

Counseling Today



April 2013 • Volume 55/Number 10

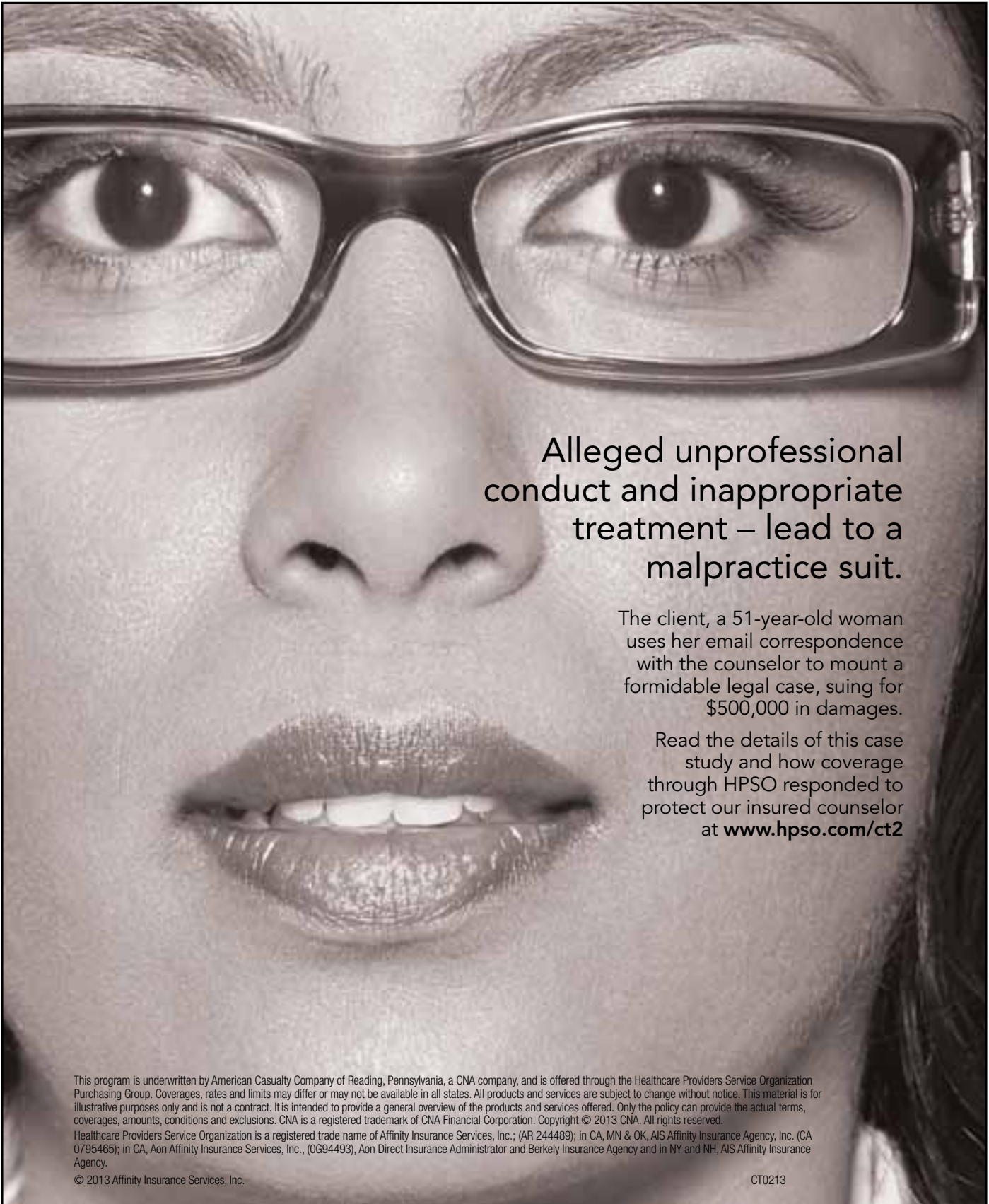
An American Counseling Association Publication

Using an ecological perspective

Also inside:

- Transitioning successfully into retirement
- Reflecting “as if” with diverse populations
- Drawing clients out of avoidant behaviors
- Counseling students after sexual assault





Alleged unprofessional
conduct and inappropriate
treatment – lead to a
malpractice suit.

The client, a 51-year-old woman
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with the counselor to mount a
formidable legal case, suing for
\$500,000 in damages.

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study and how coverage
through HPSO responded to
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April 2013

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By Lynne Shallcross

An ecological perspective in counseling involves identifying how a client's environment affects his or her well-being and development, and using interventions that move beyond exclusive focus on the individual.



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Join the conversation online

Here's what your colleagues have been saying about articles they have read on *Counseling Today's* website at ct.counseling.org.

■ "Q&A with Brandon Ballantyne: From aspiring tornado chaser to counseling teens"

"Creative approaches such as the ones you shared meet kids where they are. They are so powerful in helping young clients express feelings in ways words cannot touch. Once an image is created, they then see previously unknown parts of themselves tangibly reflected back for integration. I would also recommend movement as a mode of expression as well. Thanks again for the great article."

■ "Record number of military suicides begs questions about the path forward"

"Thank you for this exceptional article. I am a professional counseling graduate student and also a member of the United States Army Reserve. After completing both active duty time and now as a reservist, I recognize the need for more mental health counseling in both the active duty side as well as the Reserve side. Soldiers are looking for answers and show so many signs/cries for help. Those trained to recognize and identify need to be more accessible and on the 'home front' ready to support and educate ..."

■ "Bully pulpit"

"I am so glad that the *Counseling Today* article was written. This is an issue that no matter how much exposure it receives, those in charge of the schools more often than not do not know how to appropriately respond. My hope [is that] in the future we can instill in youth the necessary levels of empathy that would reduce this situation."



Bradley T. Erford

Mentors matter!

We owe so much to those who have supported, influenced and nurtured our development as professionals and people. After completing a master's degree in school psychology and working in the public schools near Richmond, Va., in a hybrid role of school counselor/psychologist, I decided to pursue my doctoral degree in counselor education at the University of Virginia (UVA). I still remember the day I walked up the hallway for my initial advising appointment with a brand new faculty member just out of his own doctoral program at Penn State University. UVA and Penn State happened to be playing each other that weekend in football, so I wasn't sure what to expect when I saw a sign on this faculty member's door that read "Go Nittany Lions." Openly rooting for the rival was a pretty bold move for an untenured assistant professor who had been at UVA only a few weeks. I took a deep breath, walked through the doorway ... and my life changed forever.

Skip Niles is everything you could hope for in a mentor. Nurturing, understanding and humorous, he is a dynamic teacher, prolific scholar, exceptional editor and dedicated servant of the counseling profession. I was his very first doctoral advisee and the first doctoral graduate he was supposed to "hood." I don't think he ever forgave me for blowing off the hooding ceremony at the UVA Rotunda!

I wasn't easy to mentor. Like many graduate students, I was working full time in the school system, taking classes, seeing clients in private practice in the evenings and raising a family. I had my

ideas about the way things were or should be, and I didn't always see the big picture or where I fit in. Today we joke that Skip learned everything he knows about advising from me — mainly, what not to do. I still hope I didn't scar him for life. He was constantly super busy, but he *always* took the time to understand, converse and care.

Skip and I have since become good colleagues and friends. We served together on the American Counseling Association Governing Council a few years ago, and I was honored to put forth the motion that he be appointed editor of ACA's *Journal of Counseling & Development*. I was thrilled, as were his other mentees, when Skip was selected to receive mentoring awards from both ACA and the Association for Counselor Education and Supervision.

I remember asking Skip a decade ago about his secret to great mentoring. He told me, "There is no secret. Good mentoring begets good mentoring." You see, Skip was mentored by counseling legend Edwin Herr, distinguished professor emeritus at Penn State University and a former president of ACA. Ed once joked that that made him my grandmentor!

I first met Ed more than a decade ago when he insisted on holding the door for me at the ACA convention in Anaheim — even though I am nearly 30 years his junior. Recognizing each other's names, we sat inside that door and talked for an hour. I could feel myself growing professionally and personally in his presence. I have learned most everything

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Counseling Today

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Through a Glass Darkly

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Risk Management for Counselors

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Hot Off the Press From ACA!

Assessment in Counseling: A Guide to the Use of Psychological Assessment Procedures, Fifth Edition

Danica G. Hays



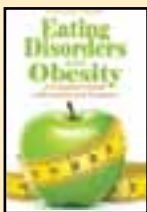
Now more user-friendly than ever, while continuing the legacy of excellence that Albert Hood and Richard Johnson began, the latest version of this bestseller updates students and practitioners on the basic principles of assessment and the most widely used tests relevant to counseling practice today. More than 100 assessment instruments examining intelligence, academic aptitude and achievement, career and life planning, personal interests and values, personality, and interpersonal relationships are described. Includes practical tools such as chapter pretests, summaries, and review questions; self-development and reflection activities; client case examples; practitioner perspectives illustrating assessment in action; and handy tip sheets.

2013 | 400 pgs | Order #78074 | ISBN 978-1-55620-318-3

List Price: \$72.95 | **ACA Member Price: \$49.95**

Eating Disorders and Obesity: A Counselor's Guide to Prevention and Treatment

edited by Laura Hensley Choate



Both practical and comprehensive, this book provides a clear framework for the assessment, treatment, and prevention of eating disorders and obesity. Focusing on best practices and offering a range of current techniques, leaders in the field examine these life-threatening disorders and propose treatment options for clients of all ages. This text, written specifically for counselors, benefits from the authors' collective expertise and emphasizes practitioner-friendly, wellness-based approaches that counselors can use in their daily practice.

2013 | 512 pgs | Order #78076 | ISBN 978-1-55620-319-0

List Price: \$54.95 | **ACA Member Price: \$39.95**

Multicultural Issues in Counseling: New Approaches to Diversity, Fourth Edition

edited by Courtland C. Lee



The latest edition of this widely adopted, seminal text provides direction for culturally competent practice with diverse client groups in a variety of settings. Fully updated—with seven new chapters and inclusive of feedback from educators and practitioners—this book goes beyond counseling theory and offers effective techniques for work with ethnic minority populations, women and men, older adults, LGBQQT clients, people with disabilities, deaf children and families, socioeconomically disadvantaged individuals, and military personnel.

2013 | 352 pgs | Order #72916 | ISBN 978-1-55620-313-8

List Price: \$69.95 | **ACA Member Price: \$49.95**

Counseling Around the World: An International Handbook

edited by Thomas H. Hohenshil, Norman E. Amundson, and Spencer G. Niles



Counseling Around the World provides a global exchange of information about counseling activities and services; counselor training; and professional practices, beliefs, and values. Experts from 40 countries discuss the opportunities for growth and the challenges they face. After an introductory section that examines global diversity themes and issues, key countries in Africa, Asia, Europe, the Middle East, North America, Oceania, and South and Central America are discussed. Each chapter covers the history and current state of counseling in the country, theories and techniques that work best with the population, diversity issues specific to the region, and counselor education and training.

2013 | 450 pgs | Order #78077 | ISBN 978-1-55620-316-9

List Price: \$59.95 | **ACA Member Price: \$44.95**



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Richard Yep

A time to celebrate

April is Counseling Awareness Month and an opportunity to celebrate all of the good work that professional counselors do for millions of children, adolescents, adults, families and couples each and every day. I hope you will visit the American Counseling Association website if you are looking for ideas and information about how you can help to promote what I think is one of the best professions in the world.

I know that many of you have your hands full with clients, students and other projects. You deserve acknowledgment for all you do, yet I know that isn't always forthcoming. But please know that the staff and leaders of ACA are very appreciative of all you do. Your good work is what motivates us to develop products, resources and information that will be of use to you. In addition, our work advocating for the counseling profession with public policymakers is just one example of how we hope to help you obtain the jobs for which your education and training make you uniquely qualified.

We also know how very valuable your time is, which is why we invested significant funds and time of our own to greatly improve the ACA website at *counseling.org*. You will find an improved search function, an easier login process that provides access to members-only information, and a site that is much friendlier to use and richer in content.

These next few months are special for many of our readers because the academic year comes to a close and graduation becomes a reality. For those of you preparing to walk the stage to receive your master's or doctoral degree, congratulations! You join a very

impressive, dedicated, committed and caring group of colleagues who have been practicing as counselors and counselor educators. Your impact on society through the next several decades will be amazing, and I want to wish you the very best of luck as you begin this next stage in your career.

If you are graduating, I am sure you are thankful for those who were part of this journey. Some of you depended on friends. For others, it was the help of parents, significant others, faculty members, administrators, student support personnel, babysitters or employers. These were the people who believed in you and helped you get through your graduate program — even when *you* may not have been so sure of things. Let's thank all of them for the contributions they made to your success.

Last but not least, I wanted to let you know that Jacki Walker, who served ACA for nearly 20 years as our director of membership services, retired recently. The staff gathered for a fond farewell to a colleague who did her best each and every day. Jacki often went that extra mile to help members who called in or emailed us with a question, concern or dilemma. As the person overseeing our call center, Jacki made sure that our representatives did their best to provide exemplary customer service. Jacki and her crew were at the front line of communicating with members, and I am grateful for her service.

As always, I look forward to your comments, questions and thoughts. Feel free to contact me at 800.347.6647 ext. 231 or via email at ryep@counseling.org. You can also follow me on Twitter: @RichYep.

Be well. ♦

Counseling Today

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Mission Statement

The mission of the American Counseling Association is to enhance the quality of life in society by promoting the development of professional counselors, advancing the counseling profession and using the profession and practice of counseling to promote respect for human dignity and diversity.





Thinking creatively vs. practicing art therapy

As the president of the American Art Therapy Association (AATA), I thank you for recognizing that art therapy is a non-threatening way to engage people, develop a basis to explore one's potential and overcome trauma and crisis ("Knowledge Share: Thinking creatively: Expressive arts for counseling youth in the schools," February 2013). But just as I would not recommend that everyone can practice as a counselor without the required education, I am hoping that as you continue to promote art therapy, you recommend that your audience works with a credentialed art therapist as a collaborative health care partner in enhancing the work of a counselor.

Art therapy is a mental health profession in which clients, facilitated by the art therapist, use art media, the creative process and the resulting artwork to explore their feelings, reconcile emotional conflicts, foster self-awareness, manage behavior and addictions, develop social skills, improve reality orientation, reduce anxiety and increase self-esteem. A goal in art therapy is to improve or restore a client's functioning and his or her sense of personal well-being.

Art therapy practice requires knowledge of visual art, the creative process, human development and psychology. A master's degree is required for entry-level practice in art therapy from institutions of higher education recognized by regional accreditation bodies approved by the Department of Education. Minimum educational, professional and ethical standards for the profession are established by AATA, a membership and advocacy organization that provides standards of professional competence, and develops and promotes knowledge in, and of, the field of art therapy.

Art therapy is practiced in mental health, rehabilitation, medical, educational, forensic, wellness, private practice and community settings with diverse client populations in individual, couples, family and group therapy formats. Art therapy is an effective treatment for people experiencing developmental, medical, educational and social or psychological impairment. Individuals who benefit from art therapy include those who have survived trauma resulting from

combat, abuse, and natural disaster; persons with adverse physical health conditions such as cancer, traumatic brain injury and other health disability; and persons with autism, dementia, depression and other disorders. Art therapy helps people resolve conflicts, improve interpersonal skills, manage problematic behaviors, reduce negative stress and achieve personal insight. Art therapy also provides an opportunity to enjoy the life-affirming pleasures of art making.

Art therapists who hold the credentials that attest to the preparation for this specialized health profession would be great partners to counselors and others in the mental health field whose goals are to improve the lives of those who seek their services. Credentialed art therapists who meet the high level of education and experience required for the profession can be located through Find-a-Therapist or AATA's Art Therapist Locator. Credentials and education of a practitioner can be verified through the Art Therapy Credentials Board.

*Mercedes B. ter Maat, Ph.D., LPC, ATR-BC
President, American Art Therapy Association*

While I appreciate author Patricia Van Velsor's enthusiasm for the use of expressive and creative modalities, to imply that simply participating in "an art therapy workshop" trains a counselor to use art therapy methods competently is misleading to readers and a potential liability to the vulnerable populations they serve.

The term *art therapy* is specific to an entire profession with a long history, national and state organizations, research, standards of accreditation and credentialing, and a code of ethics. Providing art therapy services requires specialized training at the master's level, then an additional 1,000-1,500 hours of supervised postgraduate clinical work to be eligible for the ATR (art therapist registered); a second level involves board certification by taking and passing an exam. Graduate work in art therapy involves rigorous training that integrates many factors such as human development, psychological theory, psychopathology, art-based assessment, art therapy methods, 700 hours of supervised clinical practice, mul-

ticultural and artistic traditions, creativity development, and curative and wellness factors related to artistic expression.

The *ACA Code of Ethics* wisely reminds all counselors to practice within their scope of competence. For example, Standard C.2.a. says in part: "Counselors practice only within the boundaries of their competence, based on their education, training, supervised experience, state and national professional credentials, and appropriate professional experience." Standard C.2.b. states, "Counselors practice in specialty areas new to them only after appropriate education, training and supervised experience." And Standard C.4.a. says, "Counselors claim or imply only professional qualifications actually completed . . ."

I encourage the author and others to refrain from using the term *art therapy* to describe what they do because they are misrepresenting themselves to the public. Other terms such as *therapeutic art* or *expressive art* are more accurate portrayals of what they provide and do not raise these ethical concerns. Counselors seeking art therapy training should contact colleges that offer postgraduate programs in art therapy.

*Marie Wilson, Ph.D., ATR-BC, ATCS,
ACS, LPC
Professor, Department of Psychology and
Counseling
Coordinator of Art Therapy Programs
Caldwell College*

Patricia Van Velsor responds: This letter is to reiterate as well as clarify the intent of my article "Thinking creatively: Expressive arts for counseling youth in the schools." The primary goal was to encourage school counselors to think creatively as they design comprehensive school counseling programs. The growing diversity in the student populations in U.S. schools demands this. School counselors serve students who have different learning styles, come from different racial and ethnic backgrounds, vary in family income levels and speak various languages. Thus, it is imperative that school counselors offer innovative approaches in their school counseling prac-

tics. Because expression through arts crosses cultures and because arts have been an essential part of communication throughout human history, the integration of expressive arts into school counseling makes perfect sense in promoting students' academic, career and personal/social development.

