.C.

At the Representative Assembly, the NEA Counselor Caucus successfully pushed for the adoption of a motion calling on NEA to assist local chapters facing the "possible elimination, reduction, sub-contracting and/or privatization of" counselors, speech and language therapists, psychologists, nurses, librarians, school social workers and occupational/physical therapists in school districts. Adoption of the motion was a testament to the Counselor Caucus's strength and determination. These initial discussions in July were followed by a more formal meeting in NEA's office in Washington, D.C. on Aug. 19. In addition to Severson, NEA and ACA staff, and T.W. Wannick Bell with the NEA Counselor Caucus, several ASCA representatives attended. Several options were discussed for establishing a more formal working relationship, including having each organization agree to attend and present at the others' conferences, conducting a joint mailing to state education associations regarding inclusion of school counselors and related services personnel in collective bargaining agreements, and publication of articles. Although no firm decisions were made, the discussions should lead the way to an even stronger working relationship among the three organizations through specific joint activities. ACA already works closely with NEA on federal education policy issues through joint documents and ASCA, but these efforts could expand. ACA's Legislative Institute and the National Association of Pupil Services Organizations, and we're looking forward to building on these efforts.

Public Policy and Legislation Committee grants disseminated

American Counseling Association entities across the country are receiving grants from the ACA Public Policy and Legislation Committee to assist in their legislative work. Grant decisions were made by the PP&L Committee during its summer meeting this July in Alexandria, Va. The decision-making wasn't easy: 22 entities applied for more than $30,000 in grants. The committee's entire grants budget of $12,300 was awarded, as listed below:

Register and vote!

As you now doubt have noticed, this is an election year. The nation has not been so divided in decades. Many Americans have felt excluded from the political process, but there is one simple right that millions of citizens fail to exercise: the right to vote. As counselors, you know what it is like to have to compete for jobs, reimbursement and recognition. And you know how difficult it is for your clients to access treatment, employment and education. Your federal and local governments have an enormous influence over all these issues, and you can be a day who makes these decisions by taking the time to register to vote before the election and to vote on Tuesday, Nov. 2. We've even made it one step easier. You can access a voter registration form online from almost any state: www.fec.gov/voteregis/pdf/vvam.pdf.

Because this is a nationwide registration form, please follow the specific instructions carefully for your state. The state instructions begin on Page 3 of the registration document. For questions or for more information, contact Dara Alpert in the American Counseling Association's Office of Public Policy and Legislation at 800.347.6647 ext. 242 or e-mail dalpert@counseling.org.

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<th>Entity</th>
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Follow-up reports on the use of grant funds will be printed in future issues of Counseling Today.
**AMERICAN COUNSELING ASSOCIATION FOUNDATION**

"Finally, a book for those who want to counsel families, but have not been formally trained."
— Jon Carlson, Ed.D., Psy.D., Past-President, IAMFC

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**In Brief**

Call for nominations for committee appointments

American Counseling Association President-Elect Patricia Arredondo is seeking nominations for ACA committee appointments. She will be appointing regular members for each committee who will serve a three-year term and a student representative to each committee for a one-year term.

Positions on the following committees will be available beginning July 1, 2005:
- Awards
- Bylaws and Policies
- Cyber-Technology
- Ethics
- Human Rights
- International
- Interprofessional
- Professional Standards
- Public Awareness and Support
- Public Policy and Legislation
- Publications

Research and Knowledge
Strategic Planning

ACA members may nominate themselves or be nominated by other ACA members. Nominations are due Dec. 15 and must be sent to Mary Janicke at ACA headquarters, 5900 Stevenson Avenue, Alexandria, VA 22304. Nominations packets are available from ACA. To receive a packet, or for more information about the nominations process, call Mary Janicke at 800.347.6647 ext. 212 or e-mail mjanicke@counseling.org.

Those requesting applications must indicate whether they are applying as a full committee member or a student representative.

**Bipolar Disorder Awareness Day**

Bipolar Disorder Awareness Day was created to increase awareness of bipolar disorder, promote early detection and accurate diagnosis, reduce stigma, and minimize the devastating impact on the 2.3 million Americans presently affected by the disorder. Bipolar Disorder Awareness Day is hosted by the National Alliance for the Mentally Ill, with support from Abbott Laboratories, and will be held on Oct. 7 during Mental Illness Awareness Week.

Bipolar disorder, or manic depression, is a serious brain disorder that causes extreme shifts in mood, energy, and functioning. Due to a high rate of mental illness found among the college population, NAMI urges parents to talk to their children about mental illness before college and maintain an open dialogue throughout young adulthood. This recommendation follows the release of a new study, conducted by NAMI and Abbott Laboratories, which found a high incidence of mental illness among the college-age population yet a lack of education and understanding among both the students and their parents.

For key finding of the survey, visit NAMI’s website at www.nami.org.

**National Family Caregivers Month**

Family caregivers play a vital but often unrecognized role in caring for loved ones who have disabilities or chronic illnesses. That’s why the American Counseling Association encourages members to celebrate National Family Caregivers Month 2004.

National Family Caregivers Month — observed every November — is a nationally recognized month that seeks to draw attention to the many challenges facing family caregivers, advocates for stronger public policy to address family caregiving issues, and raise awareness about community programs that support family caregivers. National Family Caregivers Association leads the efforts of NFC Month and provides resources to communities across the country.

The ongoing theme for NFC Month is “Share the Caring,” but each year, NFCAC focuses on different issues relevant to the family caregiving community.

This year, NFC Month will provide information and education about three timely and important issues, including:
- How public policy affects a family caregiver’s day-to-day life.
- Why a family caregiver’s good health is essential to his or her loved one’s well-being.
- Things family caregivers can do to help keep their loved ones safe.

Contact NFCAC to learn more about how you can support NFCAC during NFC Month, or to add your name to the NFC Month mailing list, call NFCAC at 800.347.6647 or visit its website at www.nfca.org.
Continued from page 0

Finding your way

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openly by stating she had a question for me. Me: again. "Um oh. Do you think I have borderline personality disorder?"

"What do you think?" I responded.

Jill would have nothing to do with this "question to dodge a question" tactic. "No dice," she said. "I want to know what you think." I shared that, at the outset, I'd agreed with the diagnosis. But I'd grown uncertain. Stumbling over my words, I described how my experience of Jill was that she was consistent, self-aware and bright. Jill, I explained, going to decide whose perception, those of Jill or her counselor, were "true." I hadn't been there. At the same time, I wasn't denying those of Jill. Our work together had never suggested that Jill wasn't an honest and forthcoming woman.

Jill refocused me. "I don't really care about all this other stuff. Do you, or do you not, think I have BPD?" "No, I don't." I launched into an apology for any damage my cluelessness might have caused. As I spoke, I was anxious, kept talking without really saying anything new. Jill smiled and said, "It's OK. I'd let you know if I felt insulted. I'm pretty direct. I never agreed with the BPD diagnosis, either."

Jill helped me rediscover my own humility and confront my jaded assumptions. I credit her for guiding me toward greater understanding of my work. She reminded me that the two are intertwined. Clients who are traveling their paths sometimes help me in mine. While my first and foremost responsibility is to my clients, I can humbly accept the "secondary gains" and gifts that may be delivered to me. And, I now know that sometimes, I just need to stop talking and listen. ■

Diversity

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Elisabeth Kubler-Ross

Dr. Elisabeth Kubler-Ross, the Swiss-born psychiatrist whose groundbreaking study of the end stages of life humanized the treatment of the terminally ill and helped to inspire the hospice movement in this country, died of natural causes Aug. 24 in Scottsdale, Ariz. She was 78.

Dr. Kubler-Ross was the author of "On Death and Dying," a 1969 bestseller that illuminated the emotional life of dying patients by identifying five stages of the experience: denial, anger, bargaining, depression and acceptance. The book, which has been translated into more than 25 languages and is still a widely used text, spurred a revolutionary movement within the medical community to lift the taboo on discussions about the dying and infuse their treatment with dignity and affection.

During her five-decade career, she established herself as an expert in the field with more than 20 books, countless lectures and workshops on terminal illness and death. Dr. Kubler-Ross had been in declining health since 1995, when she suffered a series of debilitating strokes. Surrounding by family and friends, she died at an assisted-living center, where she had lived for the last few years. Survivors include her son, Kenneth Ross of Scottsdale; daughter, Barbara Rothweiler of Wausau, Wis.; grandchildren Sylvia and Emma; and sister, Eva Bacher of Reihen, Switzerland.