My suggestion to have school counselors explore expressive arts themselves was to give them an appreciation of the value of expressing themselves in different ways — through movement, drama, visual art, writing and music. These experiences will hopefully motivate counselors to learn more about expressive arts and find ways to offer expressive arts experiences to their students. Just as Claudia Cornett in *The Arts as Meaning Makers* encourages classroom teachers to integrate expressive arts throughout the curriculum, this article was focused on inspiring school counselors to find ways to do the same in their counseling programs. My sincere hope for students is that professionals working in the schools — school counselors, mental health practitioners, art therapists, classroom teachers and art teachers — can collaborate to enrich the learning experience for all students in our schools.

Arguing the need for unforgiving no-show policies

As a counselor with a private practice, I am compelled to take exception to the case made in the February "Private Practice Strategies" column ("The most over-the-top, unforgiving no-show policy that your practice must use!").

I have decided not to ever charge for missed sessions. This decision stems from the fact that I have been working largely with lower-income clients. People with low income have little flexibility in their work schedules; often need to help family or friends urgently; often have chronic health conditions that flare up from time to time; and often cannot afford to pay for gas, have cars that break down and/or are at the whim of the public transportation system. Even if they have insurance, they often struggle to come up with the copay and cancel at the last minute — if, that is, they have any phone minutes left.

To think that everyone ought to know what his or her day is going to look like 24 hours in advance is patently classist. To be sure, people who are solidly middle class also have these problems, which means that

not charging for no-shows is a "universal design" approach that works well for the disadvantaged as well as the advantaged.

I understand the sentiment behind the article — the increasingly popular and sensible belief that our service as counselors is valuable. However, I think it is unrealistic for us to want 100 percent of our working hours to be billable. I believe the idea that we must maximize our revenue because we deserve it — pioneered by lawyers and emulated by doctors and other health professionals — is significantly responsible for the uncontrolled cost of health care.

Instead of trying to monetize our every minute, private practice counselors should have a broader view of how to run a sound business. Do not obsess over getting paid for each hour you work; watch the monthly bottom line instead. Use those unexpected free times to do paperwork and catch up on continuing education. Enjoy your day. You will be more effective as a counselor and have a longer career. For me, that counts a lot more.

We do not need to take a vow of poverty as counselors, but we did knowingly pursue a career with limited potential for wealth — or perhaps that is the informed consent we need at the beginning of our own training.

*Jordan Shin, M.S., LPC
Eugene, Ore.*

I'm confused after reading Anthony Centore's column, "The most over-the-top, unforgiving no-show policy that your practice must use!" While I agree that it is clearly important to have enforceable policies regarding clients' failures to honor their appointments, I also feel that Mr. Centore's attitude is "over the top." In private practice, not every slot will be filled. There will be legitimate last-minute cancellations. To succeed in business, it is important to adjust your prices accordingly.

My own disclosure statement reads "24 hours' notice absent an emergency." I tell my clients, "If the roads are treacherous or you are sick, I don't want you in my office." Usually, I beat them to the cancellation punch in hazardous weather conditions. If I feel up to working but have any reason to think I might be contagious, such as having a bad cold, I leave it to the client's discretion to cancel.

Regarding late cancellations and no-show fees, insurance companies do not pay our full stated price. We all know this. So what is the justification for charging that price to a client who cancels? Anything above what you would have received for an actual appointment strikes me as opportunism. Or revenge.

If your client wants to remain your client, he or she will pay legitimate fees for missed appointments. If not, you probably have seen the last of that person anyway.

Thinking from a client's perspective, I wonder whether I would intentionally choose a counselor who is constantly on the defensive or angry over a legitimate cancellation. Or would I choose one who strives to be fair, both to client and counselor?

*Susan H. Robinson, LPC
Newark, Ohio
sue.robinson@sueslistening.com*

Grief and abortion aftercare

In the January 2013 issue of *Counseling Today*, Trudy Johnson writes about her experience providing grief counseling for women who have had abortions ("Reader Viewpoint: Bringing abortion aftercare into the 21st century").

Although there may be women who need grief counseling after they have had abortions — particularly those women who require abortions due to an abnormality of the fetus — I think this article may be a bit misleading. We need to be careful not to imply that all abortions will lead to unresolved grief when that is simply not the case. There are women who have had abortions who do not experience any adverse side effects — physical, mental or emotional — whatsoever. Furthermore, if there are adverse side effects, it may be related more to the shame produced by the social stigma of having an abortion. Of course, the experience of grief after an abortion will be altered by factors such as social, community and family/friend support.

Perhaps instead of focusing solely on the individual, we should also be working toward social acceptance of all life choices because they are personal choices that are not ours to make. There are a thousand different lifestyles, and ours is just one. Although I realize there are two sides to every argument, and I am glad to see the

Continued on page 70



Sequester ushers in automatic spending cuts

The fiscal cliff (aka “sequestration”) lives. As *Counseling Today* went to press, it appeared that \$85 billion in spending would be cut from Fiscal Year 2013 federal spending on March 1, with \$26 billion of that amount coming from health, education and food programs. Most Department of Education programs will be cut by 8.2 percent, including an estimated \$1.3 billion in reductions to Title I spending and \$1 billion in reductions to special education programs. Although some department cuts won't kick in until July, programs such as Impact Aid were to be cut immediately. Pell Grant funding and federal student loans are exempt from cuts.

More generally, the sequestration will result in loss of funding for food safety inspectors, air traffic controllers, nutrition assistance, unemployment insurance, and congressional staff and operations. Given the fluid nature of deficit reduction talks, we will post more information on these important developments on our website at counseling.org/publicpolicy.

ACA submits testimony on VA recognition of counselors

On Feb. 13, at the invitation of the House Committee on Veterans' Affairs, ACA President Bradley T. Erford submitted testimony for a hearing focused on Department of Veterans Affairs (VA) policies and practices for meeting veterans' mental health needs, as well as opportunities for improvement.

Erford testified that despite the need for more mental health clinicians in the VA's workforce, counselors continue to be almost completely shut out of hiring for these positions. He also noted that since Congress and the president authorized the hiring of licensed professional counselors (LPCs) in 2006, the VA has done very little to ensure that LPCs are brought into the VA health care system.

Erford shared several policy recommendations with the committee to increase participation of counselors

within the VA. The VA can take these actions on its own without congressional authorization. Among the recommendations:

- Expand the eligibility criteria for counselor positions to include mental health counselors who hold at least a master's degree in counseling from a regionally accredited program, are licensed at the highest level of licensure and have passed the National Clinical Mental Health Counseling Examination

- Include counselors in the paid traineeship program operated by the VA's Office of Academic Affiliations. The VA has for years supported paid traineeships for both clinical social workers and psychologists but has refused to expand this well-trod pathway to careers within the VA to accommodate either LPCs or marriage and family therapists.

- Appoint a liaison to work with the counseling community regarding hiring more LPCs in the VA

- Have VA Secretary Eric Shinseki issue a public notice to the entire VA health care system reminding its directors that they are empowered to hire counselors and directing them not to shut out an entire profession that can provide desperately needed help to the nation's veterans

To read Erford's full testimony, visit veterans.house.gov/submission-for-the-record/the-american-counseling-association.

Education bills introduced in Congress

The 113th Congress kicked off with lawmakers introducing, and in some cases reintroducing, bills that support school-based and community mental health professionals. Lawmakers' interest in addressing the mental health needs of youth is significant, especially in the aftermath of the school shootings in Newtown, Conn. The likelihood of Congress passing and funding any of these new bills is questionable, however, considering that many programs already in place have seen their support stall. Many policy analysts are also skeptical that the

Elementary and Secondary Education Act, which would be the most appropriate vehicle for establishing new education programs, will be reauthorized this year.

In this difficult fiscal environment, it is more important than ever for ACA members to communicate to their congressional leaders the value of investing in education and mental health services either through new legislation or existing programs such as the Elementary and Secondary School Counseling Program and the Safe Schools/Healthy Students Initiative. What follows are some of the new education and school mental health bills we are supporting.

- **The Student Support Act (H.R. 320):** This bill addresses head on our nation's large student-to-school counselor ratio, requiring the secretary of education to provide matching grants of at least \$1 million to states for allocation to local educational agencies so that additional school-based mental health and student service providers may be hired. Sponsored by Rep. Barbara Lee (D-Calif.).

- **The Mental Health in Schools Act of 2013 (S. 195 and H.R. 628):** These bills would provide competitive grants for programs developed through partnerships between education agencies and at least one community-based entity. Sponsored by Rep. Grace Napolitano (D-Calif.) and Sen. Al Franken (D-Minn.), respectively.

- **The Mental Health First Aid Training in Schools Act (H.R. 274 and S. 153):** These bills would establish training courses on the skills, resources and knowledge needed to assist individuals in crisis. Sponsored by Rep. Ron Barber (D-Ariz.) and Sen. Mark Begich (D-Alaska), respectively.

Introduction of these bills provides an excellent opportunity to remind members of Congress of the value of investing in school counseling services. For more information, contact Jessica Eagle at jeagle@counseling.org. ♦



How do I talk to my member of Congress?

The American Counseling Association held its first-ever public policy webinar on Feb. 26, titled “Communicating With Congress: How to Be an Effective Citizen-Advocate.” The webinar discussed ways that ACA members can most effectively communicate with federal lawmakers and their respective staff members to advocate for the profession. We recorded the webinar and have made it available online at counseling.org/publicpolicy.

ACA presented the webinar in partnership with the Congressional Management Foundation as part of our ongoing push to strengthen our grass-roots advocacy work. We know that our members have a great deal of

passion about the counseling profession and helping the people they serve; we want counselors to channel that passion into effective action. That all begins by having ACA members build relationships with their elected officials. However, we know that communicating with elected officials can sometimes be difficult and uncomfortable. This webinar will help you overcome that discomfort.

Developed by the Congressional Management Foundation, the webinar reveals the methods and benefits of building relationships with elected officials. The information provided is based on research that includes surveys of congressional staff, focus groups with members of Congress and congressional staff, and interviews with state legislators.

ACA is making a continuing education credit available for viewing the webinar. To obtain the credit, simply visit the public policy section of ACA’s website (counseling.org/publicpolicy) and follow the link for the webinar. After viewing the webinar, you will be provided with all the information you need to obtain the credit.

Regardless of whether you apply for a CE credit, we hope you will take this opportunity to learn from the experts about how to maximize your effectiveness in advocating for the counseling profession and build upon the wonderful work that you do every day. If you have questions about the webinar, contact Guila Todd with ACA at gtodd@counseling.org. ♦

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Safari of light

My heart pounded like a bass drum as a massive bull elephant stood just 30 feet from the truck, aggressively stomping the ground and flapping his huge ears as we lingered in South Africa's famed Kruger National Park.

Strolling across the baboon-lined Victoria Falls Bridge, we felt the rumblings of Mosi-oa-Tunya ("the smoke that thunders").

Fulfilling a childhood dream, I spent three amazing weeks traveling with my wife through sub-Saharan Africa. With our tour group, we encountered smiling children, curious adults, grim military checkpoints, Jurassic-size insects, flowering jacarandas, stout baobab trees, frightening crocodiles, stifling heat, soul-crushing poverty and, everywhere we went, exotic, dangerous beauty.

Each December, my wife and I migrate to remote, tropical areas. My inclination is to travel to the Southern Hemisphere, that remote part of terra firma that contains few countries and comparatively little population. We have visited New Zealand, Australia and Indonesia, but none of these magical places awed me the way Africa did. The sojourn to southern Africa, where we were confronted with numerous cultural, social, spiritual and political variations, was like earning a Ph.D. in cultural anthropology. During stops, we mingled in traditional markets, purchasing crafts and engaging in conversation with artisans and the inquisitive. Crowds of people, many hawking their wares, frequently swarmed about us, peppering us with questions.

Our guides advised us to exercise a circumspect approach in certain areas. In Zimbabwe, for example, even the most benign criticism of government is a felony, and Robert Mugabe's oppressive,

lugubrious "fingerprints" are everywhere. Run-down, crime-infested streets are named in his "honor"; the country's hyperinflated, worthless currency sports his mug shot; crumbling schools bear his moniker. Although the government-owned and operated Zimbabwean media occasionally reports on world crises, it spews nothing but praise for basic governmental initiatives at home, leading one to imagine that Mugabe and his minions have achieved nirvana. Despite experiencing almost 35 years of this self-serving rule, Zimbabweans remain steadfast in their optimism and resilience. "If we could just get honest leaders who would invest in the country, we could be successful," one Zimbabwean opined in a moment of unusual — and perilous — candor.

A teachable moment

Before our safari, we spent several days with Gertrude Akapelwa, visionary founder of Victoria Falls University. Hailing from a small, remote village, she defied astronomical odds by matriculating to Harvard and later working for the World Bank and other notable organizations. But her lifelong dream was to found a university to educate African lawyers, teachers, engineers and other professionals. She explained that only around 10 percent of Zambians attend university, and her motivation was to help open doors for underprivileged, deserving students.

Ms. Akapelwa had invited my spouse and me to make a presentation to 100 students — a mix of young women and men from Zambia, Zimbabwe and Botswana studying for a professional teaching certificate. They appeared eager to soak up whatever we had to offer, as evidenced by what preceded the workshop. Minutes prior to the

scheduled start, the air conditioning abruptly went on holiday, leaving students, staff, Vice Chancellor Akapelwa and presenters in 95 degree heat — perfect for a Bikram yoga studio but scarcely ideal for our purposes.

In the United States, the workshop likely would have been canceled. In truth, it's doubtful that I would have remained under such oppressive conditions. But the Victoria Falls University students — born and raised in adversity — simply shrugged this off as one more hardship to overcome. Everyone, including Ms. Akapelwa, stayed, participated and uttered nary a syllable of complaint.

Our presentation, titled "Creating Personal Peace," resulted in numerous participants sharing their personal and career visions. In every case, that involved improving their teaching, upgrading their schools, creating scholarships for students in need and the like. Not one participant articulated a vision targeting personal wealth, fame or glory.

The light goes on — slowly

After our presentation concluded, Vice Chancellor Akapelwa held a "high tea" reception in her office. Like a beaming parent, she proudly showed off plans for new modern buildings and professionally landscaped grounds. Of course, there's the very real challenge of transforming those blueprints into bricks and mortar, but Ms. Akapelwa is a force of nature, so I have little doubt of her ability to realize those lofty dreams.

Still, the severely impoverished conditions in Zambia, Zimbabwe and Mozambique left me with the stark realization that I had viewed Africa through Western eyes and a Western mindset. Because higher education transformed my own life, I tend to equate

college degrees with cultural and social mobility. I still believe this is true, at least for most. But given their social, cultural and economic realities, a university education is simply unrealistic for most Africans. Ms. Akapelwa bluntly stated as much to me: "TIA" ("This is Africa"), she said, eyes sharp as a raptor's. Nevertheless, I have no doubt that everyone — in Africa and elsewhere — can benefit from tertiary education. The debate revolves around the focus of that postsecondary education.

In a somewhat controversial plan, President Obama's higher education agenda targets community colleges. Given escalating college costs and the need for a more technically trained populace, this makes practical sense and would also seem a good model for Africa. I do not mean to imply that African countries should divest from their universities. In fact, they should do the opposite and create more opportunities for promising yet financially strapped students (as Victoria Falls University has done). But an educational alternative to the university system is sorely needed for the far greater numbers of Africans who cannot hope to attend a university.

The counselor's role in an emerging nation's development

Southern Africa transformed many of my previously held beliefs regarding that region of the world, which speaks to the importance of travel. Upon learning I am a professor, Africans frequently inquired about my field. Counselor education puzzled them, however, because the term was foreign to most. When I explained that counselors address health education, addictions and career/vocational training, among other functions, most thought counseling a very good idea.

Given that in most places in southern Africa unemployment runs at or above 50 percent, literacy rates hover between 60 and 70 percent, and HIV/AIDS infection rates are among the world's highest, the counseling profession potentially could play a vital role. Realistically, however, most African governments are strapped for cash, inefficient or corrupt, and given how much cultural indifference there is to education, particularly when it comes to the education of girls, counseling will be a slow grower there. But slow growth is preferable to no growth. Vice Chancellor Akapelwa agreed that counselors would be an especially good idea in Africa's schools and universities. The stumbling block is governmental priorities and funding, which is something we have also witnessed here at home.

No doubt, it is far easier to write articles, books, blogs, personal manifestos and the like than it is to craft and implement policy. As taxing as writing can be, my burden is far easier and simpler than that of, say, Richard Yep, Bradley Erford, the American Counseling Association Governing Council and our counseling lobbyists. Furthermore, innumerable demands are always competing for the profession's attention. But all indications are that our world has shrunk and is rapidly becoming more interdependent. We can see evidence of this by looking at financial markets, the growing international workforce and the increasing popularity of international study.

A century ago, Rudyard Kipling could smugly opine, "Oh, East is East and West is West, and never the twain shall meet." But a high-tech, increasingly mobile world has stamped "Paid" to that colonial apologist's poetic fallacy. East and West

are *closely* engaged in business, industry, education, tourism and communication through Skype, email, the Internet and other avenues. The world is evolving, and the counseling profession is running to catch up, particularly in developing countries and regions such as Africa.

But deliberate as it may be, the counseling profession's traditional, developmental, vocational/career approach may hold the greatest potential in Africa. We must certainly continue to establish mental health and addictions counseling in Africa, particularly given the overwhelming social strains that HIV/AIDS and other issues pose. But because I believe education is the linchpin in societal progress, school counseling strikes me as being paramount (and I say this as a mental health counselor). Our African expedition cemented in my mind what research has already suggested — namely, that a society's health is directly proportionate to its educational system. School counseling is a needed yet vastly underutilized profession in Africa.

Repairing our own house

A critic could easily point out that the once proud U.S. educational system is dilapidated and that our efforts should focus here on the home front. No doubt, our public schools are in crisis. Creative thinking and difficult changes will be required to improve our capricious, inequitable P-12 system. But even as society engages in this reconstruction process, room remains for the counseling profession to continue its expansion beyond Western borders. The social, educational and career needs abroad are legion, and the counseling profession is suited to address many of these issues.

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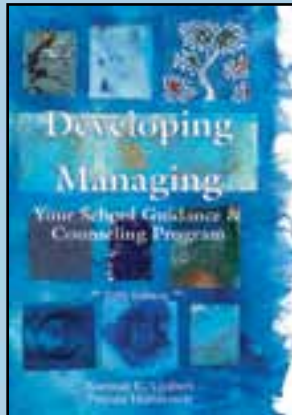
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My travels abroad also reaffirm my belief that local and global needs are strongly connected, which makes transcending borders a necessity rather than a luxury. Modest as it may be, there is overseas interest in our profession. My own counseling program recently began receiving a trickle of interest from Asia, the Middle East and Africa, and it would be instructive to hear from other counselor education programs regarding the international interest they have attracted. The future likely will reveal joint international counseling programs similar to the one between the University of Maryland and the University of Malta. I would hope to see similar ventures in non-Western countries as well.

Seeing the world’s beauty

During my childhood, circumstances dictated that I would experience travel only through the landscape of my mind. Because of education, pluck and, certainly, luck, the world has opened its borders to me in adulthood. Given my meager upbringing, I never take the privilege of international travel for granted. Each time I go abroad, I remember how blessed I am.

Landing in Johannesburg, we stepped onto the tarmac under a stunning azure sky. Warmed by the rays of the Southern Hemisphere, the lethargy of a long trip suddenly melted away. I fell into step alongside an African American woman from the Midwest. Her eyes watery with joy, she exclaimed, “It’s my first time in Africa. Coming over was a lifetime dream.”

“Mine too,” I replied. Instinctively, we reached out to each other, linked arms and walked forward in solidarity. ♦

Shannon Hodges is a licensed mental health counselor and associate professor of counseling at Niagara University. Contact him at shodges@niagara.edu.

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Navigating the waters of academia

As the calendar turns to April, counseling students and faculty members begin preparing for the end of another academic year. For counselor educator **Tiffany A. Stewart**, this point marks four years in the classroom and, in this “New Perspectives,” she reflects on lessons learned during her journey in academia. Stewart has been an assistant professor at Midwestern State University since 2009, after obtaining her doctorate from the University of Akron.



Once I defend my dissertation and secure my first job in academia, all of the hard work will have paid off, and I can finally breathe.

This is what many doctoral students tell themselves just before graduation. They rarely acknowledge that this is only the beginning of a long journey — one that should be carefully calculated from the first year on the job as faculty.

Being a professor has its privileges, and one can grow complacent rather quickly. For example, there is typically a great deal of flexibility that comes with the job. There are no clocks to punch. You make your own office hours, and holidays and breaks are plentiful. You are finally treated as a professional. You start to think this may be the best job ever. However, after the first year passes, you quickly realize the flexibility and autonomy may be a double-edged sword. At times, academia might feel like a one-man island with no one to help for miles and miles around.

For those who will find themselves in this position, I would like to share some tips I learned during my journey that may help you better prepare for the world of academia.

1) Now is not the time to rest. If you thought being in a doctoral program was demanding, consider it merely practice to prepare you for life in academia. Gone are the days of working an 8-to-5 job or resting after you turn in that big paper. The job of an academic professional literally never ends. Between preparing for classes, teaching your required course load, grading papers and tests, preparing tests, attending meetings for various committees you are on and actively engaging in research, there is not much free time left over. Yes, the hard work of being a doctoral student is over, but entering the world of academia is something else altogether. It can take awhile to acclimate, but it becomes easier to adjust the longer you stay at it.

2) Do not spend your time agonizing. With each day being so busy, it is easy to get caught up agonizing over how to find your voice in this profession and how to find your stride with research. You might feel like there is no help available and that you do not have enough time to fit everything in. But constantly pondering the “impossibility” of the task leads to more time wasted and less time used productively. Making a list of things to do that includes possible research topics with completion due dates is a good way to work through this process. You may start out slow, but that is better than doing nothing. Just about every successful professional in this field would agree that research and writing are skills that take time and practice, practice, practice to develop.

3) Find people with similar research interests. Before choosing a career in academia, it is wise to know that research, writing and getting published in peer-reviewed journals is important at

all levels, not just at research institutions. The expectation that you will be actively engaged in research is more common today even if you are teaching at a university/college or community college. There is simply no way around it. Given the importance of research to the advancement of the academic profession, it is logical for institutions to have this expectation. However, pursuing research is easier said than done, especially when you are the newcomer in a group of established professionals who have already found their respective paths. By remaining involved in your professional communities and organizations, you can stay connected to other new professionals who share your interests and potentially conduct research with them. Working alone can be lonely, frustrating and discouraging.

4) Seek mentors. In addition to finding professionals who have interests similar to your own, seek out mentors. These individuals will be seasoned professionals who have already been where you are and can thus offer great advice and direction. Typically, these individuals will not seek you out if you are not visible in their path, so finding a mentor may require assertiveness on your part. Do not focus solely on one individual because you can learn and gain valuable information from many different people.

5) Protect your time. During your first year on the job, you also might want to get involved in providing service to your community and university. These opportunities will begin trickling in one by one. Soon, requests for your service will be countless, and you may be tempted to take advantage of everything. Although service is a great thing and a

significant part of your job duties, keep in mind that you can only do so much. It is OK to be selective when choosing the opportunities in which you want to get involved. This will also allow you to make time for research. If you do not protect your time, no one else will.

6) Do not take it personal. Finally, in academia, rejection is a normal occurrence. Although I am not sure that handling rejection ever gets easy, it helps to know ahead of time that it is part of the process. The most important piece of information given to me while completing my dissertation was that it is a process and to trust it. I offer that same advice. Rejection is part of the process of developing as a professional because it offers you the opportunity to learn from your mistakes and improve. Typically, when your work is rejected, you receive feedback from other veteran professionals in the field. Use the feedback to your advantage and strengthen your work. Soon you will be the one providing the feedback to new professionals who are where you once were. ♦

To submit a question to be answered in this column or to submit an article detailing the experiences and challenges of being a graduate student or new counseling professional, email column editor Donjanea Fletcher Williams at acanewperspectives@yahoo.com.

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My life, my story

Nominate an exceptional student or new professional to be featured in “My life, my story” by emailing acanewperspectives@yahoo.com.

This month, doctoral student **Dorothy “Dodie” Limberg** is featured. She is the student representative to the ACA Governing Council.

Age: 33

Home/current residence:

Originally from Onalaska, Wis., and currently living in Orlando, Fla.

Education: Currently pursuing a Ph.D. in counselor education from the University of Central Florida; M.A. in counselor education-school counseling from the University of Central Florida; B.S. in interpersonal communications (sociology minor) from the University of Wisconsin-La Crosse



Greatest professional accomplishments: Being able to live internationally and work as a school counselor. As a doctoral student, my greatest accomplishment is seeing students I work with be successful in their new careers as counselors. Additionally, I am grateful for the mentorship and support I received through my journey; it has been invaluable in my accomplishments.

Biggest professional challenge: Deciding between pursuing a doctoral degree versus staying in school counseling. At the time, the decision was very difficult because I didn't want to leave my students. However, it has turned out to be a great one because I have been able to still work within schools, conducting research and providing professional development through my doctoral program, while developing my new identity as a counselor educator.

Words of advice for students: Don't lead with your title or degree. Lead with your character, reputation, work ethic and contribution to the counseling field. Also, show gratitude for the opportunities you have in our field to positively impact others.



Surviving an insurance company audit

In November, my company received a letter from a major third-party payer — an insurance company we will refer to as COMPANY. The letter read as follows:

“[COMPANY is] conducting a review to verify services billed by you were rendered and described appropriately on submitted claims. In order to conduct this review, COMPANY requires certain information from you. COMPANY requests that you provide us with complete documentation of services rendered, including but not limited to documentation evidencing diagnosis and treatment.”

COMPANY requested the following list of items:

- “Your daily office appointment schedules, books and calendars for the dates of service in which you treated the patients at your office site.
 - “Treatment plan or excerpts of the patient file that document diagnosis, dates of services, type of therapy session and length of each therapy session.
 - “Initial psychological and/or medical evaluation notes.
 - “Daily patient receipts.
 - “Financial records used to bill insurance companies.
 - “Financial statements sent to patients.
- “Please submit all documentation to me within 10 business days from the receipt date of this letter.”

Attached to the letter was a roster of 20 patients seen by one of the 10 clinicians who work, or had worked, at our Boston office. COMPANY requested anywhere from one to seven months’ worth of treatment notes (varying by patient) dating back through the previous four years.

The samples requested were random but comprehensive. If just one clinician was being sloppy with his or her notes, or if the practice was keeping poor records at any point between 2009 and 2012, COMPANY was going to find out. My first thought was, “Excuse me while I go get sick.” What I actually *said* was, “Really? We’re supposed to do this in 10 days?”

“Actually ... eight days,” my office manager corrected. Apparently, the person delivering the mail had decided to give this particular envelope to a neighbor, so by the time it reached our office, the clock was ticking.

Thankfully, two of our senior medical billers already had started on the project. Better yet, being on the heels of Thanksgiving, we were able to convince the auditor to give us a few additional days. We got the impression that the 10-day deadline was a bit arbitrary; COMPANY wanted us to take the audit seriously, but it didn’t want us missing Turkey Day because of it.

Horror stories

Over the past four years, my practice has moved from paper records to an electronic health records (EHR) program — and then another EHR program and then another (see my June 2012 column, “Electronic health records in today’s private counseling practice”). I knew we would need to access four databases to get everything COMPANY required. We were also surprised to see “appointment schedules, books and calendars” and “financial statements sent to patients” on the list of required items. We hadn’t known that we needed to keep these items. We did still have them, but only by chance, not design.

As an aside, let me say that I am paranoid about clinical notes. They are a huge liability. I can get in trouble for losing them or for keeping them too long. I can get in trouble if they are too brief or if they contain too much information. They need to be organized, legible and double locked. Clients and health care providers request them, and courts subpoena for them years after treatment ends. They take up office space. Bugs like to hide in them. I loathe them.

As I read the audit letter, I was comforted by the knowledge that my clinicians keep good notes. Still, I harbored lingering worries, perhaps because I have heard horror stories. “*The insurance company said*

that 10 percent of our records were deficient. So, they demanded 10 percent of their money back. Over five years, that was over a billion dollars!”

I never knew what to make of these stories. Were insurance companies out to rob health care practices of their hard-earned wages, or were some health care practices keeping really shoddy records? Both scenarios seemed plausible. All I knew was that I was going to find out firsthand.

Insurance audit = jury duty

When I visit health care practices (either as a consultant or for potential purchase), I always ask the owners if they review their clinicians’ notes. The response is usually some derivative of “I don’t check clinicians’ notes, but their contracts say they need to keep accurate and complete records.”

I then ask, “Would you be comfortable if an insurance company audited your practice’s records?”

And the owner will answer, “Ha! I’m not worried about that. We’ve been in business for 10 years, and we’ve never been audited before.”

Being audited by an insurance company is like being called for jury duty. It is not a matter of *if* it will happen but *when*. Health care providers need to be ready to 1) produce accurate and complete records or 2) pay a lot of money back to the third-party payer.

Four tips for surviving an audit

Nobody wants to get audited, but with good preparation, the process doesn’t need to be difficult. Here are four tips for surviving an insurance audit.

1) Get organized. It is never too early to begin organizing client files because even small practices produce a lot of records. Without good organization, locating a specific case file can be tough. Some practices organize files by provider, others by client type (child vs. adult or testing vs. therapy, for example). Others organize all files in alphabetical order and color-code them depending on the file’s age. After a

couple years of inactivity, old files are put into storage (still in ABC order).

It doesn't matter what system you use as long as you're consistent. Ask yourself these questions: If a client from five years ago requests her notes, how long will it take me to find them? If one of my clinicians disappears tomorrow, will I be able to step in as custodian and respond to requests for his or her files?

2) Conduct your own audit. If you have already received an audit letter, you're reading this article too late. Consider being audited "standard operating procedure," just like generating a receipt for services rendered. To make sure you're prepared, run some drills and check staff records for thorough "documentation evidencing diagnosis and treatment." To keep their certifications, some community mental health centers are required to perform a clinical review of every active client file every 90 days. Does this take time? Yes. Does this cost money? Yes. Does this prepare a practice in the event of an insurance audit (and perhaps even improve clinical care)? Definitely.

3) Recruit your support team as quality assurance. It's good to have checks and balances because no one is 100 percent up to par with his or her notes 100 percent of the time. Have your admin or billing team review notes when filing insurance claims. They can check for the presence of treatment plans, completeness of SOAP (subjective, objective, assessment, plan) or DAP (data, assessment, plan) content, accurate dates of service and so on. If a note looks questionable, make sure that the claim isn't filed until the note is reviewed.

4) Support your clinicians. Clinicians want to keep good notes. After all, most of the time it is *their reputation* on the line. Help young clinicians understand what constitutes a good client record. Equip experienced clinicians for success as well. For example, counselors *need time* to complete good notes, and if your practice is using EHR, they need a reliable system that won't crash when they are completing their documentation.

When it comes to paper notes, clinicians need the infrastructure to keep their files organized. Your practice should have more filing cabinet space than you think it needs because cabinets fill fast. (Some practice

owners are extremely reticent to buy more filing cabinets. Get over it!) My practice uses EHR, and we still have a records room full of filing cabinets for releases, depression inventories, intake forms and more.

No news is good news

Are you wondering about the outcome of our audit? Well, it has been three months since we tendered copies of our records. The auditor said we would hear from her if she needed anything else. Asking around, we have heard that when there is a problem, insurance companies are quick to let a practice know. So far, we've heard nothing. It's business as usual. We survived our first audit (knock on wood). Life is good. ♦

Anthony Centore is the founder of Thriveworks, a company that helps counselors get on insurance panels, find new clients and build thriving practices. Contact him at anthony@thriveworks.com.

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Healing War Trauma: A Handbook of Creative Approaches

Edited by Raymond Monsour Scurfield & Katherine Theresa Platoni, Routledge

This book details a broad range of exciting approaches for healing from the trauma of war. The techniques described in each chapter are designed to complement and supplement cognitive behavioral treatment protocols and, ultimately, to help clinicians transcend the limits of those protocols. The innovative approaches laid out in this handbook will inspire and inform both clinicians and veterans who do not respond productively to office-based, regimented and symptom-focused treatments.

Group Techniques for Aging Adults, Second Edition

By Kathie T. Erwin, Routledge

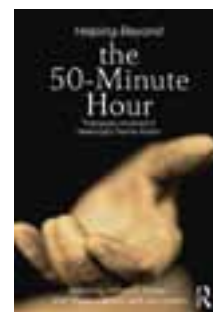
Mental health professionals will appreciate these practical and detailed guidelines for design, implementation and monitoring of elder group modalities that put theory into action. The group modalities are defined in the holistic contexts of mind, body, social and spiritual, including reminiscence, bibliotherapy, remotivation, humor and expressive arts. New material is presented in this edition on therapeutic writing, tai chi and harp, sacred spaces and spiritual legacy. The goals, process, equipment and outcomes offer a how-to guide for each modality.



Helping Beyond the 50-Minute Hour: Therapists Involved in Meaningful Social Action

Edited by Jeffrey A. Kottler, Matt Englar-Carlson & Jon Carlson, Routledge

This book is intended as an inspiration for practicing psychotherapists and counselors, as well as students, to become actively involved in a meaningful effort. The authors have searched far and wide to identify practitioners representing different disciplines, helping professions, geographic regions and social action projects, all of whom have been involved in social justice efforts for some time, whether in their own communities or in far-flung regions of the world. Each has an amazing story to tell that reveals the challenges they've faced, the incredible satisfactions they've experienced and what lessons they've learned along the way.



Deaf Mental Health Care

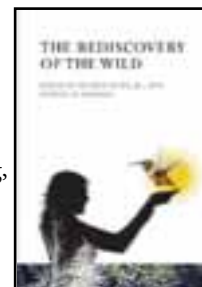
Edited by Neil S. Glickman, Routledge

This volume presents a state-of-the-art account of the clinical specialty of mental health care of deaf people, drawing upon some of the leading clinicians, teachers, administrators and researchers in this field from the United States and Great Britain. Each chapter contains numerous clinical case studies and places a heavy emphasis on providing practical intervention strategies in an interesting, easy-to-read style. All mental health professionals who work with deaf individuals will find this to be an invaluable resource for creating and maintaining culturally affirmative treatment.

The Rediscovery of the Wild

Edited by Peter H. Kahn Jr. & Patricia H. Hasbach, The MIT Press

We often enjoy the benefits of connecting with nearby, domesticated nature, such as a city park or backyard garden. But this book makes the provocative case for the necessity of connecting with wild nature — untamed, unmanaged, not encompassed, self-organizing, and unencumbered and unmediated by technological artifice. This work considers ways to engage with the wild, protect it and recover it — for our psychological and physical well-being and to flourish as a species.



Crisis Intervention and Counseling by Telephone and the Internet, Third Edition

By David Lester & James R. Rogers, Charles C. Thomas Publisher Ltd.

This text offers specific techniques to deal with out-of-control situations, providing the highly important initial steps to protect the caller, the crisis worker and the community. The scope of the book includes an overview of counseling by telephone, how to effectively manage crises, how to be supportive verbally and nonverbally, how to accurately assess situations and how to help create a sense of stability. This unique book serves as a comprehensive tool for those setting up telephone and Internet counseling services and those in charge of centers already operating, especially in training and supervising those on the front lines — the crisis interveners.

The Tool Box: Tricks of the Trade for Raising Teenagers

By Karren J. Garrity, CreateSpace

This book offers tricks of the counseling trade: hands-on, easy to understand, practical strategies used by many therapists to help parents, mentors and teachers navigate their relationships with teenagers. Today's teens live in a very complicated world, and that makes parenting and teaching them more complicated too. Parents, caregivers and teachers need simple ways of doing the day-to-day difficult things. *The Tool Box* will coach adults in building successful, strong and positive relationships with the adolescents in their lives.