Editor's note: Counseling Today will feature an in-depth profile on this counseling legend in an upcoming issue. ■
Continued from page 21

...draw the well-meaning therapist into a dance of distraction in which self-injury keeps the atmosphere charged with tension and worry. It's a delicate balancing act to keep professional boundaries, avoid the rescue trap and simultaneously offer comfort and solace.

She recommended that counselors examine adjunct supports, like medication or group therapy for additional support.

Ending the pain

Two former S.A.F.E. patients share their stories of rehabilitation and recovery.

"Laura, 39"

She was only seven the first time she cut. She was only 14 when black men internalized themselves. Her father returned from Vietnam and the family had just moved again. On a warm summer day, Laura found some broken glass and piled it neatly at the foot of a tree. She climbed the tree and then jumped upon the glass shards with her bare feet. She continued to harm herself for the next 21 years.

By the time she reached early adulthood, her self-injuring became very intense. She burned her stomach and chest with oven cleaner, swallowed rusty, metal scrubbing pads and called and that others would find. She would even reopen old wounds and try to infect them by inserting pieces of rusty, metal scrubbing pads into the gashes.

At 29, her therapist convinced her to check into the S.A.F.E. program. Although Laura completed the program and stayed injury-free for almost ten years, she relapsed. Last fall, she went back to S.A.F.E. and gave it another try.

"That time I got real with myself and I did a lot of hard work. I learned who I am," she said. "I now carry hope that people can overcome this. There is help out here that works."

Laura helps spread the word about S.A.F.E. through an internet discussion group she moderates. "I started it because there were a lot of places online you could go, but everything was so triggering and graphic. I didn't find that environment healing. So, I just started my own — with a 'no trigger' policy that I learned from S.A.F.E."

Lader was actually the first member to register with the group and participates in some of the discussions. The massage board promotes healthy coping skills and the techniques used in the S.A.F.E. program.

"Cheri, 34"

At a young age, Cheri began scratching and biting herself. The self-injuring behavior started when she was being sexual abused by a step-relative.

"It was a comfort to me that took me to a place where the emotional pain wasn't. I would hurt myself before, during and after the abuse," she said.

By the time she entered her twenties, Cheri's self-injuring became more life threatening. It was then she.confided in her immediate family about the abuse. Soon after that, she married an emotional and physically abusive man who only fueled her feeling self-hate. During the marriage, she cut herself with knives and razors in secret. The marriage quickly ended and she started counseling, but she continued to harm herself and was too ashamed to tell anyone about her behavior. Finally, after 14 years of counseling and bouncing from one doctor to the next, she found a therapist with whom she felt comfortable enough to share her secret.

"In the beginning of this year, my injurying had become a daily occurrence. It was more excessive and harmful. I was working with a therapist on an outpatient basis, and my injurying was jeopardizing that relationship and that process," she said.

By June, Cheri and her therapist knew that she was in a life-or-death situation. He contacted S.A.F.E. and entered the program in July.

"If I would have continued without getting help, I wouldn't be here today. I was suicidal, but more than anything I just wanted the pain to stop. I was to the point where I couldn't handle the emotional pain and flashbacks anymore, and I need that distraction constantly. I was cutting deeper and more often, and it was becoming very risky, I really didn't know if I could stop."

Once in the program, Cheri had her doubts but she said she was determined to get better.

"At first I thought 'what have I done.' I was so scared that I made a commitment to stop doing the one thing that was getting me through life," she said. "In the first couple of weeks I didn't think I could live without injurying. But, I started to believe that I could survive, could cope, and could use other strategies to deal with this pain. I didn't have to abuse myself."

Cheri said she learned that her self-abuse was actually a way of re-living and re-enacting the abuse she suffered as a child. "At the end of the program, I had a new outlook on life. I had hope for the first time in my life. I believe I can protect myself and love myself, and I did not have to perpetuate the abuse. I don't have to harm myself in order to get through a problem," she said. "I spent a lot of time wanting someone to rescue me. What I realized at the end of the 30 days was that I could take care of me — I could rescue me from the pain that I suffered the majority of my life."

Cheri said that she still has bad days every now and then, but she isn't injured. She nurtures herself, eats well, socializes with friends and focuses on a healthy lifestyle.

"S.A.F.E. helped me see that I was important enough to take care of. It was definitely a life saving, life altering experience for me. I'm not proud that I injured, but I'm proud that I survived."

For more information about the S.A.F.E. treatment program call 1.800.DON'T CUT or visit www.selfinjury.com.

Student Focus

Continued from page 12

African American males that can lead to numerous problems. The most harmful effects occur when black men internalize them, thereby perpetuating the myths ourselves.

I'd been so inundated with information concerning the negative aspects of being African American that I wasn't aware of the effect it had on me. During the first week of classes, I said absolutely nothing. My heart would flutter and I'd break out into a cold sweat, but I couldn't figure out why. It was again my mentor who helped me process the origins of these feelings, reframe them from inadequacy to pride, and recognize that one black male legacy was to struggle yet remain resilient. Insociability in a white society is a part of my heritage, but overcoming it and thriving in any environment is an equally key part. Developing knowledge and awareness of my feelings and their origins has made me more accepting of those feelings, which has been crucial to developing increased self-efficacy. I'm not sure I could have made that step with out guidance from someone who had overcome similar experiences.

The first year in the program was filled with mixed ups and downs. Now that it's over, I take pride in having made the decision to move, having my doubts, making mistakes, learning from those mistakes, sticking with it and excelling. I once had a professor say during a class discussion that they would never want to be black, given the struggles that we have had to endure. That was an interesting comment because I wouldn't want to be anything but black, given those experiences. Knowing the resiliency of countless other African Americans gives me strength to succeed. It took a mentor to help me make those discoveries.

- He encouraged collaboration with other professors, realizing that he couldn't be at my beck and call and that others would meet some needs better than he.
- He told me when I did something particularly well and didn't hesitate to tell me when felt I was underperforming.
- He gave me permission to be aware of my minority status in the program, to embrace it and use it to promote my talents by standing out.
- He taught the importance of producing outside of the classroom (e.g. research, publishing, presentations, service).
- He taught me how to maximize time spent at conferences.

Not enough can be said about the influence this man has had on my success. It has only reinforced my desire to be an African American male counselor educator who gives back as much or more than I received. The values of mentors to graduate students, specifically African American males, cannot be understated. Here are a few things to keep in mind as you seek your own mentor:

- Make sure you seek a mentor as quickly as possible, with whom you can identify.
- A good starting point may be your current adviser or, if you are not comfortable with that person, ask for names of professors who have interests related to yours.
- Look up faculty member websites to find detailed information about their interests.
- To get the most from your adviser, be honest about your true intentions along with your personal and professional questions early in the relationship. Potential mentors need to know what they are getting into just as you do.
- Mentors deserve the chance to convey their levels of comfort and discomfort in discussing certain issues.
- Mentors are busy people, so don't overwhelm them with too much contact. Learn and attend to the mentor's time constraints.
- Mentors may not have all the time in their schedules that you desire, but your initial honesty gives them the opportunity to point you in the direction of those who may be better suited to meet specific needs.

The most important thing to remember is that you do not have to do it alone. There is a mentor somewhere out there, waiting for just the right match to be made with you. 

Melvin S. Henfield is a graduate student at The Ohio State University.
Ecological Counseling: An Innovative Approach to Conceptualizing Person-Environment Interaction


Uri Bronfenbrenner's ecology of human development model reminds me of the little engine that could. At first glance, the model is merely a series of concentric rings, a kind of Russian doll. Yet nearly 30 years since it was first published, Bronfenbrenner's model has achieved pre-eminence across a number of fields and social problems. From bullying to child abuse, Bronfenbrenner's model is used to conceptualize and research various social problems as well as to develop intervention and prevention strategies. As the authors of this edited book point out, each in their own way, the ecological perspective is a good fit for the counseling profession.