DBT Made Simple: A Step-By-Step Guide to Dialectical Behavior Therapy

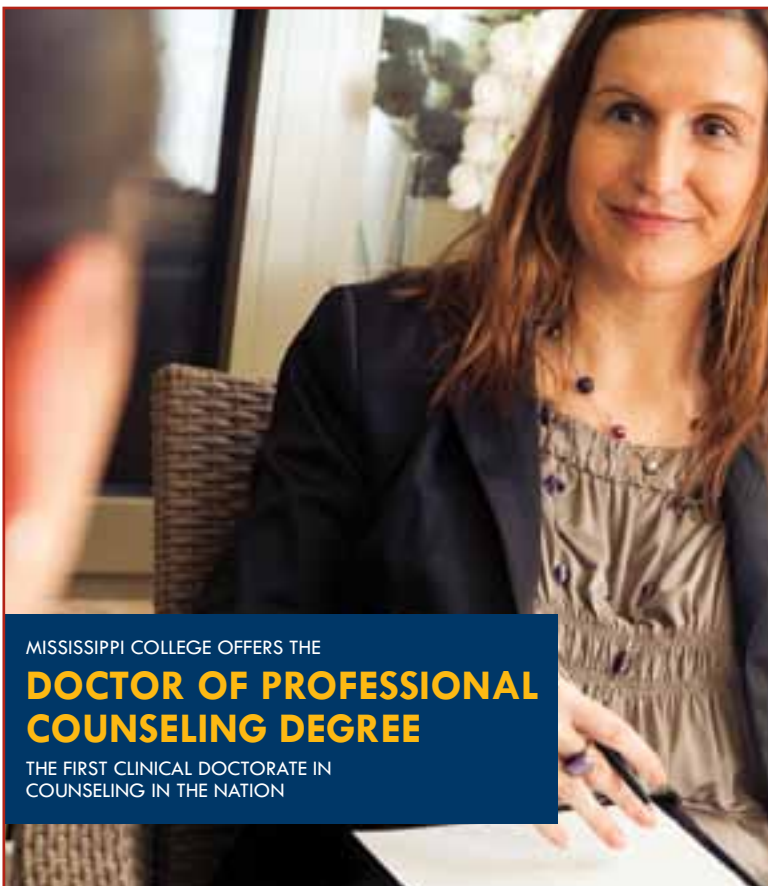
By Sheri Van Dijk, New Harbinger

Originally developed for the treatment of borderline personality disorder, dialectical behavior therapy (DBT) has rapidly become one of the most popular and effective treatments for all mental health conditions rooted in out-of-control emotions. If you are a therapist new to DBT, this book will provide you with everything you need to use the model to treat people with problems involving emotion dysregulation.

Healing Eating Disorders With Psychodrama and Other Action Methods: Beyond the Silence and the Fury

By Karen Carnabucci & Linda Ciotola, Jessica Kingsley Publishers

Psychodrama and other action methods are especially helpful in the treatment of the classic eating disorders as well as dieting struggles, body dissatisfaction and associated issues of fear, sadness, silence and shame. This book provides clinicians with sound theoretical information, practical treatment guidelines and a wealth of clinically tested action structures and interventions. The authors describe how they have introduced action methods to work with a diverse range of clients and suggest ways in which psychodrama practitioners, experiential therapists and others may integrate these methods into their practice.



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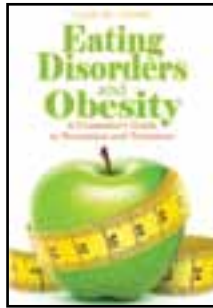
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Eating Disorders and Obesity: A Counselor's Guide to Prevention and Treatment

Edited by Laura H. Choate, American Counseling Association

Both practical and comprehensive, this long-needed book provides a clear framework for working with clients experiencing eating disorders and obesity. Focusing on best practices and offering a range of current techniques, leaders in the field examine these life-threatening disorders and propose treatment options for clients of all ages with problems related to eating, weight and body image. This text, written specifically for counselors, benefits from the authors' collective expertise and emphasizes practitioner-friendly developmental and wellness-based approaches that counselors can use in their daily practice.



Mindfulness-Based Cognitive Therapy for Depression, Second Edition

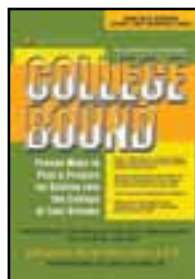
By Zindel V. Segal, J. Mark G. Williams & John D. Teasdale, Guilford Press

Step by step, the authors explain the “whys” and “how-tos” of conducting mindfulness practices and cognitive interventions that have been shown to bolster recovery from depression and prevent relapse. Clinicians are also guided to practice mindfulness themselves, which is an essential prerequisite to teaching others. More than 40 reproducible handouts are included. Book purchasers get access to a companion webpage featuring downloadable audio recordings of the guided mindfulness practices.

College Bound: Proven Ways to Plan and Prepare for Getting Into the College of Your Dreams

By Christine Hand Gonzales, College Path Publications

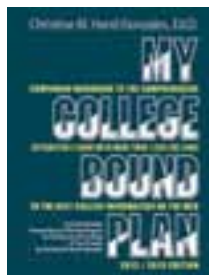
This resource, also available as an interactive eBook at *College-Path.com*, is a comprehensive and useful guide for students and parents. It provides live links to more than 1,200 verified college-related resources, including admissions, financial aid and scholarship resources, organized by topic and where you are in the college planning process. The ultimate reference guide for the college application process, it is filled with essential checklists and links that cover all the necessary bases.



My College Bound Plan

By Christine Hand Gonzales, College Path Publications

This resource is designed to act as a companion workbook to use in conjunction with *College Bound: Proven Ways to Plan and Prepare for Getting Into the College of Your Dreams* (see previous description) so readers

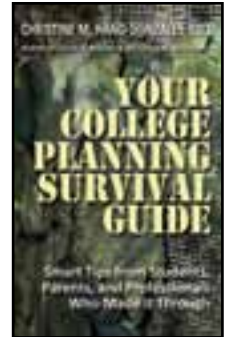


will have all the tools they need as they plan their personal path to college.

Your College Planning Survival Guide: Smart Tips from Students, Parents and Professionals Who Made It Through

By Christine Hand Gonzales, College Path Publications

The author, a professional college planning consultant, provides tactical tips and proven techniques to make the most of the career search and college application process through an insightful and well-organized resource guide. More than 300 tips are offered by those individuals who have “been there, done that!” Students and parents offered their insights by answering the question, “If you knew then what you know now, what would you have done differently during your college planning process?”



Motivational Interviewing in Groups

By Christopher C. Wagner & Karen S. Ingersoll, Guilford Press

The authors demonstrate how the four processes of motivational interviewing (MI) with individuals translate into group contexts. They explain both the challenges and the unique benefits of MI groups, guiding practitioners to build the skills they need to lead psychoeducational, psychotherapeutic and support groups successfully. Chapters by contributing authors present innovative group applications targeting specific problems: substance use disorders, dual diagnosis, chronic health conditions, weight management, adolescent risk behaviors, intimate partner violence and sexual offending.

Business Behaving Well: Social Responsibility, From Learning to Doing

Edited by Ron Elsdon, Potomac Books

This book provides a rationale and road map for organizations to incorporate socially responsible practices, building on real-world examples from contributing authors and principles of social justice. Addressing strategic issues as well as practical implementation, this book is for anyone who is actively engaged in the business world, individuals working in the public and nonprofit sectors, and students and faculty who study the relationship between business and social issues.



Emotion Regulation in Children and Adolescents: A Practitioner's Guide

By Michael A. Southam-Gerow, Guilford Press

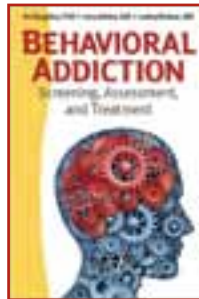
In a flexible modular format, this much-needed book presents cutting-edge strategies for helping children and adolescents understand and manage challenging emotional experiences. Each of the eight treatment modules can be used on its own or in

conjunction with other therapies, and includes user-friendly case examples, sample dialogues, and engaging activities and games. Emotion-informed assessment and case conceptualization are also addressed.

Behavioral Addiction: Screening, Assessment and Treatment

By An-Pyng Sun, Larry Ashley & Lesley Dickson, Central Recovery Press

Compulsive gambling, sexual compulsivity, eating disorders, problematic Internet use and more affect millions of Americans and their families. Behavioral addiction is every bit as much a real, treatable brain disease as the manifestations of addiction with which we are more familiar — addiction to alcohol and other drugs. The science of addiction and its screening and treatment are examined in a collaborative effort by three expert researchers and educators. Written in scientific prose that can also be understood by the layperson, this book is a must-read for those working in the addiction field, as well as those interested in learning more about this devastating disease.



Love With Intention

By Patricia L. Carter & David J. Carter, CreateSpace Publishing

The key to creating an intimate, loving relationship is intentional loving — a commitment to knowing, understanding and loving yourself and your partner on a moment-by-moment basis. Drawing from more than 40 years of combined professional counseling experience, the authors guide readers through the process of applying the power of intention to the key components of intimate love relationships: Commitment, Mindfulness, Intimacy, Honesty, Integrity, Self-Responsibility, Self-Empowerment, Passion and Purpose.



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New rule affects “covered” counselors’ duties under HIPAA

Question: A colleague of mine told me the federal government passed a new rule affecting counselors’ duties under HIPAA (the Health Insurance Portability and Accountability Act). Is this true?

Answer: If you are considered a “covered entity” under HIPAA, the answer is yes. You should familiarize yourself with some important changes to HIPAA based on a final omnibus rule that was published on Jan. 25, with an effective date of March 26. The final rule strengthens patients’ privacy protections and rights, while simultaneously bolstering the government’s enforcement ability.

Many of the privacy and security requirements that apply to counselors and other health professionals who are considered covered entities under HIPAA have been extended to “business associates” who receive protected health information. These business associates include contractors and subcontractors such as billing services and document storage companies. However, temporary conduits such as FedEx or Internet service providers may be exempt from the business associate requirements. Counselors who already had appropriate business associate contracts in place prior to Jan. 25 may need to revise such contracts, but there is a reasonable period of time in which to make revisions. Counselors should review the details in the rule or consult their own attorneys for advice on updating these contracts.

Under the final rule, patients and clients may ask for copies of their electronic health records in electronic form. For example, a counselor cannot make a unilateral decision to download and print electronic records and send

the printed version to a client who requests them. Also, when clients pay for treatment by cash, they may instruct their providers not to communicate treatment information to their health plans. These are obviously points that counselors should know to best protect their clients’ rights.

One of the most important aspects of the new rule affects counselors’ obligations under what is commonly known as HITECH, the Health Information Technology for Economic and Clinical Health Act (note that use of the term *counselors* here refers to those who are considered covered entities under HIPAA). Even though this law was passed in 2009 and added substantial “teeth” to HIPAA’s enforcement and penalties provisions, many counselors and other mental health professionals are still not aware of their obligations under HITECH. If a covered-entity counselor becomes aware of a potential breach of protected health information, that counselor would be legally required to first perform a risk assessment and then to mitigate breaches and report them to affected clients, the federal government and, in some cases, the media (for examples of HITECH violations and multimillion dollar penalties, see the sixth edition of *The Counselor and the Law: A Guide to Legal and Ethical Practice* by Anne Marie “Nancy” Wheeler and Burt Bertram, published by the American Counseling Association).

A *breach* is defined in the new rule as the “improper acquisition, access, use or disclosure of protected health information.” Furthermore, the rule clarifies that there is a *presumption* of a breach under the above definition unless a risk assessment by a provider or business associate demonstrates a low probability

that protected health information has been compromised. The final breach notification provision rule establishes four factors to consider in analyzing and deciding whether to notify individuals:

- 1) The nature and extent of protected health information, including types of identifiers and likelihood of re-identification (for example, credit card numbers, Social Security information and sensitive clinical information likely would call for notice)
- 2) Who the unauthorized person was who used or received protected health information
- 3) Whether the protected health information was actually acquired or viewed
- 4) The extent to which the risk has been mitigated

For example, take the case of a counselor who is a HIPAA covered entity and uses his computer to create and store electronic counseling records. His office is broken into and his laptop is stolen. He suspects the spouse of a client who is going through a bitter divorce because he saw the spouse hanging around the parking lot the evening of the office burglary. His laptop was not password protected and his clinical files were not encrypted. In doing a risk assessment, the counselor would likely realize that this situation creates a presumption that a breach has occurred. The counselor then would be obligated to take various steps listed in the rules to mitigate the breach and provide notice to affected clients and other entities.

Contrast that situation with a scenario in which a counselor loses her smartphone in an airport. The smartphone is protected with a strong passcode (with a combination of letters, numbers and special characters).

Additionally, the counselor has a system that allows her to deactivate the phone. She deactivates the phone promptly upon realizing that it is missing so that it cannot be used. As it turns out, she locates the device just 10 minutes later when she returns to the coffee shop where she had been previously. The owner says he found the phone and tried to activate it to call her, but it already had been shut off. This counselor's risk assessment may produce a different result because the facts show that a breach was unlikely to have occurred.

Other details are set forth in the final rule, including that genetic information cannot be used for insurance underwriting purposes. This factor may be important for mental health clients with genetically transmitted illnesses. Additionally, counselors should be aware that "willful neglect" of their duties under HIPAA and HITECH will lead to compliance review by the U.S. Department of Health and Human Services. Serious monetary penalties may be imposed.



The question addressed in this column was developed from a de-identified composite of calls made to the Risk Management Helpline sponsored by ACA. This information is presented for educational purposes only. For specific legal advice, please consult your own local attorney. To access additional risk management Q&As, visit ACA's website at counseling.org and click on "Ethics." ♦

Anne Marie "Nancy" Wheeler, J.D., a licensed attorney, is the risk management consultant for the ACA Ethics Department.

Letters to the editor:
ct@counseling.org

New!

Family Violence:

Explanations and Evidence-Based Clinical Practice

David M. Lawson



"David Lawson has presented a clearly written, well-organized, and fascinating review of current treatments for victims and perpetrators of family violence. This book will have universal appeal to students as well as to those already in practice. The author's expertise is noteworthy and this book makes a vital contribution to the field."

—Ola Barnett, PhD
Author, *Family Violence Across the Lifespan*
Distinguished Professor Emerita
Pepperdine University

Counselors-in-training, educators, and clinicians will benefit greatly from this in-depth and thought-provoking look at family violence, its effects, and treatment options. This book examines the major issues and current controversies in the field, provides background information on each type of family violence, and offers strategies for combating domestic abuse. In an informative discussion designed to enhance counselors' ability to assess and treat each type of family violence, Dr. Lawson covers both well recognized forms of maltreatment, such as the abuse of women and children, and less understood issues, such as female-on-male intimacy violence, parent and elder abuse, same-sex violence, and dating violence and stalking. Case studies throughout the text illustrate clinical applications in action, and recommended readings are provided for further study.

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Social media's effects on children and adolescents

Most of us have a new outlook concerning how children and adolescents interact with one another today. Young people are immersed in a digital world. Consequently, they have been dubbed “digital natives” because of the way they navigate their social world. Many children and teens spend countless hours engaging in online or texting conversations, writing or reading blogs, and posting status updates.

Counselors and counselor educators are working with an increasing number of students and clients affected by issues related to an “online” world. As professionals, we have a responsibility to our clients and students to help them fully understand the online world they are entering, as well as the impact this has on their “real world” life.

- Statistics on digital technology use (Pew Internet & American Life Project): pewinternet.org

Some of the most popular social networking sites include Facebook, Myspace, Twitter, Pinterest, LinkedIn, Friendster and Bebo. Even YouTube has social networking capabilities such as sharing links with friends. Blogs are a popular form of keeping track of what friends, people of interest and organizations are reporting out. Most children today do not know what an encyclopedia is, yet they are very familiar with Wikipedia. Ask a child or teen how they do research for a school project, and the most popular answer is, “I Google it.”

Most adults today are labeled as “digital immigrants,” meaning they did not grow up with the Internet and still remember a time before cell phones. Some look back fondly on the days when “face time” was more important than “screen time.” The best we digital immigrants can do is to try to understand the new digital generation and attempt to guide them in safe Internet practice. Of course, some digital immigrants have fully embraced

technology and are just as connected as the adolescents with whom we work. These digital adopters have found the benefits to having information at their fingertips and staying in constant touch with others.

Even though a child or adolescent may have hundreds of friends on Facebook, typing messages into a phone or on a computer screen is still a solitary activity. Nevertheless, connecting with others online is a large part of young people's lives today, and this reality will not be leaving us anytime soon. It has become a natural extension to how adolescents spend their time.

Despite the risks, certain benefits can be found in interacting in a cyberworld. For example, the endless creative opportunities afforded through many of the social websites allow for dynamic self-expression and can enhance identity development. These sites also allow children and teens to reach out to others with whom they may share common interests. This is especially important when these connections have not been made at school.

Nevertheless, research does not show evidence that the Internet is a great way to create deep, long-lasting relationships with others at this age. Counselors may need to have conversations with children and teens about the differences between online and offline relationships. The Internet creates a bit of an illusion for young people. To them, it may appear that their online world offers unconditional positive regard and a sense of security, at least until something bad happens.

- Our Digital Lives playlist (TED): tinyurl.com/bks99zs

Privacy

Digital privacy is an area of great concern for parents and counselors. Do children and adolescents really understand the ramifications of all

they disclose on the Internet? Experts report that the more children and teens understand the complexity of the Internet, the more positive their experiences will be and the less likely they are to encounter problems. Nonetheless, children and adolescents have different boundaries than adults and can reveal information about themselves that leaves adults feeling uncomfortable. Parents may not know how to set parental controls or privacy settings on their children's computers or on social networking sites. Children and teens may not fully understand the appropriateness of what they are sharing with others on the Internet or through their phones. They also may not realize that the posts, pictures and comments they share online can follow them for years to come.

- Protecting kids against app dangers (Pew Internet & American Life Project): tinyurl.com/awzrjpo
- Parents, teens and online privacy (Pew Internet & American Life Project): tinyurl.com/d6vjfav
- Netsmartz Internet Safety Presentations (National Center for Missing & Exploited Children): netsmartz.org/presentations
- Tips from Working to Halt Online Abuse: tinyurl.com/5puql
- “Protecting Personal Privacy Online” (Common Sense Media): tinyurl.com/7rurlzx
- “You're Not as Private as You Think” (Common Sense Media): tinyurl.com/azen7kv
- Protecting your privacy and avoiding identity theft (USA.gov): tinyurl.com/axcm9f9

Cyberbullying

We are hearing more and more about the cyberbullying that occurs with teens and children. With cyberbullying, hurtful

pictures, comments or rumors can be used to harass, threaten and humiliate others. The hurtful messages, photos or videos are shown to countless others, furthering the humiliation and pain of the victims. This type of bullying goes beyond face-to-face interaction and follows students into their bedrooms through their computers and phones. They cannot escape it because teens live in a digital world and spend countless hours connected to their devices. These types of incidents push some kids to their breaking points, causing intense emotional stress and pain, and even leading to suicide. But for many children and teens, giving up their digital connections is not an option, even after talking to an adult.

- Bullying.org
- Cyberbullying.org
- Cyberbullying Research Center: cyberbullying.us
- Stopcyberbullying.org
- Cyberbullying (National Crime

Prevention Council): tinyurl.com/n3tgpq

- How to prevent and stop cyberbullying (Kidspower): tinyurl.com/azushso
- “Stand Up to Cyberbullying” (Common Sense Media): tinyurl.com/7kssuef

Our responsibility as counselors

What can counselors and counselor educators do to help with the online world in which our clients are often immersed? First, we can try to understand this world a little better. This does not mean we all have to create a Facebook page or set up a Twitter account, but spending time on these sites to understand how they work can be useful. When a client comes to you concerned because of something that has been shared on the Internet, it is helpful for the counselor to know how it has been shared or who actually sees it. Having a good grasp of these issues allows counseling time to be used more effectively. Counselors who understand how privacy settings work on these sites

can be helpful not only to teen and child clients but also to the parents attempting to monitor them. As counselors, we can also brush up on the legal ramifications of cyberbullying, sexting and electronic dating violence. Certain states have passed legislation specifically addressing some of these issues. When in doubt regarding any action that should be taken, always consult with an attorney who has expertise in technology law.

- Internet safety (National Crime Prevention Council): tinyurl.com/ax8pgg5
- Enough Is Enough (Internet Safety 101): internetsafety101.org
- Internet safety (KidsHealth): tinyurl.com/dktdqn
- Parent’s guide to Internet safety (FBI): tinyurl.com/3fenzjq
- Preteen rules for online safety (SafeKids.com): tinyurl.com/32lkpbv
- Safety tips (National Center for Missing & Exploited Children): tinyurl.com/a6ssg3w

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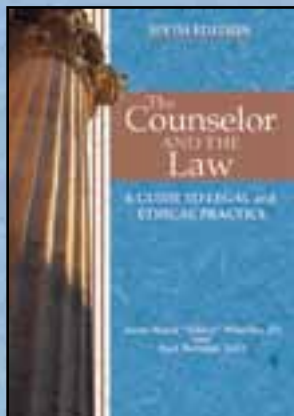
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The Counselor and the Law: A Guide to Legal and Ethical Practice

Sixth Edition

Anne Marie “Nancy” Wheeler and Burt Bertram



“The advice given in this clear, current, and engaging book can promote sound practice, while minimizing the chances of becoming involved in an ethical or legal complaint. I highly recommend The Counselor and the Law as a valuable resource for both new and seasoned professionals.”

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Professor Emeritus of Human Services and Counseling California State University, Fullerton

In this bestselling book the authors combine their far-reaching experience

to inform counselors and other mental health professionals about the legal and ethical dilemmas that can arise in practice. In addition to providing a broad overview of the law and ethics, they discuss current information regarding federal and state laws, professionals’ legal and ethical responsibilities, and ways to manage the risks inherent in the delivery of mental health services.

This edition contains a new chapter on the use of social media and other Internet-related issues, updates to HIPAA through the HITECH Act and regulations, a new legal/ethical decision-making model, and discussion of the specific legal risks for counselor educators, such as recent court cases involving students’ work with LGBT clients. The issues surrounding civil malpractice liability, licensure board complaints, confidentiality, duty to warn, suicide and threats of harm to self, professional boundaries, records and documentation, and managing a counseling practice are also addressed in detail. 2012 | 288 pgs

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- “Internet Safety: Rules of the Road for Kids” (Common Sense Media): tinyurl.com/a3ptexa
- Online safety tips (CyberPatrol): tinyurl.com/b9rqtt0

There are benefits to us utilizing digital technology for ourselves as counselors as well. For example, creating a Twitter account (twitter.com) does not obligate you to actually “tweet” anything; you can simply find others whom you would like to follow. There are numerous professional organizations that have created Twitter accounts, including the American School Counselor Association (@[ascatweets](https://twitter.com/ascatweets)), the American Counseling Association (@[CounselingViews](https://twitter.com/CounselingViews)) and *Counseling Today* (@[ACA_CTOnline](https://twitter.com/ACA_CTOnline)). This can be a great way to stay current on information related to your areas of interest.

While writing this article, I discovered Schooltube (schooltube.com), safe, secure and free videos made by schools for teachers and students. Blogs can also provide readers with an abundance of information related to a variety of subjects. Staying connected to others through Listservs, email and texts also counts as utilizing digital technology. So maybe you are more of a digital adopter than you thought.



You can find these and other links on “The Digital Psyway” companion site at digitalpsyway.net. Did we miss something? Submit your suggestions to column editor Marty Jencius at mjencius@kent.edu. ♦

Laura Gallo is a professional school counselor at Linn-Mar High School in Marion, Iowa, and a second-year doctoral student in counselor education and supervision at the University of Iowa. Contact her at lauragallo73@hotmail.com.

Letters to the editor:
ct@counseling.org



Natosha Monroe

A long, hard road toward licensure

We met Natosha Monroe when she was about to deploy to Afghanistan with the Army Reserves. She has a master's degree in counseling but has had a hard time getting her hours toward licensure, despite spending more than a decade as an Army behavioral health specialist with assignments to Afghanistan, Guantanamo Bay, Haiti and the Pentagon. She has been completing her doctoral studies through several changes of location. She also served as a blogger for the American Counseling Association during her time in Afghanistan.

There have been twists and turns along Natosha's career path, but she stays the course. Here is her story.

Rebecca Daniel-Burke: The last time we spoke with you, you had returned from your time with the Army Reserves in Afghanistan. You were working at the Pentagon as a behavioral health specialist. So let's pick up your story from that time period.

Natosha Monroe: I became very disheartened working as a federal employee. The work I was doing did not count toward licensure because licensed professional counselors (LPCs) were not recognized by the military at the time.

RDB: None of those hours counted?

NM: None.

RDB: Were the people at the top of the military hierarchy aware of that?

NM: Interestingly enough, I spoke with a general and told him my hours didn't count. He replied, "What do you mean? We have plenty of counselors in the military." He, of course, assumed we were all counselors — psychologist, social workers, etc. He had no idea of this division, which did not favor LPCs.

RDB: Thank goodness steps are finally being made toward changing that. But let's get back to you for a moment. Did you stay in that position?

NM: No, I got offered a position with a contractor to work at the FBI training division at Quantico.

RDB: What did you do there?

NM: I worked as a subcontractor researching and interviewing special agents. Then we would report back our findings to the training division.

RDB: That sounds interesting. Did you like it?

NM: I did. I think because of my military background, I was able to get closer to the agents and break down communication barriers a little faster than others. In a way, military and the FBI are similar.

RDB: How long did that position last?

NM: It lasted a year and then I was asked to extend, but I decided against it.

RDB: What was next for you?

NM: Well, my grandmother was very ill, so I moved back to my hometown of Blooming Grove, Texas, to help care for her and look into opportunities to accumulate hours toward licensure.

RDB: Sometimes it feels like circumstances conspire for a certain outcome. Were you also going to school at this time?

NM: Yes, I continued my Ph.D. studies at the Chicago School of Professional Psychology. I am focusing on trauma.

RDB: You worked at the traumatic brain injury (TBI) clinic in Afghanistan, didn't you?

NM: Yes, that experience definitely helped me focus my studies on trauma.

RDB: Have you also found a place to accumulate your hours?

NM: Yes, I am working on that now. I was able to spend time with my grandmother during the end of her life. We talked about everything. Now I am ready to find the right place to work toward licensure.

RDB: I am so happy for you that you had that time with your grandmother. You will never be sorry you took that time.

NM: Thank you.

RDB: Has it been comforting to be at home in Texas during this grieving period?

NM: Yes, it has been comforting. I go running with a girlfriend I have known all

my life. Her husband is the pastor at the local church. It feels good to be at home during this period.

RDB: Do you have any leads on finding a position near your hometown?

NM: Yes, I got my foot in the door at a group practice because my friend and colleague is employed there. We are discussing the possibility of me joining their group and helping to develop a veteran and military referral source for them.

RDB: That sounds like a perfect opportunity for you.

NM: I hope to start when I return from Africa in a few weeks.

RDB: Why are you going to Africa?

NM: My Ph.D. program is an international program that has partnerships with several countries. I am going with colleagues to Ghana to explore the mental health system there.

RDB: How interesting!

NM: Yes, we will be working ... at the capital in Accra where we will be visiting the psychiatric hospital and the orphanages.

RDB: It sounds like a fascinating trip. I look forward to hearing about it. I was wondering, are you still in the Reserves?

NM: Yes, I connected with the group here, and they already had me speak with a veteran who was suicidal.

RDB: You have a gift that allows you to quickly identify with soldiers and veterans.

NM: Thank you.

RDB: Will you be back from Africa in time for the ACA Conference in Cincinnati?

NM: Yes, I wouldn't miss it. ♦

Rebecca Daniel-Burke is the director of professional projects and career services at ACA. Contact her at rburke@counseling.org.

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Building a more complete client picture

By Lynne Shallcross



An ecological perspective in counseling involves identifying how a client's environment affects his or her well-being and development, and using interventions that move beyond exclusive focus on the individual

Imagine picking up a stone on the side of a creek. Your task is to understand its markings, characteristics and shape solely through examination of the stone itself.

Using that method would result in a comparatively limited view of the stone, says Michelle Flaum Hall. "If, however, we acknowledge the forces within [the stone's] environment — the wind, water, weather, geographic characteristics and contact with other stones — then we begin to build a fuller picture of that stone's development," she says.

The same idea applies to counseling work with clients, says Hall, an assistant professor in the Department of Counseling at Xavier University in Cincinnati. "We must examine clients within the context of their lives because it is within this context that they grow, develop, suffer and change," she says. "When we strive to understand and help people, we cannot underestimate the impact that their environment has had and will continue to have on their well-being and development. Most clinical and nonclinical concerns do not rest solely within an individual; therefore, interventions should not solely target the intrapersonal."

What Hall is describing is the ecological perspective in counseling, which, much like the study of ecology in the physical world, takes into account the many systems that influence and interact with individuals on a regular basis.

In Ellen Cook's book *Understanding People in Context: The Ecological Perspective in Counseling*, published in 2012 by the American Counseling Association, she writes that the term *ecosystem* "refers to the sum total of interactive influences operating within an individual's life in varying degrees

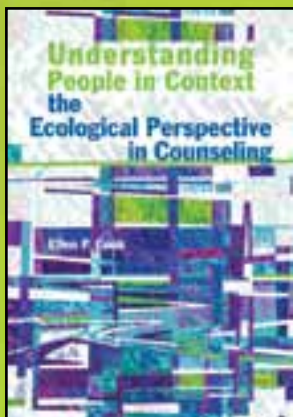
of proximity, ranging from his or her biologically determined characteristics to the broader sociocultural context structuring human interactions. ... What happens to an individual rarely occurs in a vacuum but rather is shaped by the confluence of events, propensities, relationships, memories and other features of a life elaborated over time and across settings."

Hall, an ACA member who also runs a private practice in Dayton, Ohio, recalls one of her clients who was dealing with depression. Negative thought patterns exacerbated the client's depression, Hall says, but she also had a long list of other issues affecting her life and emotional state. The client lived in unsafe housing, was in an abusive relationship, had financial concerns, felt disconnected from her church, had strained sibling relationships, felt disempowered at work because of discriminatory practices, felt isolated geographically by living in a rural setting and felt disconnected culturally because she was a member of a minority group and didn't have any local connections with others who shared her culture. "If I were a cognitive behavioral therapist who focused solely on helping her change how she thinks about her life circumstances, I may be focusing too narrowly," Hall says. "However, if I also use the lens of the ecological perspective, I can help her identify multiple paths for growth and change, which could all have some impact on her mental and emotional well-being."

Alongside treatment for depression and low self-esteem, Hall worked with the client to prioritize a list of the aspects of her life she was unhappy about. "We targeted seemingly insignificant things first, such as painting her bedroom her favorite color,"

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Hall says. “This was something she had never done before, but she mentioned several times that even her room depressed her. She discovered that some things really are in her control and that she does have the power to change some aspects of her life.”

The client’s progress snowballed, Hall says, leading to big changes that were accomplished one step at a time. The woman gradually built a solid support network for herself by joining a local book club and walking club and making friends. Hall credits that action for eventually giving the woman the strength to leave her abusive relationship. She also found an apartment closer to a nearby city, visited local churches until she found one she liked and summoned the courage to speak to human resources to spark policy changes at her job.

“These were but a few changes my client made to help her transform her life,” Hall says. “She was healthier in mind, body and spirit and felt empowered to shape her life as she saw fit. In our last session together, she gave me an origami bird she had made using paper that was her favorite color — for teaching her ‘how to use her wings,’ she said.”

“A counselor oriented to the ecological perspective is a creative counselor who recognizes that all aspects of a client’s context can be placed on the table for assessment and intervention,” Hall says.

Life’s interactions

Susannah Coaston, a counselor and supervisor at a community mental health agency just outside Cincinnati, says the ecological perspective acknowledges that to best understand their clients, counselors must also understand the relationships clients have with the people and contexts around them.

“An individual acts on his or her environment, and in a reciprocal manner, the environment acts on the individual. It’s how the individual makes meaning of these interactions that can impact change,” says Coaston, an ACA member who contributed to *Understanding People in Context* and is also an adjunct instructor in the counseling program at Northern Kentucky University. “The change that is sought in counseling involves improving the [client’s] fit in the environment with the right balance

of challenge and support. This fit is individualized to the person.”

Cook, a professor of counseling at the University of Cincinnati, also co-edited the 2004 book *Ecological Counseling: An Innovative Approach to Conceptualizing Person-Environment Interaction* with Robert K. Conyne. She says the ecological perspective first took hold within the helping professions four or five decades ago. In 1977, psychologist Urie Bronfenbrenner “organized human life contexts as a series of concentric circles with the individual nestled at the heart,” Cook writes in *Understanding People in Context*. Those circles, moving further out in terms of proximity to the individual, were dubbed the microsystem, mesosystem, exosystem and macrosystem.

“In my experience, however,” Cook writes in her book, “counselors are typically more comfortable thinking about the sites (e.g., home, school, neighborhood) involved in someone’s life than about abstract connections among systems that can be difficult to translate into the particulars of a person’s life. There are other ways to think ecologically about behavior while remaining faithful to Bronfenbrenner’s insightful schema. In our ecological perspective, then, we will refer to contexts differently than Bronfenbrenner did while retaining several of his key assumptions about the nature of contexts. These key assumptions about contexts concern proximity, salience and embeddedness.”

Cook’s view of the ecological perspective in counseling includes four propositions. The propositions aren’t new to counseling, she says, but combining them and viewing them all as equally important is innovative.

The first proposition is that all behavior is personal. In this sense, Cook says, a person’s behavior is a function of that person’s unique characteristics — both characteristics that are genetically based and those that have developed over time on the basis of the person’s past experiences.

The second proposition is that all behavior is contextual, meaning that it is influenced by the circumstances of a person’s life, Cook says. This can include both physical circumstances, such as the geographical climate or the quality of a person’s housing, and the human context, such as a person’s relationships and connections with groups, Cook explains.

The third proposition is that all behavior is interactional. That means even the simplest behaviors are influenced by the characteristics of the individual interacting with the characteristics of that individual’s life context. “The world around the client has an enormous impact on the person’s life,” Cook says. “Because we view behavior as interactional, counselors’ practice of focusing only on the client’s psyche leaves out much of the client’s reality that might be changed.”

The fourth proposition contends that all behavior is concerned with meaning. “In other words, it’s how people perceive, evaluate and predict events in their lives,” Cook says. “People can perceive the same things quite differently. Some of these perceptions are genetically based — our preference for certain flavors, for example — but most of the issues counselors and clients explore together are based on how the client has learned to perceive and evaluate stimuli, events, other people and so on.”

Listen and learn

One of the most important aspects of the ecological perspective in counseling is the ecological analysis, Coaston says. “I begin by building a strong therapeutic relationship so I can best understand [the client’s] situation,” she says. “I try to be mindful of how the client makes meaning of the situation. Here, I often use metaphor to help gain understanding. Understanding that a client feels as though they are in a hole in the ground, and every time they try to pull themselves up, more dirt falls from the walls, can help me to feel how the client feels in [his or her] circumstance.”

In the chapter Cook and Coaston co-authored in *Understanding People in Context*, they offer a wide variety of “questions to consider in developing an ecological analysis.” Among those questions:

- How is the problem situated within the client’s ecology (who, what, when, where)? And what does it mean to the client?
- Where does the client live out his or her life physically and interpersonally (where is the client’s ecological niche)?
- What are the client’s important interactions with people? Groups? Community or neighborhood? Larger systems? How do these interactions influence the client’s life?
- What life roles and identities appear salient to the client?
- What central life meanings are salient to the client’s targeted concerns?

Coaston says these analysis questions are an excellent place for the general counseling practitioner to start. “The questions posed can be used to better understand clients beyond [what] is

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usually gained from most traditional intake or diagnostic paperwork. For example,” Coaston says, quoting from the book, “‘What impact does time have on the client? How does he or she experience time every day (e.g., is there too little or too much of it, is it going by too quickly or too slowly)? Where does the person feel he or she is in the life cycle? How age appropriate does the person feel important life events or problems are?’ [These questions are] unlikely to be easily answered by a clinician who does not work from an ecological perspective. However, [they] can give insight into the inner experience of a client in [his or her] daily life.”

At the agency where she works, Coaston is expected, for billing purposes, to develop goals for treatment during the first session. “However, after this first session, I let the client’s story marinate in a way and begin making connections based on my understanding,” she says. “These connections are discussed in future sessions so I can make sure I’m seeing the concern in a similar manner to the client.”