Ecological counseling integrates traditional counseling theories that emphasize individual factors with current systems thinking, multilevel perspectives, postmodern approaches and feminist viewpoints. As the editors point out in their introduction, ecological counseling is "both simple and complex" (page viii). Throughout the book, the authors demonstrate that the strength of this model, as it applies to counseling lies, in the way it succinctly brings under one roof so many facets of counseling theory and practice.

The book is organized into two sections, conceptual foundations of ecological counseling and ecological counseling interventions. The book is skewed to emphasize the practical over the theoretical. Each chapter concludes with a set of learning activities that may be useful to individual readers or in a class or workshop setting. Generally, authors make good use of case studies and examples to convey key points. The authors typically write directly and well, even when conveying complex ideas.

Encompassing roughly one-third of the book's length, the first section serves up editors Conyne and Cook's fine introduction to the underlying assumptions and definitions of ecological counseling. The engine driving the counseling version of the ecological model is the view that human life and development are best understood from dynamically integrated multilevel and contextual perspectives. Like the Russian dolls that nest within each other, individuals live in relation to other systems that are in relationship to still other systems. In this way, Bronfenbrenner takes Lewin's notion that behavior is a function of the particular person-environment interaction and extends it to multilevel systems of interaction. A change in any part of this giant set of interrelated systems can lead to a change in another. Through examples and plain English, the authors do an elegant job of explaining the ecological counseling model.

In the next chapter, Herr places the ecological model of counseling in the broadest social settings of American life. Herr's main point is the phrase "life in the United States" (page 37) in a manner masking the multiplicity of ways real people live out their unique version and vision of American life. Furthermore, Herr traces the reach of social transformations, such as those spurred by major economic changes, into the lives of individuals. In doing so, he draws attention to the influence larger forces may have on individual lives, a major tenet of ecological counseling.

Stewart-Sicking, the author of Chapter 3's, addresses some of the conceptual issues raised by the person-environment interaction basis to the ecological model. In this brief but important chapter, Stewart-Sicking suggests that relationships and our interconnectedness with people, places and things are the central organizing principles of this counseling model. In chapter 4, Neufeldt and Nelson bring constructivist and postmodern perspectives to bear on the ecological model, extending the model to include the power inherent in our making sense of things. The final chapter of this section focuses on the process of ecological counseling. Cook, Conyne, Savageau and Tang outline a system for conducting ecological counseling by incorporating traditional and familiar elements such as assessment and goal-setting into an ecological framework.

Warily, the editors devote most of the book to counseling interventions from the ecological perspective. Various authors contribute chapters on psychotherapy, training and supervision, group work, community counseling, community agency administration, organizational consultation, advocacy and social action, and prevention. This array of topics reinforces the notion that the ecological counseling model is well suited to the counseling profession both in theory and practice. Stewart-Sicking's book excerpt from the next chapter is a chapter or even a noteworthy mention of how human development might be integrated into this model.

This edited book is arguably the best-articulated counseling meta-theory since Ivey's "Developmental Therapy" was published nearly 30 years ago. Taken together, these approaches more clearly define a unique terrain for the counseling profession. As the editors note in the preface, one could certainly build a counseling program around the ecological counseling approach. Obviously, this book could be integrated, in part or in total, into a traditional counseling theories course. School counselors and agency counselors working in the field would most likely find the book useful because many of the new approaches in these settings use some form of the ecological model.

Reviewed by James K. Koruca, "Resource Reviews" editor for Counseling Today and an assistant professor at the University of South Dakota.

The State Boys Rebellion


Every few years, a book is published that enlightens some, affirms others and shares a priceless lesson regarding to professional ethics. Two years ago, Martha Stephens wrote "The Treatment," the horrific tale of the Cincinnati Radiation Tests. It was a story that the medical profession could not ignore. This year, Pulitzer Prize winning author Michael D'Antonio delivers an excellent glimpse into another ugly chapter of our nation's past. "The State Boys Rebellion," like "The Treatment," warrants our closest conclusions about the far-reaching impact of the Science Club experiment. These stories spin into two different stories. The first three paragraphs of recent story speaks to our nation's capacity for inhumanity in the pursuit of our self-interests. The second story, the one harder to come by, tells the tale of the resilient human spirit. Both stories make the book worth adding to any reading list for counseling courses dealing with assessment or appraisal as well as courses dealing with professional ethics. Those interested in advocacy and social justice issues may find this resource particularly compelling because it speaks to a string of tragedies within our nation's mental health care system that are finally being told. The story of the State Boys is well-written with the personal voices of pain and resilience merging into a powerful social statement, no doubt stirring strong emotions in many of its readers. The stories of the State Boys stand to become one of the best real world lessons available in print regarding the importance of human rights and the role of school counselors, psychologists and social workers.

Reviewed by W. C. Bridick, an instructor in the Counseling and Human Resource Development Department at South Dakota State University in Brookings, S.D. ■

Resource Reviews are edited by James Koruca, an assistant professor at the University of South Dakota.
New signature project on children's confidence and self-esteem

"Growing Happy and Confident Kids" — now that is a concept that counselors can get behind. Children who are comfortable with themselves and with others; kids who believe in their ability to succeed in life.

As chair of the American Counseling Association Foundation, I am honored and pleased to announce the Foundation’s new signature project, “Growing Happy and Confident Kids.” Beginning this fall, certified professional counselors working in elementary schools may apply for a “Growing Happy and Confident Kids” award. If selected, the counselor’s school will have the opportunity to choose 10 books from among 30 outstanding examples of children’s literature. Each book is engaging and enjoyable for children and also conveys messages of self-esteem, self-efficacy and appreciation and understanding of others.

The Foundation is grateful to the professional school counselors and educators who assisted the Foundation in selecting the books for the “Growing Happy and Confident Kids” program. Examples of the selections include “The Recess Queen” by Alexis O’Neill and “The Tower” by Richard Paul Evans. As an aide to incorporating the books into each counselor’s plans and to ensure full use of the counseling themes, a guide accompanies the books with suggestions for conducting group discussion about the reading list.

Through “Growing Happy and Confident Kids,” the ACA Foundation is making reading fun for children and enhancing the tools available to counselors who work in schools.

The number of children reached through “Growing Happy and Confident Kids” ultimately is dependent on the amount of financial support generated for the project. However, during this school year, the Foundation purposely is limiting the number of participating schools so that the project can be evaluated before full implementation. During this year, the Foundation is introducing and testing the project while raising the funds necessary to fine-tune and offer the project much more widely next year.

During the past several months, when the Foundation trustees were discussing various options for a signature project, we looked for something that would resonate with donors beyond the American Counseling Association. While we hope that ACA members will respond generously to the “Growing Happy and Confident Kids” project, we are preparing to solicit donors beyond ACA in hopes that, together, we can all make a difference to the lives of people who have been affected by the disaster.

Only individuals licensed for unsupervised practice are eligible to join Red Cross DMH. Individuals who are licensed for practice under supervision are not eligible. It is necessary for the mental health professional to bring a copy of their license to the chapter and to the operation site.”

To find a local Red Cross chapter, go to www.redcross.org.

From the front lines

Diane Durante, mental health professional in Naples, Fla., traveled an hour and a half away to volunteer in Charlotte County at a Red Cross service area.

“When I drove up I couldn’t believe the devastation — it went on for miles and miles. It looked like a war zone,” she said.

Durante was one of the only “local” volunteer counselors at the center, the others were from out of state and as far away as California and Utah. She said that the mental health counselors wore large paper clips on their badges to designate themselves from the rest of the volunteers. “We were there to help people hold it together. Our job was to wander around and make sure the staff was okay as well as the people were waiting.”

When a family arrived at the service area they were given a number and waited — usually for hours at a time — to see a case manager. “People were so amazingly patient and kind to each other, to the service managers and to the volunteers — they were so grateful. The amount of appreciation they showed for such a simple thing as kindness — just sitting there and talking to them — was overwhelming.”

At one point during her shift, an EMS worker came in and asked what he could do to help. So she began explaining the process of how people come in and then wait to see a caseworker. “I said that sometime it could be a long wait but the people are wonderful about it. I asked him why did he want to know? And, he said to me, ‘I lost everything. I guess I need to be here too.’” She said. “It was that kind of thing that you really felt for. Here are these people wanting to help, and yet they have lost everything as well.”

David Weir, a licensed mental health counselor in Tampa, Fla., said he’s seeing some of his clients come in a bit depressed or fatigued since the storms. “I’ve been normalizing their feelings. This is a normal part of the grief response. All of us have lost some of our comfortable patterns in our lives due to the storms,” he said.

In order to pass the time in a power outage during Hurricane Frances, Weir made a list of all the things for which he was grateful. It allowed him to put things in perspective, and he suggested that exercise to his clients in the days after the storm.

Maria O’Toole is a licensed mental health counselor and school counselor in Hillsborough County, Fla.
The Awards Committee of the American Counseling Association announces the opening of the nomination process for the 2005 ACA National Awards. The call for nominations was presented at the ACA Annual Convention in Atlanta in April 2005.

Any ACA member can submit a nomination for one or more ACA members who have made a noteworthy contribution to the counseling profession at the local or state level. ACA divisions, organizational affiliates, branches, chapters, regions or committees can also submit nominations. All nominations must be postmarked or received electronically by Nov. 10.

Complete information is available on the ACA website at www.counseling.org under "Resources," or you may request a 2005 National Awards Packet by calling ACA Member Services at 800.347.6647 ext. 222. Nominations may also be submitted by mail to ACA 2005 National Awards, c/o Janice Macdonald, 5999 Stevenson Ave., Alexandria, VA 22304-3300.

The following are the categories of the 2005 ACA National Awards. Consider offering the name of a colleague, instructor, student or friend whose work and achievements are deserving of such national, professional recognition.

- **Gilbert and Kathleen Wheen Award for a Humanitarian and Caring Person** honors an ACA member who gives to others without futility or expectation of reward other than the personal satisfaction of seeing other people made happier.

- **Kitty Cole Human Rights Award** honors an ACA member who has made significant contributions to promoting human rights.

- **Arthur A. Hitchcock Distinguished Professional Service Award** honors service by an ACA member at the local, state or national level to promote or enhance the well-being of the counseling profession.

- **David K. Brooks Jr. Distinguished Mentor Award**, presented by the ACA Foundation, recognizes the invaluable influence of a professional mentor and salutes the ACA member whose actions adhere to this special type of teaching that David Brooks supported and lived throughout his career.

- **ACA Professional Development Award** recognizes an ACA member who has developed techniques and systems that have strengthened, expanded, enhanced or improved the counseling profession and benefited counseling consumers.

- **ACA Extended Research Award** recognizes an ACA member who has conducted high-quality research on issues of significance to the counseling profession throughout the course of at least 10 years.

- **ACA Research Award** honors an ACA member for an outstanding research project that was published between Sept. 1, 2003, and Aug. 31, 2004. Don Dinmeyer Special Interest Award recognizes an individual who, or organization that, has made a significant contribution to families ($1,100 honorarium).

- **Courtland C. Lee Multicultural Excellence Scholarship Award** is presented to a graduate student in counselor education whose dedication and academic work demonstrate excellence in the theory and practice of multicultural, counseling ($2,500 honorarium).

- **Hitchcock Distinction Counseling Materials Award** provides a $300 grant to support research in the area of college student affairs or related areas of counseling and education.

- **Glen E. Riddle National Graduate Student Award** recognizes outstanding scholarship by an ACA student member.

- **Carl D. Perkins Government Relations Award** honors an ACA member who has made a significant contribution to the counseling profession by influencing public policy at the state or national level.

- **ACA Federal Legislative Service Award** recognizes a legislator or other public official whose efforts to influence public policy have made a significant contribution to the counseling profession.

- **ACA Local, Branch and Regional Award** recognizes local, branch and regional counseling associations celebrating their 25th, 50th or 75th anniversaries.

- **Fellow Awards** are given to an ACA member of professional distinction who has been recognized for significant and unique contributions in professional practice, scientific achievement and teaching.

The call for papers for the 2005 conference will be held in Atlanta this coming April. The theme will focus on the role of creativity in counseling and the collective hopes for what this new division may bring. In conjunction with the forum, ACC will also host a reception to celebrate its launching.

The revised call for papers for the 2006 conference will be held in Las Vegas in early May. The theme will focus on the role of creativity in counseling and the collective hopes for what this new division may bring. In conjunction with the forum, ACC will also host a reception to celebrate its launching.

The new organization is planning their conference in 2006. It will partner with the University of Texas-San Antonio and Texas State University-San Marcos in presenting: "The Dr. Lesley Jones Creativity in Psychotherapy Conference," to be held on Feb. 12 in San Marcos. Two pre-conference institutes will be held the day before and will highlight two professionals well-known to the mental health field: Ed Jacobs, director of Impact Therapies, and Amy Banks, Stone Center scholar and faculty at Harvard Medical School.

The conference theme will be creativity and diversity: Facilitating Growth-Posters: Connecting in a Diverse Society. A variety of creative media — such as poetry, photography and creative writing — will be used to examine ways for generating empathy and deepened connections with others. Visit www.aca-acc.org or for more information on ACC or to register online.

ACC is also launching the Journal of Creativity in Mental Health, published by the Haworth Press. The call for papers for JCMH can also be found on ACC's website (www.aca-acc.org) or send queries to teddyhold@acu.edu. See the website for membership dues and to obtain an application.
UPS to include licensed counselors

ACA leader advocated for major policy change

BY SCOTT BARSTOW
FOR COUNSELING TODAY

Beginning in January 2005, thousands of employees of the United Parcel Service of America, Inc., will be able to see licensed Professional Counselors for mental health services. After months of lobbying by Bob Walsh, the American Counseling Association's immediate past Public Policy and Legislation Committee chair, UPS has renegotiated health benefits coverage contracts for roughly half of its unionized employees to include counselors' services. Previously, the UPS health benefits package that is provided to employees who belong to a union covered only physicians, psychologists and clinical social workers. Other health plans for non-unionized employees already covered counselors.

In negotiating with UPS, Walsh represented ACA and the Illinois Mental Health Counselors Association's Employment, Managed Care and Insurance Task Force, which he currently chairs. The change in policy is a significant step forward for counselors and is a remarkable success in our efforts to increase recognition of counselors and improve their ability to compete on an equal footing with other mental health professionals.

Walsh began working to convince UPS to change its coverage policy after hearing from an Illinois counselor who was refused coverage for seeing a UPS employee. Following the IMHCA Employment, Managed Care and Insurance Task Force’s playbook in responding to such situations, Walsh approached UPS staff to educate them on the qualifications and cost-effectiveness of LPCs.

Walsh and other Illinois counselors developed the organization’s set of action steps for responding to such situations several years ago. The Task Force quickly generates letters for clients, the state counseling organization and the counselor involved to send to the health plan and the client’s employer, to be followed up, if necessary, with face-to-face meetings with health benefits managers and managed care staff. This work has resulted in almost all Illinois-based health plans and large employers covering counselors’ services. IMHCA has gone even further by establishing a database for counselors of managed care organization practices, including their client referral practices, payment rates, timeliness of payments and administrative paperwork requirements in their state. This database has empowered counselors within the state in dealing with managed care plans.

The IMHCA initiative started in the early 1990s by a small group of counselors who had been turned away from managed care panels. "We decided several years ago that managed care companies weren’t going to manage us but that we were going to manage ourselves," Walsh said. "Not only are we on almost all the panels, but we also give information about how counselor-friendly each of them are. We think this results in a win-win-win situation: a win for the counselor, a win for the client and a win for the managed care company." For more information about working with managed care plans, responding to health plan changes and doing provider status issues, contact him at walshg@acal.com.

Walsh’s initial contacts were devoted to finding the appropriate decision-makers on provider coverage issues within UPS. After this was accomplished and the case for counselor coverage was presented, UPS staff expressed concern that there were different requirements for licensure for counselors in various states. Walsh and ACA Director of Public Policy and Legislation Scott Barstow responded by providing more detailed information regarding counselor licensure requirements across the country. In addition, they approached UPS with the idea of adopting the mental health professional coverage policies of Value Options, the managed behavioral health care organization providing a large portion of the mental health services to UPS employees.

Value Options requires the professional counselors it certifies to meet criteria beyond attaining licensure, such as having at least three years of post-licensure clinical experience providing direct patient care. This same experience requirement is made of its marriage and family therapists and clinical social workers. UPS agreed to this proposal and will cover services provided by state-licensed professional counselors who are current Value Options providers or who apply and are accepted as Value Options providers.