After reaching a better understanding of each client and situation, Coaston may teach the client new skills or offer resources so the client can address elements of the situation on his or her own. But Coaston also stays on the lookout for ways that the client’s environment could possibly be changed. “In our agency, we work closely with case management staff who can help counseling staff understand the home environment and identify community resources that could be helpful. I will also look at how the client creates meaning in [his or her] life and look to expand, adjust or keep the current meaning making for the health and well-being of the client.”

Some counseling perspectives tend to revolve around a belief that the potential for change rests solely within the client, Coaston says. In contrast, the ecological perspective takes into account how clients interact with their environment and contends that change sometimes must happen outside the client.

The ecological perspective also dissuades counselors from viewing clients as “unmotivated” to change, a label that Cook rejects as never being helpful. “Just

what barriers to change does the client see? How might the counselor and client see the life concerns under question very differently?” Cook asks. “Clients may give up efforts to change their lives because the challenges seem insurmountable and their resources inadequate. If counselors are able to suspend their own perceptions and experiences in order to truly understand the client’s life from [the client’s] own perspective, the counselor will find it easier to identify resources and opportunities.”

Counselors who fail to take a client’s environment and meaning making into account run the risk of blaming the client, Coaston says. “It is easy to forget that our clients’ framework for perceiving the world may be different from our own. What may be straightforward, easy or not a big deal for us can be anxiety provoking, shaming and not worth it for our clients. When we can understand the relationship between the client and [his or her] context, we may find change is needed in the client, the environment or, often, both. However, when we look at our client without the environment, it is up to us [as counselors] to ‘fix’ the client to resolve the problem,” she says.

Much like counseling as a whole, Cook says the ecological perspective stresses that clients are the experts of their own lives and encourages counselors to focus on client strengths, such as a supportive network of relationships or an ability to make and carry out decisions. “In the ecological perspective, we encourage counselors to identify the resources and challenges the client has today,” she says. “What do they have to work with? What are the issues or roadblocks preventing them [from moving] ahead in life? If a counselor cannot identify any strengths or resources, it may be useful to consider whether the counselor has negative preconceptions that might prevent the counselor from truly helping the client. People do the best they can with what they have and what confronts them in life as they perceive it now. How have they been able to get this far?”

Cook points out that not all counselors have the skill or interest to help clients with every environmental factor. “Counselors may be uncomfortable exploring a client’s sexual orientation, religious questions, housing needs,

weight issues ... We all have limits to what we can do because of who we are as individuals and professionals. We need to build our own network of support in our professional lives — people we know can help our clients when we cannot do so. It’s worth our time to establish these networks so that we can refer as needed.”

Entering the client’s cave

Hall, who co-authored a chapter with her mentor, Geoffrey G. Yager, about training counselors in *Understanding People in Context*, says assessment from an ecological perspective demands that counselors formulate client problems accurately, in detail and within multiple dimensions. “Articulating the problem as ‘I am depressed’ or ‘I’m worried about my child’ is not enough,” Hall says. “The ecological perspective demands a detailed problem statement that answers the questions who, what, when, where, why and how often. We determine the challenges and supports at the ‘person’ and ‘environment’ levels and the health of the interaction between the two. We strive to understand the meaning the client derives from his or her life. Diagnostically, we understand the importance of all axes, and our conceptualization and targets of intervention must include Axis IV — deficits and strengths.”

Hall believes it is imperative to model the ecological perspective for her students. When sharing examples from her own experiences with clients, Hall says she uses the “language” of the ecological perspective so that students will learn from day one to expand their views of clients beyond the intrapersonal.

Even when prompted to use specific tools, her students learn to view clients within their complex, multidimensional contexts. “For instance,” Hall says, “if I give students a case to examine and I provide a multi-axial diagnosis, I am careful to spend as much time with Axis IV as I spend with Axis I. I prompt discussions about the relationship between person and environmental factors, and I make sure that we expand our lens to include strengths or nutritive factors as well as deficits, both within the person and his or her environment.”

Hall says counselor educators can use multidimensional role plays, case studies and case presentations that emphasize an ecological perspective, thereby inviting



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students to understand the rich context of clients' lives and problems. "By providing ongoing supervision using an ecological perspective, our practicum and internship students will build a strong foundation for their work in the future," Hall says.

Hall points to something she learned from Yager, a professor of counseling at the University of Cincinnati, who likened counseling to cave exploration. "If we enter into our client's cave along with them, then we both will have expertise in various areas," Hall says, recounting Yager's lesson. "Because our client lives here, he or she will have knowledge about much of the geography of this cave, but may miss important aspects of the terrain due to the patterns of movement and awareness that he or she has developed. Some of these patterns can become self-limiting, to the point that our client would like to leave the cave or change the cave but cannot due to these patterns of behavior, meaning making and perceptions about self and environment. The counselor enters this cave not as an expert of this particular cave but with a fresh perspective and a set of tools to help the client uncover aspects of himself or herself, or of the environment, that perhaps the client has never seen. We need our client to show us around, and they need us to see with new eyes and to share our tools. An ecologically oriented counselor — and cave explorer — would focus just as much on understanding that cave as she would on understanding the client because, most likely, the changes, solutions and well-being will come from the interaction between the two."

Many times, Hall says, people seek counseling because they are experiencing a poor fit between themselves and some aspect of their environment, whether

that aspect is a relationship, a career, a peer group, a lifestyle or a geographic location. For instance, a large Air Force base is located near Dayton, where Hall practices. One of her clients was a military spouse who moved from Southern California to Ohio in the fall, never having been exposed to a cold-climate winter before. The woman loved the outdoors and typically remained very active year-round, but she started feeling paralyzed by the cold, dreary days of winter in her new home.

"This quickly impacted her mood, as she was no longer physically active, social or experiencing nature, which was her connection to her spiritual self," Hall says. "Together, we worked to identify how she was interacting with this environment, the meaning she had created about this experience and then how she could begin to change this interaction. While it is true that we cannot change the weather, we can learn how to change our interaction with it and its interaction with us. The ecological perspective provided the lens, and cognitive behavior therapy [CBT] and mindfulness helped by giving tools to alter meaning making, appreciate the present moment and learn to tolerate the discomforts inherent in everyday life."

The ecological perspective can complement almost any counseling theory, Cook says. Coaston calls it the lens through which she perceives each client and situation. Once the counselor has a clearer picture of what the client is hoping to achieve, different counseling theories can be utilized, she adds.

Cook explains that the ecological perspective is metatheoretical — not a theory itself but rather a series of principles that underline many other

counseling theories. "The perspective is not meant to replace any other counseling approaches, and we [as proponents of the ecological perspective] certainly don't mean to imply that there's anything wrong with other approaches," she says. "What we do recommend is that counselors learn to ask themselves what other aspects of the client's life ecology they might be overlooking."

Hall agrees. "The ecological perspective helps us conceptualize and intervene with our clients more fully than many single theoretical orientations," she says. "It ... weaves together constructs and processes to create a broad picture of the client's life, from intrapersonal processes, including meaning making, to interactions with people, multiple environments, life events, history, culture and society across time. While a single theory often targets a small part of the dynamics contributing to the client's life concerns, the ecological perspective provides the bigger picture. Therefore, with a wider lens, we have a greater range of possible targets of intervention."

Cook and Coaston say the ecological perspective can apply to almost any counseling setting and client. "However," Coaston says, "clients who are able to think abstractly, willing to make tough changes and motivated to look at their circumstances with new eyes are most successful."

'The problem isn't the problem'

Schools are their own ecosystems — and that makes them a perfect place to implement the ecological perspective in counseling, says George McMahon, an assistant professor and counseling program coordinator at George Mason University in Fairfax, Va. He began

Multiculturalism and the ecological perspective

Comprehending diversity from an ecological perspective means understanding that a person's cultural identity results from a combination of biological, psychological, physiological, physical and spiritual selves that interact in life spaces such as family and work settings, says Huma Bashir, who works as a counselor at a nonprofit community health center in Springfield, Ohio.

"When evaluating cultural identity, the ecological approach considers all levels of influence in a person's life, looking at them in context," says Bashir, who co-authored a chapter on the topic for Ellen Cook's book *Understanding People in Context: The Ecological Perspective in Counseling*, published by the American Counseling Association. "The multifaceted nature of the ecological approach is essential to dissect cultural differences of individual clients, allowing a clinician to take a snapshot of contextual information. It is the multidimensional factors that could pose a challenge for the treatment of mental health issues for any population, [but they are] especially critical for ethnically diverse clients."

Simply viewing diversity in terms of a person's cultural background

is ineffective because it negates the interactions between a comprehensive list of cultural factors, says Bashir, who conducted research on Pakistani Americans living in Springfield last year as part of her doctoral dissertation at the University of Cincinnati. For example, she says, the experiences of a female Pakistani American residing in a small rural community would be different from those of a female Pakistani American living in a metropolitan urban community.

Mental health issues and cultural factors must be viewed together, Bashir says, because cultural factors may affect the definition and acceptance of mental health disorders. "Muslims determine their mental health in the context of religious values," explains Bashir, a member of ACA and the Association for Multicultural Counseling and Development, a division of ACA. "Cultural factors and religious views may influence the diagnosis and treatment of mental illness among Muslims within mental health services. Working with clients from a diverse ethnic group cannot be put in a pigeonhole, and utilizing the ecological perspective would offer a fluid, flexible

and contextual [view] of life events. Using the ecological approach, which will help clinicians uncover particulars about cultural identity, can bring about an understanding of clients' cultural contexts, which will help to avoid any misdiagnosis."

Clinicians must remain cognizant of the many factors that can interact to create cultural identity and influence the effectiveness of counseling services, Bashir says. "For example, a counselor will be more effective if she understands the age and developmental level of her client and how those factors intersect with her family, parents and friends."

Bashir recalls working with one client who presented with physical symptoms associated with malnutrition. "After investigation, [it ended up] the young woman was reacting to an arranged marriage she felt she was being forced into, and she was unable to communicate her upset and anger to her parents. By being aware of and understanding the relevance of culture, clinicians can provide more effective services."

To contact Bashir, email hbashir@rockinghorsecenter.org.

— Lynne Shallcross

researching the idea in 2007 and has presented on it at various conferences ever since.

Schools themselves are divided into multiple systems, McMahon says, such as social groups within the student body, different grade levels, teachers versus students, and so on. Schools are also a system nested within the larger community. The basic idea behind implementing an ecological perspective in a school counseling setting is to acknowledge that any problem or issue must be considered, and often solved, within the context of the system, McMahon says.

For example, a principal might say to a school counselor, "We're having a problem with low attendance among our ninth-graders. They're not getting to school on time." Traditionally, attendance

alone might have been viewed as the problem, says McMahon, a member of ACA and the American School Counselor Association, a division of ACA. "[But] from an ecological perspective, that's feedback that something within the system is out of balance," he says. "Maybe the kids aren't coming to school on time because they don't feel safe at school. Or maybe within their community, they're not seeing kids graduate, so they value going to school and graduating differently. Or maybe many of these kids are older siblings and they're getting their younger siblings ready, and that's why they're late. We tend to assume that the problem lies within the students, and we address it from a motivation standpoint."

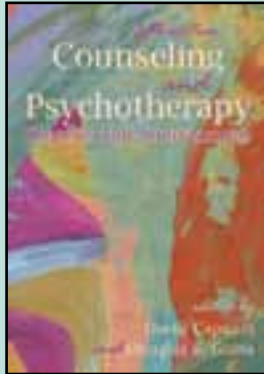
Considering contextual variables can lead counselors to seek solutions in more than one place, McMahon says.

Take, for example, instances of school bullying that target those perceived to be sexual minorities or gender nonconformists. Using an ecological perspective, the counselor would first start on an intrapersonal level, McMahon says, working with the student on ways to stay safe and self-advocate. Then the counselor might look at how teachers intervene or the language that teachers allow students to use in their classrooms, he says. Next the school counselor might look at schoolwide policies, and if those policies don't cover sexual minorities or gender nonconformists, the counselor might begin advocating for change.

Counselors are in the perfect position to apply this perspective, McMahon says, because they are among select few school personnel to have access to students, teachers, administrators, coaches, parents

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and community members. “Because collaboration is a vital component to this model, professional school counselors have a role as connectors, because they are in contact with such a wide variety of stakeholders,” McMahon says. “They can be the hub of the collaborative wheel, so to speak.” Additionally, he points out, school counselors have the skill set to foster collaboration, including skills centered on empathic listening, team building and advocacy.

Although it is prudent to consider all the contextual factors as a school counselor, McMahon acknowledges that can feel overwhelming. The good news, he says, is that just doing something — anything — can make a difference. “You don’t want to let yourself be paralyzed by how big a job it is. Make a guess [toward a solution], start somewhere and then evaluate along the way. Any change you make will ripple out.”

Another piece of good news? School counselors don’t need to change what they’ve been doing; they simply need to open their eyes more fully to what might be contributing to an issue, McMahon says. “The problem isn’t the problem. It’s an indication something else is going on,” he says. School counselors can utilize the relationships they have built, both within the school and the community, to address any issue, he adds.

The first step in bringing the ecological perspective to school counseling is to intentionally see and use the connections, McMahon says. “It’s really a paradigm shift, a shift in perception. But once you begin to see the interconnections, you can’t stop seeing them. At that point, the next step is just to act in accordance with what you see. When you realize that student scores are not just a result of a lack of study skills, [that] there may be several other factors — some outside of the school — that are affecting those scores, then think creatively about how to act in accordance to what you see. Address the larger factors, collaborate with others who have access or expertise you need, and work across levels rather than just ‘fixing the child.’ At that point, you are working ecologically.”

Taking an ecological perspective can also help to carry out the ASCA National Model, McMahon says. “The ASCA model promotes a vision of what to do

and, to some extent, how,” he says. “The ecological model supplies the ‘why’ and expands on the ‘how’ by showing how all of the different roles and responsibilities are connected and working toward the same goal of helping to create and maintain a healthy, equitable, diverse and balanced system that graduates students who are ready to actively and positively participate in the larger community.”

Seeing life through the client’s eyes

Though Hall makes a point of exposing her students to the ecological perspective, Coaston says that isn’t the norm among counselor educators. Elements of the perspective may be touched on in some classes, she says, but as a whole, it generally goes uncovered.

But that shouldn’t stop counselors from learning about and applying the ecological perspective, says Coaston, who points to both of Cook’s books as good starting points. Formal training in the perspective isn’t necessary, she says, but she adds that supervision and consultation with someone who understands the perspective can help ensure fidelity.

Cook says most experienced counselors eventually end up applying the ecological perspective to some degree, even without training. “They realize that human behavior can never be understood in a very simple, straightforward way,” she says.

Cook suggests that counselors who are just starting their careers begin applying the perspective by looking for what the client has done right. At times, she says, counselors see clients who seem to have one problem on top of another, and in these instances, counselors may be tempted to look for what the client is doing wrong. “Supervisors need to remind counselors that clients do the best they can with what they have experienced and how they perceive it,” she says.

Cook reflects on one particular client who fit that description. The client had worked out a plan to support herself and her children throughout the month by using a mix of food assistance, financial assistance, free church suppers, food banks and donating her blood plasma for money. “She knew exactly where to go and when in order to provide for her children,” Cook says. “These strategies of exploring, identifying and utilizing community supports could be used in

many ways to assist her family to change their lives permanently.”

Hall cautions beginning counselors not to fall into the trap of believing that any single theoretical orientation will fully explain a client’s situation or provide an all-encompassing list of interventions. “I would encourage them to learn about ecological counseling to help them widen their lens [because] I believe we can do clients a disservice when we limit our view,” she says. “Allow yourself to consider a full range of intervention targets, even if at first the change seems too miniscule or irrelevant. The client I spoke of [previously] began her path to transforming her life by painting her bedroom. To some, this could be considered irrelevant to the counseling process, but to an astute counselor, this can represent forward movement that should be nurtured in the hope that it leads to something bigger over time.”

Cook offers more-seasoned counselors reassurance that they haven’t been doing anything wrong up until this point. However, she says, applying a focus on the ecological perspective may assist them in noticing additional opportunities where change could occur for clients.

Hall agrees. “Ecological counseling can inject new life into counselors’ work by reminding us to be creative, open-minded and respectful of the multiple systems at work in the lives of our clients.”

The ecological perspective offers counselors the opportunity to see details of a client’s life they may have missed otherwise, Hall says. Generally speaking, she adds, counselors can miss important aspects of a client’s context, especially when the counselor is either too similar to or too different from the client. “If we perceive a great likeness to our clients, we run the risk of making assumptions about them because we’ve ‘filled in the blanks’ with our own experiences, perspectives and judgments,” she explains. “Likewise, if we perceive our clients as being vastly different from us, we can miss important aspects of their context because we don’t know what we don’t know, so to speak. By attempting to understand every client as fully as possible using an ecological lens, I believe we decrease the likelihood that our own contexts might impede us in our quest to both realize and appreciate our clients.”

In cutting across a wide range of current counseling theories and approaches, Cook says the ecological perspective implores counselors not only to gain a fuller understanding of their clients’ worlds but also to work toward change within those worlds. “In a nutshell, the ecological perspective offers a language and model for understanding human behavior that encourages counselors to think creatively and to reach outside their own offices to other professionals and services to build collaborative programs for change,” she says. “When we truly appreciate how clients’ lives are influenced by sociocultural forces and limitations outside their control, we can broaden our change efforts to work toward social justice for all people.”



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Life without an alarm clock

By Stacy Notaras Murphy



On the surface, retirement looks like paradise, but unless counselors are prepared to redefine themselves and make new connections, even they can get tripped up while making the transition

Retirement often seems to be about trade-offs. You may have more time to do the things you love but less money to devote to those things. You may have more opportunities to exercise and enjoy life, yet you have to navigate new health care and insurance issues. You can travel more, but that might mean connecting less often with former colleagues and community friends. You may finally get to focus on being a full-time grandparent or spouse, but your previous career-focused identity must be left behind.

Counselors are trained to help clients navigate this changing landscape as they cross the “finish line” into what may be the most carefree and satisfying time of their lives. The counseling room is a great place for clients to engage in goal setting and strategize for the optimal retirement experience. So, when counselors reach that golden age of retirement themselves, it’s safe to assume they will slide right into the new paradigm with ease, right?

Not so fast.