The change does not affect UPS employees who are members of a union, and who receive health benefits directly through that union. Value Options is one of the nation’s largest managed care companies, providing behavioral health services to more than 24 million people in 15 states. Applications for enrollment as a Value Options provider are available on the Internet at www.valueoptions.com/provider/providers.htm or by calling 800-535-0108. High Crethere, current co-chair of the ACA Public Policy and Legislation Committee and a fellow Illinois counselor, said "This is the kind of concrete work in getting the profession recognized that makes ACA such a vital organization. Bob’s done great work, and his success shows the impact that dedicated counseling leaders can have when they put their minds to making a difference."

Dana Couch-Davis, the PP&L Committee’s other co-chair, seconded this idea. "Counselor advocacy for themselves and their clients is an important thing that we must be doing. It isn’t always quick or easy, but it’s the only way we’re going to get results like this."

Scott Barstow is ACA’s director of public policy and legislation.
Division News

ACCA making plans for the future

Submitted by Mark Freeman
mark.s.freeman@rlllins.edu
The American College Counseling Association's Executive Council met in July at Rollins College in Winter Park, Fla. We had a productive three days and are moving ACCA ahead in many unique ways. The board is very strong this year and identified the values of trust and respect, communication and listening, accountability, common goals, and commitment and dedication as the cornerstone of our foundation in promoting the mission of ACCA. We thank Rollins College for providing us free housing this summer, saving the membership approximately $1,400 in expenses for accommodations. The team-building experience set the tone for another great year, and we would like to share some of the actions we are taking on your behalf as members this year.

We are setting up the ACCA archives at Bowling Green State University, which will enable members to access vital information about our association in a centralized setting with archival expertise.

We are developing two online continuing education courses (suicide prevention and test anxiety), which will be offered at $10 per contact hour for members and $15 for non-members. Both courses will provide three contact hours each.

We voted to sponsor the Counseling Center Directors' survey, a valuable resource for college counselors. Our logo will appear in a prominent place in the publication.

We have allocated $5,000 for funded research on the role of college counseling in student retention.

We created a purpose and mission for two new standing committees, Corporate Sponsorship and Continuing Education. This will provide these committees and their chairs an opportunity to move forward on important objectives for our membership.

We voted to begin a mutually beneficial business relationship with the Healthcare Providers Service Organization, the primary insurance provider for American Counseling Association members. They will sponsor us in ways to be determined by the Corporate Sponsorship Committee.

We are piloting our first regional drive-in workshop. We will be sending Karen Humphrey, our grief counseling expert, to Louisiana to present a one-day workshop for college counselors next spring. This initiative will help get our best scholars and presenters into regions of the country where college counselors can attend and promote continuing education credits at a nominal fee.

Harrison Davis has agreed to be our on-site conference chair for the ACA convention in Atlanta in April. We have filled all of our sponsored education sessions with some of our best programs from last year's ACCA conference.

Our membership committee will conduct a membership drive and continue to clean up discrepancies in our membership roster with ACA. Joyce Thomas and Shannon Andrews will be responsible for that initiative.

Paul Fornell and Sylvia Shortt are our conference coordinators for our next conference in Reno in October 2006. We look forward to their wise counsel in leading us in this endeavor.

We have added three stipends for the ACA convention and two stipends for the next ACCA conference for new professionals.

We are expanding Visions, our newsletter, and have added the position of associate editor.

ARCA seeking nominations for awards

Submitted by Betty Hedgeman
bhedgema@nychp.cc
The American Rehabilitation Counseling Association has the following announcement for awards.

Call for nominations: ARCA Research Award

Nominations are being sought for the 2005 ARCA Research Award, which recognizes and honors high-quality empirical research in the field of rehabilitation counseling. Research published in the 2004 calendar year or in publications that were not available prior to last year's call for nominations (Jan. 23, 2004) will be considered.

Send nominations by Jan. 14 to David B. Peterson, Associate Professor, The Institute of Psychology, Illinois Institute of Technology, 3101 S. Dearborn St., Suite 252/LS, Chicago, IL, 60616-3793. Call 312.567.3509, fax to 312.567.3493 or e-mail peterson@iit.edu.

Call for nominations: James F. Garrett Award for a Distinguished Career in Rehabilitation Research

Nominations are being sought for the 2005 James F. Garrett Award for a Distinguished Career in Rehabilitation Research, which recognizes excellence in research contributions throughout one's career. The nominees may or may not be retired in order to qualify. Nominees' published research should span at least 15 years and focus on rehabilitation counseling.

Please send nominations by Jan. 14 to David B. Peterson, Associate Professor, The Institute of Psychology, Illinois Institute of Technology, 3101 S. Dearborn St., Suite 252/LS, Chicago, IL, 60616-3793. Call 312.567.3509, fax to 312.567.3493 or e-mail peterson@iit.edu.

Call for CRCC rep

ARCA invites interested members to submit a resume or CV in nomination for the position of Representative to CRCC. The five year term begins July 1, 2005. You must be an ARCA member and a Certified Rehabilitation Counselor to apply. Additional details were given in the September issue of Counseling Today. Contact Betty Hedgeman if you require additional information at bhedgema@nychp.cc.

ARCA in Atlanta

Please plan to attend the ACA convention in Atlanta in April 2005. The program committee has selected an excellent program and invites you to participate. ARCA also has planned to have a booth on rehabilitation counseling in the exhibit area. Immediate ACA Past-President Mark Pope is ARCA's Luncheon Speaker on April 8. This will be an excellent opportunity to network.

Board Meeting reminder

ARCA's Mid-Year Board Meeting is scheduled for Saturday, Oct. 23 at the Washington Marriott. Any questions or issues for the agenda should be sent to Betty Hedgeman at bhedgema@nychp.cc.

IAAOC fostering ongoing member enrichment

Submitted by Kelly M. Burch-Ragan
kelly.burch-ragan@wku.edu
The spirit of scholarship and research are alive and growing throughout the Division of the International Association of Addictions and Offender Counselors. IAAOC values and supports effective counseling strategies, creative knowledge expansion and applied research designed to enhance optimal services for persons impacted by addictions and offender behaviors. IAAOC has steadily planned and implemented strategies that make the aforementioned statement a reality.

In previous years, IAAOC recognized various professionals and endeavors that have distinguished themselves within the profession. These include IAAOC's Journal of Addictions and Offender Counseling Exemplary Research Award, Outstanding Program Award, and Professional Outstanding Addictions and Offender Counseling Educator Award. IAAOC plans to continue honoring these notable persons, programs, and activities.

IAAOC is extremely pleased to be able to offer several new awards, grants and scholarships in the 2004-05 fiscal year. These include:

Graduate Student Awards
- Research Grant Competition
- Student Essay Award
- Three scholarships to support graduate student attendance at the 2005 ACA convention

Professional/Regular Members
- Support for innovative research — grant competition
- Support training initiatives

Detailed information about these awards will be available at the new IAAOC website, www.iaaoc.org. IAAOC members are encouraged to take advantage of these opportunities to enrich the teaching/learning process and to contribute to the advancement of our specialized counseling field.

I close this division update with a request from our membership and those interested in joining or learning more about our organization. Please make sure that IAAOC has your current contact information, including your email address, snail mail address, and phone number. IAAOC wants to ensure that all of our members receive timely updates and cutting-edge information in a consistent, efficient and effective manner. Information regarding how the privacy of your information is protected on IAAOC's new website; please review this document if you have any concerns. Send contact information directly to IAAOC Membership Chair Ford Brooks at cbwbroo@ark.ship.edu. If you have additional questions, contact your president at kelly.burch-ragan@wku.edu.

NECA 2005 call for awards

Submitted by Kay Brawley
kbrawley@nuniidspring.com
Any National Employment Counseling Association member may make nominations for awards by sending a statement, no more than 300 words in length, supporting the nomination and documenting the professional service efforts of the nominee to Myrna Webb, the chairperson of the NECA Awards Committee.

A unique feature of the NECA Awards project is the Practitioner Award. This award is designated to recognize an outstanding practitioner from the local area in which the annual NECA professional development workshop is being held. The workshop will be in Atlanta April 6-7, just prior to the ACA convention.

Other NECA awards are as follows:

Distinguished Professional Service Award: recognizes outstanding service at the local, state or national level that...
Who will be your next ACA president-elect?

Meet the five contenders for FY 2006-'07 presidency

In an effort to bring American Counseling Association members the most complete information possible about ACA presidential candidates, Counseling Today is pleased to introduce you to the five individuals who are running for this prestigious leadership position.

Each candidate was asked to provide information for four questions: this month, two of these questions are showcased. See the November 2004 issue for their answers to the other two questions.

Complete candidate information for ACA candidates — including their biographies and goals statements — as well as for those participating in elections for divisions, organizational affiliates and regions will be featured in the December 2004 issue of CT.

Editor’s note: the following information is printed as it was submitted from each candidate. CT has edited only for spelling and style errors. They are listed in random order.

Candidate questions

Q: What do you perceive as the external challenges to the counseling profession at this time and how can ACA best address those challenges?

A: ACA exists within a dynamic society and world. The first challenge to be faced is for ACA to adopt a strategy of continuous scanning — intentionally looking outward (and inward) for opportunities and threats. The second important concept is that not all challenges are negative, and they often represent areas for growth and opportunity. With those background comments, the external challenges facing ACA are political, economic, and perceptual. Perceptions are always with us — we must develop comprehensive strategies to inform and educate those in other professions, elected officials and the general public about what counseling is and about its value for the real lives of people. Political challenges exist within our work sites and among sister professions. For instance, our "Healthy Schools and Families" prevention grant in Cincinnati is always challenged by the fact that there are no elementary counselors in the public schools here and by negative effects of the "No Child Left Behind" legislation. Sister professions, such as social work and psychology, also are becoming more involved in schools, generating professional turf issues. At the economic level, ACA is confronting membership issues as well as how to educate and persuade legislators about the value of counseling.

Kay T. Brawley

Candidate questions

Q: What do you perceive as the external challenges to the counseling profession at this time and how can ACA best address those challenges?

A: ACA must counter pressures to reduce services from increasing costs by re-engineering the professional counseling association with sound business practices. While this has been happening almost everywhere in the private sector, public agencies and non-profit organizations have been reluctant to take the strong leadership necessary to initiate change. In an era of declining memberships, which means declining revenues, it is vital to prioritize programs and costs and make sure every dollar in the budget is going for a purpose vital to the effectiveness and growth of the organization and its profession.

One of the most important things a professional organization like ACA can do is to strongly represent the profession in the legislative and public policy arena, where challenges from other organizations and groups are a constant fact of life. ACA's efforts have been strong to date, but initiatives to partner with organizations with similar needs and interests to strengthen the impact on elected officials and administration groups is essential, not only to protect existing programs, but also to create and help design new ones.

Marie A. Wakefield

Candidate questions

Q: One aspect of ACA's mission involves "using the profession and practice of counseling to promote respect for human dignity and diversity." What ideas do you have about strategies for carrying out this charge?

A: As architects of human relations, the blueprint of ACA includes the course of action to advocate for respect of human
Continued from page 39

dignity and diversity. As counseling professionals, our attitude must be calibrated to understanding issues that defy social injustices. A goal indicative to the profession is to embrace practices that masterfully meet the needs of all groups of people. Change begins with recognizing and challenging policies that inhibit success, and accessing resources that will mobilize effective action.

ACA's mission to use the profession and practice of counseling to promote respect for human dignity and diversity enables a proactive paradigm to build a bridge of acceptance, openness, and compassion. Action steps include:

- Committed to updating online resources for special populations (including prison inmates and the aging) and ensuring that counselors are skilled to teach clients the art of self-advocacy.
- Encouraging regions, divisions, and branches to embrace the tenets of the Multicultural Competencies as a preventive measure.
- Inviting influential legislators of diverse backgrounds to attend an activity during the ACA national convention to establish a dialogue of the profession's challenges, successes and projects and to build the foundation for a strong negotiation base.
- Leading by example.

Q: What do you perceive as the external challenges to the counseling profession at this time and how can ACA best address those challenges?

A: The counseling profession has been faced with major dilemmas that plague the existence of employment opportunities, services rendered, and the broad spectrum of skills needed to meet diverse mental health issues. External challenges include the loss of connection between people, as the Internet has become an alternative source for interaction/interaction with people, as the Internet exists as a bridge of acceptance, openness and respect for human dignity and diversity.

Candidate questions

Q: One aspect of ACA's mission involves "using the profession and practice of counseling to promote respect for human dignity and diversity." What do you perceive as the external challenges to the counseling profession at this time and how can ACA best address those challenges?

A: Counselors are being asked to do more with less. Less stuff, less professional development provided by the work site, less financial support to pay for professional dues, less support of release time for professional development, etc. all demanding that the individual counselor find the means within personal budgets and time to keep up with the growing demands of client needs. Counselors are often required to do "more" with "less" time. Counselors juggle these demands with the demands of family and life beyond the office.

ACA can assist our members by continuing to explore venues for professional development that utilize today's technology and the expertise within our regions: Web-based programs, teleconferences, regional programming and collaboration with local colleges/universities. This collaboration includes working with the leadership of our divisions, regions and branches to do more (not with less but) with energies that already exist among us.

Q: What do you perceive as external challenges to the counseling profession at this time and how can ACA best address those challenges?

A: Many external factors impede our profession. obvious ones include market competition with other groups (e.g., social workers), using the profession and the evolving tragedy of managed care, which undercompensates or excludes counselors altogether. Our legislative lobbying efforts should be increased to address these critical issues.

However, I don't believe that the major challenges facing our profession are external — I believe they are internal. In recent years, some within our association have attempted to define counseling as a monolithic profession with a singular identity. In my opinion, such efforts, while perhaps well-intentioned, are wrong-minded. While all counselors share a similar philosophical foundation, increasingly, the counseling profession is a heterogeneous mix of often-disparate groups. ACA can play a key role in moving the counseling profession forward by accepting the reality that all counselors are not alike and engaging our diverse member groups in a dialogue based on areas of common interests and needs. One size does not fit all, and ACA can best serve our professional interests by serving as a true umbrella organization and common voice for all counselors.
'Branching' out:

Task force aims to reinvigorate ACA branches, grow leaders within states and regions

BY LINDA OSBORNE
FOR COUNSELING TODAY

The American Counseling Association's Branch Development Task Force just entered its third year of existence. Momentum continues to build, and the Task Force members are diligent in their efforts to continue the growth, expansion and, in some cases, revitalization of the branches. The main objective of this Task Force is to assist the branches in whatever ways are possible. The Task Force members are committed to promoting leadership and participation, with the branches offering as many opportunities for growth in the profession as possible.

The first year of the Task Force focused on brainstorming about the initiatives that could plausibly be implemented. The inclusion of a branch/region pamphlet in the ACA "New Member" packet of information was initiated and has now become a reality. The pamphlet offers information about the benefits of branch membership and participation as well as contact information for new and potential members to explore.

A branch mentoring booklet was assembled and distributed at the first Joint Region Leadership Training Academy. This booklet highlighted the successful programs of different branches and key-person contact information for mentoring branches that might wish to incorporate some of these programs in their respective branches. This is to be an ongoing effort, with the possible use of the ACA website to continue disseminating news about branch initiatives.

Outreach to counselor educators for continued support and encouragement in branch participation was accomplished through several avenues. Emails were sent from the Task Force, and flyers were distributed at the Association for Counselor Education and Supervision's luncheon at the ACA Annual Convention held earlier this year in Kansas City, MO. Also in Kansas City, the importance of branch participation was highlighted by addresses at the First-Timers' Luncheon, and Task Force members shared their mission and initiatives in the on-site Graduate Student Lounge. The Branch Executive Directors' meeting in Kansas City also highlighted the work and goals of the Task Force and generated ideas for areas of focus for the Task Force. A member of the Task Force, allowing time for information-sharing and idea-gathering, addressed each Region Business Meeting.

In Kansas City, the Task Force members met twice — first to review their accomplishments to date and correlate the information to be disseminated to the branches through the region meetings. A vital issue presented at the region meetings was the encouragement for branches to include a column in their newsletters highlighting ACA's accomplishments and involvements to keep branch members apprised of the ongoing efforts and outreach of our parent organization.