“Counselors recognize retirement as a part of career development,” says Sandy Magnuson, a retired school counselor and American Counseling Association member in Greeley, Colo., “[but] I don’t think I integrated that theoretical notion into *my* life. That was about *other* people.” Retiring at the earlier end of the spectrum at age 60, Magnuson faced the question that all counselors are likely to confront: What happens after a career spent helping others?

Magnuson’s life had been built around her connections to the counseling community. “I met my husband at a counselors conference. We ate, slept and drank counseling and counselor education,”

she says. “We attended conferences. We participated in professional organizations in a variety of ways. We read counseling literature. We wrote articles together. We talked about counseling, teaching and scholarship. Counseling was more than a profession. It permeated nearly every aspect of our lives. As I thought about retirement, I worried, ‘If I am not a counselor or counselor educator, who am I? How do I introduce myself?

How do I remain credible? Will my life have purpose? What will I do with all of my time?’ I had to redefine myself.”

Facing that string of tough questions, many retiring counselors opt to remain connected to the helping community. Opportunities for engagement range from simply reading up on new treatment trends to opening limited private practices. In fact, keeping a toe in the counseling waters may be the healthiest

choice of all. According to a widely cited University of Maryland study published in 2009, those who keep working on a limited basis during retirement have better health outcomes, including fewer major diseases and disabilities, than those who quit working altogether. Furthermore, the study



Sandy Magnuson and husband Ken Norem write a mental health column for a rural newspaper as one way of staying connected to the counseling profession.

revealed that those who continue part-time work in their original field enjoy better mental health than those who retire and blaze an entirely new path.

Before retiring from full-time work in 2003, Estela Pledge provided mental health and substance abuse counseling at a community mental health center in Macomb, Ill. Now, at 71, she may have the ideal work situation. Pledge has a small private practice and works part time at the Western Illinois University Health Center, where she provides clinical services as well as supervision to interns and graduate assistants. “Because I can limit the amount of private clients I see, and with the limited hours at the university, I have the best deal. Both of these jobs are relaxing in comparison with working at the mental health center. The students at the university are young, and the women I see in private practice are motivated. So this has been great,” says Pledge, an ACA member who still lives in Macomb.

Pledge has had to learn to live with less money and find outlets for her spare time, but she appreciates the opportunities semiretirement affords her to spend time with her grandson and friends. “Some colleagues and I met, and they wondered how I had transitioned so easily,” she says. “I told them that I did not retire totally since I went to work at the university. But I was smart enough to set boundaries with the university so I was not burdened with work I no longer wanted to do. I also started my practice prior to my formal retirement from the mental health system. I advised [my colleagues] to have a plan that they could afford and enjoy.”

Counselors looking toward retirement should be certain to fully understand their financial commitments *before* making the transition, Pledge says. And after retiring, she adds, they need to be intentional about finding ways to have fun and keep learning. “Get together with other counselors who have retired, and read, read and read,” she advises.

Preparing for the retirement plunge

David Denino came face-to-face with retirement a little sooner than he had planned. In 2009, he was offered early retirement from Southern Connecticut State University (SCSU) in New Haven. He had expected to have three to five



David Denino encourages counselors who are thinking about retirement to immediately start strengthening their connections to other activities they enjoy. One of Denino's favorite pastimes is restoring sleighs from the late 1800s and early 1900s.

more years to put his ultimate retirement plan in place. Instead, he had to make a decision in the span of two months.

Before ultimately choosing to take the offer, Denino wondered what it would be like to step away from his professional identity and career-long connection to the university community. “And how would that transfer to carving out a new identity? I spent my career providing counseling and teaching college students and adults, and the time came to practice the transitions [I] had preached,” he says. Today, the ACA member continues as SCSU's director emeritus of counseling services and is a part-time faculty member in the Department of Counseling and School Psychology.

Denino says the most significant postretirement challenge he faced revolved around the dramatic change in his routine, which was suddenly void of daily structure and opportunities for camaraderie with colleagues. “As counselors, we absolutely incorporate these types of plans in our work but often may be remiss in personal application of what life will be like after helping others care for themselves,” he says.

As such, Denino offers advice for other counselors to consider when it comes to planning for retirement. “Start now,” he says. “If possible, build a plan that is at least two or three years out. If you don't have that time, the emotional [process

of] disengaging from your work may be arduous. Think of what you will stay connected to, then do it. Increase your connections to your enjoyable activities as soon you can. Think about a longer transition, perhaps by leaving full-time work [for] part-time work.”

Regardless, he cautions that no amount of planning will fully prepare counselors for the changes that retirement will introduce. “Resilience is something all counselors preach, but it becomes something we now have to practice,” he says. “Professional connections will disperse — people move on, and so will you. ... You will feel alone at times, just like your clients and patients have. You helped them through the process. Now help yourself with resources you have gathered over the years.”

Adds Denino, “It will take time to figure this out, and often the first year out may be the most difficult. Many career development theories connect work with personality and identity, and we lose some of that [when we retire].”

Still, Denino emphasizes the positives that accompany the transition, including fewer worries about clients, budgets, billing and so on. He also highlights the joy of having more control over one's schedule and finally making time for “all those things” on the to-do list.

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Practical matters

No matter what the retirement fantasy looks like — from maintaining a small caseload of favorite clients to sailing off into the sunset entirely — there are certain practical issues that all counselors must consider, including the likelihood of living on less money, possible relocation and the risk of being isolated from longtime supportive relationships.

Depending on a counselor's work situation, the retirement process also may require careful decision-making in terms of closing a practice and helping current clients find new resources. To protect clients from feeling abandoned, the *ACA Code of Ethics* requires that counselors follow proper termination procedures and make appropriate arrangements for clients who will need to continue treatment. Accurate informed consent must be made for a retiring counselor to transfer case files to a client's new treatment provider, and retired counselors also must make adequate arrangements for long-term client record accessibility.

Denino advises counselors thinking about retirement to act deliberately and afford themselves plenty of time to work through the ethical and legal issues involved in terminating client relationships. "All practitioners should give adequate notice of their retirement," he says, noting that not all clients will need the same amount of time. "A key feature is to make sure there is enough time to find another provider. In my case, having worked in a university setting, transfers become a bit easier [because] introductions to new counselors are readily available." (*Note:* As a member benefit, ACA members receive free, confidential ethical consultations; contact 800.347.6647 ext. 314 or ethics@counseling.org.)

Of course, there are also emotional issues involved in closing a counseling practice. Once again, Denino advises counselors to give themselves as much time as possible. "Certainly, we have to handle the undertaking of telling clients we are leaving, and that can be a difficult process for both the client and counselor," he says. "It takes time to work through that process, so planning is essential. It's a mix of both transitions and closure, depending on the relationship. We definitely have to face

our personal emotions throughout the journey — excitement about pursuing new opportunities mixed with leaving a therapeutic relationship."

Having retired in 2010, Magnuson admits she is still struggling to determine what to do with the journals, books, files and counseling equipment she amassed throughout her career. "We diligently saved every issue of every publication thinking that someone would be so happy to receive a complete set. That was before the digital era when hard copies are neither valued nor wanted," she says. "It was painful to take boxes of journals to the recycling bins, [so] we're not done with that part yet."

There are also choices to make about which professional associations to maintain. Magnuson acknowledges that letting go of some of her professional credentials was particularly difficult. "I worked so hard to achieve them, yet I simply could not justify the expense of maintaining them," she says. "Those decisions did not come easily. I still have both licenses — LPC [licensed professional counselor] and school counseling. In fact, I just renewed my school counseling license for five years. Without insurance, I won't practice, [but] I just needed to keep those licenses for a while longer."

After 40 years in the counseling field, including time as a school counselor and in private practice, Trudie Atkinson envisioned relocating as part of her retirement. Winding down a career that included chapters in New Orleans and Chicago, the ACA member knew she wanted to retire near family in the Eugene, Ore., area where she was raised. She found a job in that area working as a therapist and supervisor at a residential treatment center for young children. She worked there full time for four years, retiring once she was able to obtain Medicare coverage at age 65. She now maintains a small private practice, provides supervision to other clinicians and volunteers at a community counseling center, putting in three to four hours of clinical work per week.

"The primary challenges in relocating were that I was leaving trusted colleagues and friends, and that I faced an onerous licensure process in Oregon. This latter took two years to complete," Atkinson



Trudie Atkinson, shown here with her niece, Wendy Dunn, relocated to Oregon and continued working full time for four years because she knew she wanted to retire near family.

says. "I knew I wanted to work until age 65 for the sake of health insurance, and I didn't know what employment I would find. I couldn't expect to build a sustainable private practice quickly, and the economy in the Northwest at the time was dismal. I also wanted to be available to my mother in her declining years while continuing to work.

"The good news was that I found an interesting job that used my training and skills, while introducing me to new emphases in therapeutic work. I also found an opportunity to volunteer at a counseling center similar to one with which I was involved in New Orleans, giving back to the community by counseling, training and supervision. Both my employment and the community center provided contact with many professional colleagues. I found a way to continue working and to help with my mother's care through supportive meetings with family members."

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Article: Building a more complete client picture

Learning Objectives: Reading this article will help you:

- 1) Understand how an ecological perspective can help counselors identify ways in which the client's environment affects his or her well-being and development.
- 2) Reflect on interventions such as ecological analysis that move beyond exclusive focus on the individual.

Continuing Education Examination

- 1) An ecological perspective in counseling takes into account:
 - a) Teleological explanations of human behavior
 - b) Negative thoughts and maladaptive beliefs
 - c) The many systems with which an individual interacts
 - d) The client's subjective frame of reference
- 2) The ecological perspective in counseling includes four propositions that claim all behavior is:
 - a) Personal, contextual, interactional and concerned with meaning
 - b) Biological, contextual, interpersonal and concerned with meaning
 - c) Psychological, sociopolitical, interactional and meaningless
 - d) Personal, cultural, interactional and irrational
- 3) Which question would **not** be considered in an ecological analysis?
 - a) Where does the client live out his or her life physically and interpersonally?
 - b) How is the problem situated within the client's ecology (who, what, when, where)?
 - c) What are the client's important interactions with people, groups or larger systems?
 - d) How is the problem situated within the client's childhood experiences?
- 4) The ecological perspective can apply to almost any counseling setting and client. However, clients who are able to think abstractly, willing to make tough changes and motivated to look at their circumstances with new eyes are most successful.
 _____ True _____ False

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Magnuson also relocated before retiring fully and acknowledges the decision was challenging. “At age 50, I began thinking seriously about where I wanted to grow old and die,” she says. “My husband and I began spending more time with friends from my hometown. I applied for a faculty position in that area. The position was offered to me, and I accepted it even though I had a compelling sense that it was not going to be a good fit. I was right. I believe this contributed to my retiring earlier than I would have otherwise. And, yet, I can’t imagine not living close to my extended family and hometown community. I shared my aunt’s final days with her. We attend our friends’ grandchildren’s ballgames. I see my lifelong friend a couple times a month. We go to alumni banquets. We celebrate milestones and grieve losses with people I’ve known all my life.”

Magnuson continues to contemplate the financial aspects of this new phase of life. “Certainly we have had to adjust our lifestyle, and I’m painfully aware of the financial challenges we may encounter with longer term health care,” she says.

Because she retired at age 60, Magnuson also had to find private health insurance before qualifying for Medicare benefits. “I had no idea that would be a problem,” she says. “I was and still am incredibly healthy, [but] insurance companies viewed me as a high risk because of my age. I had no idea that the process would be so time consuming, costly — in terms of providing information and obtaining additional medical tests — stressful and extensive. I was also stunned by the cost of my premiums.”

The good life

What does Magnuson most like about being retired? Hands down, not having to use an alarm clock. “That’s the best!” she says. “I value the additional time for self-care. I immediately began a weight-training program. I have walked since the early [1980s] and have enjoyed longer walks [in retirement] in new places. I didn’t remember what it was like to feel rested.”

On this point, Magnuson urges other counselors to consider the impact that reduced stamina can have on their ability to serve clients. “I had observed a phenomenon that I absolutely did not

want to repeat,” she says. “Some of my former colleagues ‘retired’ long before they resigned. Others became irritable, bitter, cranky and impatient. I did not want to stay in any position if I could not continue to perform at the standard I expected for myself, if I could not be productive or if I could not be cheerful and happy.”

In retirement, Magnuson continues her writing, including co-authoring a mental health column in a rural newspaper with her husband, Ken Norem. She also enjoys formal storytelling, participating on local organizational boards, staying active in politics and involvement in her faith community.

The individuals interviewed for this article repeatedly recommended that their fellow counselors find ways to volunteer their time — whether in counseling environments or other venues — upon retiring. At the same time, Magnuson also cautions retirees to guard against overextending themselves. “I had often heard [from retirees], ‘I don’t know how I had time to work.’ That’s been my experience as I essentially redefined myself. At first I said yes to

everything. Then I had to go through a fairly challenging, even difficult, vetting process to decide what I would continue doing and what I would not continue doing. Resigning in the world of paid employment is much easier than in the world of volunteering,” she cautions.

Magnuson also decided to maintain her ACA membership as a way of preserving her counselor identity. “I appreciate the fact that ACA encourages continued membership with reduced dues,” she says. “I believe our profession has a tradition of honoring and respecting those who have gone before us.” ♦

Contributing writer Stacy Notaras Murphy is a licensed professional counselor and certified Imago relationship therapist practicing in Washington, D.C. To contact her, visit stacymurphyLPC.com.

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Reflecting 'as if'

By Richard E. Watts

This brief, encouragement-focused counseling process integrates Adlerian and constructive theory and practice perspectives and can be useful for work with diverse populations in a variety of settings

An integration of cognitive, existential, psychodynamic and systemic perspectives, Adlerian counseling theory is a holistic, phenomenological, socially oriented and teleological (goal-directed) approach to understanding and working with people. Furthermore, Adlerian counseling theory is a *relational constructivist* approach and affirms that people must be understood contextually because it is in our relationships that we understand ourselves, others and the world around us.

Counseling theories tend to focus on either the individual or the collective. Adlerian counseling is a healthy balance between these two perspectives. Adlerian counseling theory affirms that knowledge is socially embedded and relationally distributed but also affirms that humans are creative, proactive, meaning-making individuals who have the ability to choose and be responsible for their choices. Because Adlerian counseling is a relational constructivist approach, it accounts for both the social-embedded nature of human knowledge and the personal agency of creative and self-reflective individuals within relationships.

Given that Adlerian counseling is a relational constructivist approach, it makes sense that it shares significant common ground with various constructive perspectives on counseling, including cognitive constructivist and personal construct therapies, solution-focused brief therapy and narrative therapy. (For further discussion of this significant common ground, please see the suggested readings on page 52). Beyond the many theoretical

points of resonance, it is noteworthy that both Adlerian and constructive approaches to counseling strongly affirm the importance of the client-counselor relationship; are optimistic and present/future oriented; and focus primarily on clients' strengths, resources and abilities rather than on their weaknesses, deficits and disabilities.

Given this common ground, it is not surprising to find that interventions discussed in the constructive therapy literature are either similar to or congruent with interventions used in Adlerian counseling. Nor is it surprising to see significant opportunities for technical integration between the two. This article presents a brief, encouragement-focused counseling process that integrates the Adlerian acting "as if" technique with procedures drawn from constructive approaches to counseling.

Expanding the acting 'as if' technique

One specific area Adlerian and constructive therapies share is that both see value in using the "as if" quality of human experience in counseling and psychotherapy. Humans act as if the constructs by which they engage in everyday activities are *facts* or absolute truths rather than social constructions that are contextually situated.

Using this perspective, Alfred Adler developed the *acting "as if"* technique, which encourages clients to begin acting as if they were already the person they would like to be — for example, a "confident individual." The process asks clients to pretend and emphasizes that they are only acting. The purpose of the procedure is

to bypass potential resistance to change by neutralizing some of the perceived risk. Acting “as if” affords clients the opportunity to enact alternative or preferred outcomes and possibly *restory* oppressive aspects of their personal metanarrative (or “style of life” in Adlerian parlance).

I really like the acting “as if” technique but have found that some clients are reticent to follow through on the enactment due to discomfort with potential ambiguity and a desire for more structure. In addition, I am reticent to ask some clients — for example, those who tend to act impulsively — to go out and act “as if” because I have concerns about their well-being and the well-being of others who might be affected by their choices. Thus, I developed the *reflecting “as if”* (RAI) counseling process to address my concerns as well as the concerns of my clients.

The integrative RAI process expands the Adlerian technique by having counselors ask clients to take a *reflective* step back prior to stepping forward to act “as if.” This process encourages clients to reflect on how they would be different if they were acting as if they were who they desire to be. By using reflective questions, counselors can help clients construct perceptual alternatives and consider alternative behaviors toward which they may begin moving.

RAI phases

The RAI process has three phases. In phase one, the counselor uses reflective questions to access the creativity and imagination of clients. In phase two, the client and counselor co-construct an “as if” plan of action on the basis of the client’s reflective thinking. In the final phase, clients implement the “as if” behaviors and then discuss that experience in session with the counselor. As with most action-oriented procedures, the use (and success) of the RAI process is predicated on the development and maintenance of a solid client-counselor relationship.

Phase one

In the initial phase of RAI, counselors use reflective questions such as the following:

■ If you were acting as if you were the person you would like to be, how

would you be acting differently? If I were watching a videotape of your life, what would be different?

■ If a good friend saw you several months from now and you were more like the person you desire to be or your situation had significantly improved, what would this person see you doing differently?

■ What might some initial indicators be that would demonstrate you are headed in the right direction?

In phase one, counselors write down clients’ responses to these or similar questions without judgment or critique. On the basis of what has been shared in prior counseling sessions, counselors can contribute ideas as well. Sometimes clients may offer responses that are too broad; in such cases, counselors will need to ask for more specificity (“What, specifically, will you be doing differently to make that happen?”). Once it appears the initial reflective process has been completed, the counselor and client are ready to move to phase two.

Phase two

In the second phase of the RAI process, the client and counselor co-construct a list of “as if” behaviors that indicate how the client will act in moving toward his or her desired goals. As part of this co-construction process, the client and counselor discuss the viability of each item on the list and eliminate items that are not realistic.

Subsequent to developing the “as if” behaviors list, the counselor asks the client to rank the items from least difficult to most difficult. After the client has ranked the behaviors, the counselor engages the client in a dialogue about the difficulty level of the items and their position on the list. Once the ranking process and dialogue are completed, the client is ready to begin the enactment process.