The second meeting focused on feedback from the region meetings and the design of a Strategic Plan to solidify our goals and justify our existence. The Strategic Plan goals include promoting information-sharing and mentoring at the region and branch levels, promoting partnerships and assistance in several areas between ACA and its regions and ensuring and promoting the viability of state branches.

Initiatives begun for our third year include an exciting pilot program in the Midwest Region that encourages inter-branch collaboration. This program supports sending branch and region leaders to various branches, either to assist in an area of weakness within a branch or to assist a branch in expanding its member benefits in new areas. The Midwest Region, which is funding this project, will also support travel expenses for these endeavors. Those mentors who have successfully mastered a problem-solving area will assist in their areas of expertise. This is an exciting endeavor because mentoring each other as branches not only encourages and promotes branch development in outreach ways, but it also develops a climate of cooperation and collaboration, the foundation for cohesiveness.

The Branch Development Task Force, in the upcoming year, will seek to promote:

- Inclusion of leadership training at state conferences.
- Attendance at the Branch Board Meetings of past ACA, region or branch leaders. A poll will be taken of past/present ACA leaders regarding donation of time to visit board members or willingness to volunteer to present keynote speeches at various branch functions.
- Invitation and encouragement of counselor educators to be included on the branch Executive Boards.
- Continued and expanded support from colleges and universities in various forms and for the branch(es), in return, to offer summer scholarships for graduate students to apply toward taking classes.
- Encouragement of tier registration for state conferences: member, member/cofounding and non-member.

Because the Task Force does not have financial support from ACA in its current budget, suggestions were made that regions/branches seek ways to support initiatives like the Midwest Region's pilot program. Fundraisers, silent auctions, raffles or exhibitor fees were suggested as possible sources of revenue for supporting travel expenses.

This Task Force has an engaging, dedicated group of people as members. Their time and efforts are another contribution of themselves to promote the counseling profession and, consequently, the population in need of counseling services, through the outreach of a strong professional organization.

It has been an honor to be chair of the Task Force for the past two years, and I look forward to membership on the Task Force under the leadership of the present co-chairs, Kelly Duncan and Jean Underfer-Babalis.

Linda Osborne is the past-chair of the Branch Development Task Force.

Division News

Continued from page 38

Reflects a significant contribution to the professional concerns of NECA.

NECA Research Award: to honor and recognize outstanding research in the field of employment counseling and to stimulate further research. "Research" is defined as an empirical, systematic inquiry or investigation into a subject to discover facts or principles, involving a hypothesis to be tested, examination of data and interpretation of results. Research may be published or unpublished but must have been conducted within the last two years. The summary should include the purpose of the research, hypothesis, description of procedures, interpretation of data, relevance and importance of findings.

NECA Professional Development Award: to recognize outstanding professional development and/or introduction of innovative practices in employment counseling. "Innovative" is defined as introduction of something new — an idea, method or device. "Practice" means actual performance of application.

NECA State Division Awards to recognize the state employment counseling organization affiliated with NECA that has demonstrated the most accomplishments through activities, program, political leadership and growth.

The nominees must currently be a member of NECA, with outstanding service to promote the profession, and contributions that have had a widespread impact on greater than immediate work setting or geographical location. The history of accomplishments must benefit the general public.

Please send nomination documentation to Myna Webb at 3022 Pleasant Drive, Endwell, NY 13760 by the Dec. 1 deadline. Additional details may be found on the NECA website at www.employmentcounseling.org.
CALIFORNIA

psychotherapists
convert your advanced degree and clinical experience into a gratifying and profitable career shift. the business world is a very
playground for a re-tread psychotherapist turned consultant. find out why and find out why our firm has the most comprehensive and sophisticated training process, designed solely for professionals with your credentials. we've written the book (13 of them, actually) on executive coaching, leadership development, derailment prevention, and the nuts and bolts of what's important. find out why and find out why our job is not just a job, but a gratifying and profitable career opportunity! get certified: smoking cessation is big business for mental health professionals! get certified as a tobacco cessation specialist (ctcs) and earn approvedceu's at the same time! www.counselingceu.com

florida

university of florida

the rehabilitation counseling department seeks a chair to lead faculty in maintaining excellence in its degree programs, building a strong research program, and shaping a clinical service program, and the successful candidate will possess a strong record of research and scholarship. the position requires prior faculty experience and sufficient qualifications for appointment at the level of associate or full professor. the successful candidate must possess a doctoral degree in rehabilitation counseling or a closely related area, and be a
NEW YORK

ALBERT ELLIS INSTITUTE
Summer Fellowships in Rational Emotive Behavior Therapy and CBT for Full-Time University Faculty: A limited number of 3 week fellowships for university and college faculty in psychology, psychiatry, counseling or social work are being offered at the Albert Ellis Institute in July 2005. The program will feature intensive practice in REBT, direct supervision of therapy sessions, special seminars, and the opportunity to co-lead a therapy group with Dr. Albert Ellis and other faculty. Send statement of objectives for your participation along with a vita to Dr. Kristene Doyle, Albert Ellis Institute, 45 East 65th St., New York, NY 10021; or fax at 212-249-3582; or e-mail at kriskdoyle@albertellis.org. Proficiency in English is required. Stipend provided. Deadline is March 15, 2005.

PLATTSBURGH STATE UNIVERSITY OF NEW YORK
Assistant Professor, Counselor Education. Responsibilities: Teach core courses in CACREP accredited graduate programs and cooperate with other academic departments; and have the research background to supervise dissertations with quantitative and/or qualitative methodology. Professional counseling experience is expected. Review of applications will begin on October 26, 2004 and continue until position is filled. Send letter of application, resume, and three letters of reference to: Chairperson, Search Committee (PJ # 4483-CT), Plattsburgh State Human Resource Services, 101 Broad Street, Plattsburgh, NY 12001. Fax 518-564-5000 hr.apply@plattsburgh.edu

UNIVERSITY OF ROCHESTER
COUNSELOR EDUCATION, OPEN RANK. Full-time, tenure track position, beginning Fall 2005. CACREP-accredited Masters programs in School and Community Counseling and doctoral programs in Counselor Education. Applicants should possess doctorate (or complete doctorate by start date) in Counselor Education, Counseling or closely related field; preferably have experience as student and/or faculty in a CACREP-accredited institution; provide evidence regarding excellence or potential for excellence in teaching, scholarly publication, leadership and professional service; and have the research background to supervise dissertations with quantitative and/or qualitative methodology. Professional counseling experience is expected. Review of applications will begin on October 26, 2004 and continue until position is filled. For application information and further information on the Counseling Program, Warner Graduate School of Education and Human Development, University of Rochester, visit our web site: www.rochester.edu/warner/facultysearches.

NORTH DAKOTA

UNIVERSITY OF NORTH DAKOTA
TENURE-TRACK ASSISTANT OR ASSOCIATE PROFESSOR (POSITION OPEN) in APA-accredited Counseling Psycholo-

ogy Ph.D. and Counseling MA program to start January or August, 2005. Graduate teaching responsibilities are flexible and may include couples and family and psychology of gender. An active program of research consistent with rank and role is required. Ph.D. in Counseling Psychology required. Send letter of application, vita, and three letters of reference to: chair, Committee on Search, Mgr. 12901, Department of Counseling, College of Volitional Resources, Box 5060, Dept. 101, University of North Dakota, Grand Forks, ND 58202-5060.
OHIO

The University of Akron

Doctoral Positions/Assistantships Available. The University of Akron's Department of Counseling is seeking doctoral students to fill positions in its Ph.D. programs. New students will enjoy a $3000 monthly stipend, access to counseling, including wireless and technologically advanced buildings which complement a state-of-the-art training clinic housed within the Department. Tuition waivers and annual university stipends of $10,500 are available. Program goals, faculty research questions, and online application forms can be found at: http://www.uakron.edu/colleges/edcu/Co

Pennsylvania

The Pennsylvania State University

Position Available (Fall 2005): The Counselor Education Program at Penn State seeks applicants for a faculty position (Assistant/Associate Professor) in the College Student Affairs Program Area (College Counseling, Emphasis). This is a tenure-track, 36-week appointment with the possibility of supplemental summer appointments in research and/or teaching. The College Student Affairs Program is a collaborative master's degree program between the Counseling, College Counseling, and College Counseling and Graduate Programs at Penn State. We encourage applications from individuals of diverse backgrounds. Required Qualifications: Earned doctorate in Counselor Education or a related area. Professional experience in college student affairs. Demonstrated ability to work with diverse groups of students, faculty and administrators. The ability to be a leader in the development and continuing operation of the College Counseling Program. Familiarity with CACREP-accredited programs. Application Procedures: Submit a letter of application, current curriculum vitae, copies of graduate transcripts (where appropriate); up to three representative reprints or preprints of scholarly publications; three academic reference letters; and names, mail and email addresses, and telephone numbers of the academic referees. Applications received by October 15, 2004 are assured full consideration; however, applications will be received until the position is filled. Send all materials to: Spencer G. Niles, Chair, College Student Affairs Search, 327 CEDAR Building, Box DC, University Park, PA 16802-3110. Penn State is committed to affirmative action, equal opportunity and the diversity of its workforce.

South Carolina

Clemson University Faculty Position in Counseling

Clemson University is a land-grant institution located in Clemson, SC, halfway between Atlanta, GA and Charlotte, NC. It is one of South Carolina's three research institutions. The Counseling Program, in the Eugene T. Moore School of Education, has a student enrollment of 200 and provides training in a three concentrations: community counseling, elementary and secondary school counseling, and student affairs in professional practice and counseling. Applications are invited for an Assistant/Associate level, tenure-track position beginning fall 2005. Responsibilities include teaching on and off campus graduate courses in school and community counseling with an emphasis on school counseling. Experience in university teaching and counseling with culturally diverse populations is encouraged. Teaching and research responsibilities will be based on knowledge of the courses, methods, and procedures for a CACREP-approved program. Research, scholarly activity, and service are required. Additional responsibilities include practicum/internship supervision, program development, and involvement in professional organizations. The position requires an earned Ph.D. or Ed.D. in Counselor Education or closely related area. Salary is negotiable. To ensure consideration, materials should be submitted by November 15, 2004 to: Counseling Search Committee, 102 Tillman Hall, Clemson University, Clemson, SC 29634-0702, telephone: 864-655-4444. Review of applications will begin on that date and continue until an appointment is made. Application materials should include a letter of application detailing qualifications; a complete vita; official copies of all transcripts; and the names, addresses, and contact information for four professional references. Send a letter of interest highlighting their qualifications, a current vita, and the names, addresses, and telephone numbers of three individuals who can serve as references upon request. Inquiries and application materials should be addressed to: Jeffrey Lowry, Director of M.S. in Counseling and Human Development, George Mason University, 4400 University Drive, Fairfax VA 22030. Review of applications will begin on November 1, 2004 and continue until the positions are filled. George Mason University is an equal opportunity, affirmative action employer committed to meeting the needs of its increasingly diverse student body through appropriate personnel selection practices and procedures.

Virginia

George Mason University

Counseling and Development (rank open) Nationally recognized graduate program seeks to further strengthen its research and teaching capabilities. Strong background and research concentration in school and/or community counseling with emphasis on working with at-risk youth desirable. Earned doctorate required. Applicants must demonstrate potential for excellence in scholarship and teaching; a strong commitment to the mission of the counseling and development programs; a commitment to professional and human relations counseling, social justice, and advocacy and leadership; and an ability to work with a highly collaborative professional team providing state and national leadership in research, program development, and service. Applicants should send a letter of interest highlighting their qualifications, a current vita, and the names, addresses, and telephone numbers of three persons who can serve as references upon request. Inquiries and application materials should be addressed to: Jeffrey Lowry, Director of M.S. in Counseling and Human Development, George Mason University, 4400 University Drive, Fairfax VA 22030. Review of applications will begin on November 1, 2004 and continue until the positions are filled. George Mason University is an equal opportunity, affirmative action employer committed to meeting the needs of its increasingly diverse student body through appropriate personnel selection practices and procedures.

University of Virginia Curly School of Education

Counselor Education: The Curly School of Education is seeking an assistant professor for a tenure-track position. Successful candidates must hold a doctorate in Counselor Education or Counseling and have post-master's level school counseling experience. Preference is for applicants from a CACREP-accredited program and those with experience as counselors in middle/secondary school settings. This position requires the following: strong school counseling experience; demonstrated ability to teach classes in the counseling core program and to contribute to the school counseling program, including providing practicum and internship for entry-level students; a focused research agenda and ability to provide research supervision to doctoral students; demonstrated capacity to collaborate with other Curly School personnel preparation programs and to contribute to one or more of the following Curly emphasis areas: Risk and Prevention, Technology and Communication. Salary is commensurate with qualifications. Term begins August 2005. This is a nine-month, tenure-track appointment with the possibility of summer employment. The Curly School is especially interested in candidates with sustained engagement with communities that are underrepresented, and with demonstrated ability to integrate this asset into teaching and scholarship at the university level. The Curly School of Education is committed to building a culturally diverse educational environment. Applicants are requested to include in their letter information about how they will further this goal. Review of applications will begin November 1, 2004, and continue until the position is filled. Applicants should submit a letter that indicates how they satisfy the position requirements. Send (1) letter of application, (2) current curriculum vitae, (3) three letters of reference, and (3) three representative publications to: N. Kenneth LaFleur, Chair Counselor Education Search Committee University of Virginia P. O. Box 400269 Charlottesville, VA 22904-4269 THE UNIVERSITY OF VIRGINIA IS AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
COMING EVENTS

ICA 2004 Pre-Conference Learning Institute
Nov. 19-20, 2004
Lisle, Illinois

"Connecting Spirit, Creativity And Lifespan Career Counseling: The How and The Why" will be presented by Lee J. Richmond. The focus of this workshop is to energize career counselors through the connection of spirit to meaningful work. The program includes new approaches and exercises incorporating the use of story, myth, metaphor, poetry and art. Dr. Richmond's program promises to offer insight and inspiration. The workshop is co-sponsored by Illinois Association for Adult Development and Aging and will be held at the Lisle Hilton Hotel. For more information or to register contact Leslie W. O'Ryan at 309.762.1876.

National Multicultural Institute Conference
Nov. 11-14, 2004
Boulder, Colorado

The NMCI's conferences bring together practitioners from all across the country and around the world to explore diversity and multiculturalism in both personal and professional contexts. The institute's fall conference, "Building Personal and Professional Competence in a Multicultural Society," will offer two and four-day workshops on multicultural and diversity issues. This year's event will be held at the Hyatt Regency Bethesda. For more information see www.nmci.org, call 202.493.0700 or email nmci@nmci.org.

American Association of University Women Educational Foundation Symposium
Nov. 12-14, 2004
Washington, D.C.

The third biennial symposium, "International Perspectives: Women Leading Change in Public Health and Technology," will be held at the Renaissance Hotel in Washington, D.C. Emerging researchers, policy-makers and practitioners are invited to attend. Presenters will examine how women are using their education to create change in different regions of the world where access to and knowledge of technology and health concerns may vary. For more information visit www.aauw.org/symposium or call 202.728.7602.

COMING EVENTS

Spring Conference
May 6, 2005
Rocky Hill, Conn.

The theme for CCA's Spring Conference is: "Counseling: Celebrating the Human Spirit through Life Transitions," and it will be held at the Rocky Hill Marriott. For more information contact Conference Chair, Cathleen Dalekan, at 203.483.7342 or cdalekan@northbarnfordschools.org.

ACA National Awards Nominations

The Awards Committee of the American Counseling Association announces the start of the nomination process for the 2005 ACA National Awards. The Awards will be presented at the ACA National Convention in Atlanta in April 2005.

Any ACA member can submit a nomination of one or more ACA members who have made a noteworthy contribution to the counseling profession at the local or state levels. ACA Divisions/Organizational Affiliates, Branches, Chapters, Regions or Committees can also submit nominations. All nominations must be postmarked or received electronically by Nov. 10.

Complete information is available on the ACA website at www.counseling.org under "Resources" or you may request a 2005 National Awards Packet by calling ACA Member Services at 800.347.6647, ext. 222. Nominations may also be submitted by mail to ACA 2004 National Awards, c/o Janice Macdonald, 5999 Stevenson Avenue, Alexandria, VA 22304-3300.
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Affiliation

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