Phase three

Phase three starts with the client selecting a few of the least difficult “as if” behaviors to enact for the coming week. Beginning with the least difficult behaviors increases the potential for client success because success is typically encouraging for clients and often increases their perceived self-efficacy. Success typically increases the client’s

motivation to courageously engage the more difficult tasks on his or her list. In the sessions that follow, the client and counselor discuss the enactment of the “as if” behaviors selected for the previous week. Enacting new behaviors often helps clients to perceive themselves, others and the world differently.

Clients can grow frustrated and discouraged as they attempt the more difficult tasks on their “as if” behaviors list because progress no longer comes so easily or consistently. Clients may be more patient and find the process less frustrating if counselors use encouragement to help clients frame success in terms of effort and incremental growth rather than final outcome. Helping clients understand “positive movement as success” is a key element of the Adlerian understanding of encouragement.

Although encouragement is crucial throughout the counseling process, it is particularly important in phase three of RAI. Let me diverge for a moment and briefly clarify the Adlerian understanding of encouragement. Encouragement is often misunderstood as merely an Adlerian “technique.” Actually, encouragement is a *way of being* with others, and Adlerians view counseling as a process of encouragement. Alfred Adler and subsequent Adlerians consider encouragement a crucial aspect of human growth and development. Stressing the importance of encouragement, Adler stated that throughout the counseling process, “we must not deviate from the path of encouragement.” Similarly, Rudolf Dreikurs affirmed that therapeutic success was largely dependent on the counselor’s “ability to provide encouragement,” while failure generally occurred “due to the inability of the therapist to encourage.” Encouragement skills include:

- Accepting clients unconditionally and without judgment
- Demonstrating concern for clients through active listening, respect and empathy
- Focusing on clients’ strengths, assets and abilities, including identifying past successes and communicating confidence in the same



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- Helping clients to generate perceptual alternatives for discouraging fictional beliefs and oppressive narratives
- Helping clients distinguish between what they do and who they are (deed vs. doer)
- Focusing on clients' efforts and progress
- Communicating affirmation and appreciation to clients
- Helping clients see the humor in life experiences

Using imaginary reflecting teams in RAI

When clients are immersed in difficult situations, they sometimes have difficulty with the RAI process. They struggle to see beyond the problem and need help stepping away from or out of the problem so that alternative perspectives can emerge. The use of *imaginary reflecting teams* is one way to help clients create dialogic space for reflection in the RAI process.

When clients have difficulty responding to reflective questions, counselors can invite imaginary team members into

the session. To begin, counselors can ask clients to think of one or more persons whom they respect and view as wise. The client and therapist then create a list of team members. To amplify the imagery, the therapist may provide chairs for each team member, similar to the use of an empty chair in Gestalt therapy. I often put name tags on the chairs for identification purposes and to anchor the team member imagery.

Once the team is created, the counselor may call on team members for assistance by asking clients questions from constructive therapies. For example:

- Suppose you are talking to this person in the future after you have made significant progress in overcoming the problem. What changes will he or she say are evident? What, specifically, will he or she say is different about you?

- What specific steps would he or she identify that you took to make this significant change?

- What suggestions might he or she make for responding constructively to the problem?

- What might he or she say you do when (the problem) attacks you?

- How would he or she describe times when the problem isn't a problem for you?

- How would he or she explain your ability to accomplish this great success?

- How will he or she know when you are starting to move in the direction you want to go as a person?

After the team has been "heard," the counselor can proceed to phase two of the RAI process, helping the client to develop a list of "as if" behaviors and rate them in terms of difficulty. If the client has difficulty ranking the behaviors, the therapist may again invite imaginary team members to help the client with this process.

In phase three, when the client and counselor discuss the enactment of the "as if" behaviors selected for that week — and any resulting perceptual alternatives or enactment difficulties — imaginary team members can be invited in to discuss areas of improvement or areas for growth. As the client attempts the more difficult tasks on his or her behaviors list, imaginary team members can be invited to positively reflect on the client's efforts

Suggested readings

- *Adlerian Therapy: Theory and Practice* by Jon Carlson, Richard E. Watts & Michael Maniacci, 2006
- *Counseling and Psychotherapy Theories in Context and Practice*, second edition, by John Sommers-Flanagan & Rita Sommers-Flanagan, 2012
- "Reflecting 'As If': An Integrative Process in Couples Counseling" by Richard E. Watts, *The Family Journal: Counseling and Therapy for Couples and Families*, January 2003
- "Adlerian Therapy as a Relational Constructivist Approach" by Richard E. Watts, *The Family Journal: Counseling and Therapy for Couples and Families*, April 2003
- "Using Children's Drawings to Facilitate the Acting 'As If' Procedure" by Richard E. Watts & Yvonne Garza, *Journal of Individual Psychology*, Spring 2008
- "Expanding the Acting 'As If' Technique: An Adlerian/Constructive Integration" by Richard E. Watts, Paul R. Peluso & Todd F. Lewis, *Journal of Individual Psychology*, Winter 2005
- "Adlerian Psychology and Psychotherapy: A Relational Constructivist Approach" by Richard E. Watts & Kati A. Phillips, in *Studies in Meaning 2: Bridging the Personal and Social in Constructivist Psychology*, 2004
- "Adlerian 'Encouragement' and the Therapeutic Process of Solution-Focused Brief Therapy" by Richard E. Watts & Dale Pietrzak, *Journal of Counseling & Development*, Fall 2000
- "Using Imaginary Team Members in Reflecting 'As If'" by Richard E. Watts & Jerry Trusty, *Journal of Constructivist Psychology*, October 2003
- "Opening Space for Reflection: A Postmodern Consideration" by John D. West, Richard E. Watts, Heather C. Trepal, Kelly L. Wester & Todd F. Lewis, *The Family Journal: Counseling and Therapy for Couples and Families*, October 2001

and forward movement, as well as provide encouragement when progress is slower. The types of questions previously offered as examples are easily adapted for use in this phase of the process.

Conclusion

RAI is a brief, encouragement-focused counseling process that integrates Adlerian and constructive theory and practice perspectives. Because of the Adlerian and constructive theoretical and practice underpinnings, I believe RAI can be useful for work with diverse populations and in a variety of settings. With the increasing emphasis on multiculturalism and social justice in the counseling profession, many counselors have been drawn to constructive/postmodern approaches because of their focus on the social embeddedness of humans and, consequently, human knowledge. Adlerians and Adlerian theory addressed social equality issues and emphasized the social embeddedness of humans and human knowledge long before multiculturalism became a focal issue in the profession. Thus, because

of its integrative Adlerian/constructive foundation, RAI is congruent with the cultural values of many minority racial and ethnic groups.

In addition, RAI strongly resonates with evidence-based perspectives in counseling. John and Rita Sommers-Flanagan recently reviewed the literature addressing RAI in the second edition of their book *Counseling and Psychotherapy Theories in Context and Practice* and offered the following evaluation:

“The RAI procedure is simple and straightforward. It’s also a good example of not only the theoretical compatibility of Adlerian approaches, but also of their empirical base. Specifically, RAI employs several evidence-based techniques, including (a) collaborative goal-setting; (b) collaborative brainstorming as a step in problem-solving; (c) a focus on concrete and measurable behaviors; and (d) concrete behavioral planning.”

For more information about the theory and practice of RAI, please see the sidebar on suggested readings or contact me directly via email. ♦

“Knowledge Share” articles are based on sessions presented at American Counseling Association Conferences.

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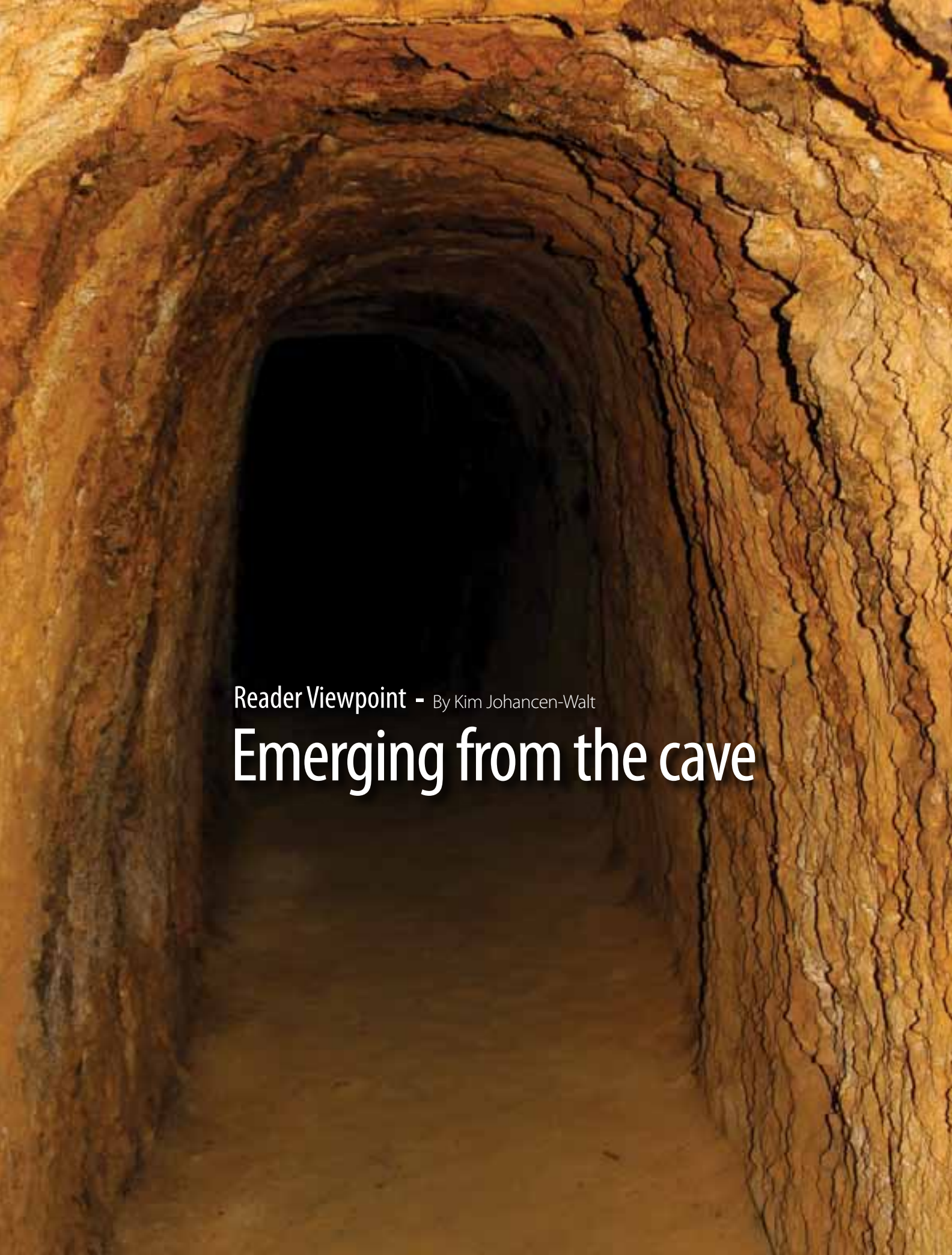
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Reader Viewpoint - By Kim Johancen-Walt

Emerging from the cave

It is human nature to withdraw for a time when wounded, but clients who engage in long-term avoidant behavior run the risk of amplifying their pain and creating larger problems

When I first met Kurt, age 60, he appeared small despite possessing a lengthy frame that should have filled any space he occupied. He spent the first few sessions of therapy discussing the details of his son's diagnosis with a rare and often untreatable disease. He talked about how the subsequent barrage of doctor visits, hospitalizations and constant state of uncertainty haunted his family, deeply affecting his son, his wife and others close to Kurt. Yet Kurt tended to minimize the impact these events had on him. He described his growing addiction to alcohol and pain pills without compassion, stating that he felt weak and disgusted with himself. He sought counseling for help to change his actions and also to gain an understanding of what had led him down the heavily weeded path of addictive behavior in the first place.

In my efforts to help clients understand their addiction patterns, I explain that avoidant behavior is more about an attempt to preserve the self than an attempt to destroy it. This understanding may be difficult to process, but it is one of the central concepts in recovery. Counselors must not only have a firm grasp on what leads many clients down the road of addiction but must also be equipped to communicate these core concepts in a way that will help clients forge a clearer path.

I explain to my clients that in order to heal, we have to work directly with our pain, and for many of us, this process can feel counterintuitive. When we are hurt, we want to retreat into the comfort of darkness. We are pulled into the cave to

lick our wounds as we recoil from the sting of trauma and the pain of loss. It may be human nature to withdraw when we are wounded, yet it is also human nature to evolve. I remind clients that we have to return to life above ground at some point.

Like Kurt, many of my clients resist the natural flow of thought and emotion, afraid to see what may be bubbling below the surface. But in their effort to remain hidden, they may be at risk of turning toward avoidant behaviors such as substance abuse, self-harm and even suicide. Although these behaviors are an attempt to survive, in actuality they will oftentimes amplify pain and can create additional problems. Individuals are at risk of allowing this type of maladjustment to take root as they attempt to protect themselves from the pain of current and further injury by anesthetizing the wound.

I communicate to my clients that we have to intentionally turn off the instinct to flee and, instead, properly tend to the wound, working out the poison and rejoining the race. Once they are able to courageously explore their thoughts and the feelings attached to them (perhaps in the presence of caring others), they can then focus on truly changing their behavior versus trying desperately to avoid the impact of a painful experience. Through this process, they can begin the task of waking after the long winter.

Using language seasoned with metaphor helped me communicate to Kurt that his addictive behavior made sense in light of recent events in his life. Becoming aware of his humanness helped Kurt understand that

his grief was both valid and in need of some attention. This knowledge allowed him to uncover valuable information about his urges to use substances, including an understanding that his urges revolved around a more primal instinct — the instinct to run. Because of his newfound awareness, Kurt was able to cultivate self-compassion, thus allowing him to stretch and grow instead of remaining stuck in avoidant behavior, shrunken and defeated.

Gretchen

Gretchen was a beautiful 28-year-old with thick brown hair that fell just below her shoulders and large blue eyes lined with dark lashes. She was referred to me for depression that had manifested itself in different ways, including a poor self-image and recurrent suicidal thoughts. During our sessions together, and in between long periods of sobbing, Gretchen would talk about how much she hated herself for being overweight. She discussed believing she was unlovable because of her size and her lack of willpower to lose the weight. She felt imprisoned not only in her body but also in her feelings of shame, helplessness and isolation.

Just as finding the right metaphor with each client is an important part of the therapeutic process, it is also essential that we talk with our clients about the various ways they can begin disrupting their dysfunctional patterns. With many clients, core wounds are buried beneath other struggles and must be tenderly exposed. Otherwise, these clients may continue their maladaptive behaviors and become increasingly frantic. As I got to know Gretchen, I remained aware of this process of unearthing the true problems and brought these ideas into our work. With this framework and this language, our therapy quickly deepened. For example, when I talked to her about a need to “sift through the layers,” we discovered how her focus on body size was actually a distraction from the true origins of her painful emotions. “Careful excavation” revealed how these feelings were the reverberations of events that had happened long ago.

Gretchen discussed how brief moments of reprieve from the emotional pain she felt came in the form of nightly binging. But she also described how the

pleasure she received from food was a short-lived distraction, the pain creeping back in inevitably after she had emptied the pantry. We talked about how the emotional fullness she experienced from binge eating was an illusion. In actuality, these incidents of self-abuse served only to feed her particularly severe form of self-criticism. During one memorable session, she looked up at me with puffy, red-rimmed eyes and asked, “How did I end up here?”

In our attempt to answer her important question, Gretchen and I embarked on a journey down the various pathways that had contributed to her pain and food addiction. This included the impact of growing up with a critical, alcoholic mother who continued to deny any culpability — most likely because of her own avoidant behavior — for the hurt she had caused her child. Gretchen gained insight into how she had eventually ingested her mother’s criticism over the years and how she now beat herself up mercilessly with her own cruel self-talk. Furthermore, she learned how these earlier experiences had left a powerful mark, creating a diminished ability to self-soothe and a craving for attachment that could not be effectively satisfied.

I explain to clients that when we are not growing, we are withered, an echo of ourselves. Our natural instinct is to learn from what happens in our lives so that we are ever better at survival. When we are hurt, we examine the pieces of the puzzle that have been scattered, attempting to put them back together in a way that helps us understand what has happened and increases our ability to sidestep further injury. Yet through our loss experience, the puzzle is forever changed because we no longer *have* all the pieces. I explain that it is only by accepting the impact of certain events that we can begin the process of rebuilding after the explosion, putting the puzzle back together in a *new* way. It is a process that cannot be forced if the bones are to heal correctly. It takes as long as it takes.

I tell clients that it is tempting to assign blame and responsibility in our efforts to understand why the walls came crashing down. Many of my clients, like Gretchen, point the finger at themselves. This type of self-injury is rarely a one-time event but instead a process that has been

shaped and sculpted through years of practice. These clients not only attempt to make sense of the loss in their lives by blaming themselves but also may accept responsibility for the pain experienced by those around them. They have come to believe they are the reason that “bad” things happen. Unfortunately, other people in these clients’ lives — many also desperate to avoid pain — may actually encourage these clients to shoulder the blame, shucking their own responsibility and accountability.

Buying into the myth that we are inherently flawed can create torrential pain, as it did for Gretchen. Recognizing self-blame as an attempt to make sense of what has happened encourages us to examine our role in various relationships, including the relationship we have with ourself. Although growing pains may be experienced along the way, I assure clients that this recognition can have a profound impact on healing, self-awareness and self-esteem, creating ample interpersonal growth. It is important to look at our role in connection with the events occurring in our lives so that we can continue to evolve, but oftentimes we are not solely responsible for our losses — and we are certainly not responsible for the losses of those around us.

Painful feelings such as shame, isolation and helplessness can keep us wounded and in the dark, unable to access our inner knowingness and limitless potential. When we are hurt, our view can become narrow. We may collapse in on ourselves and feel powerless to change our situation. Gretchen’s deepening insight about her difficult childhood helped us combat the destructiveness of her critical thoughts. Her situation began to make sense as we painted the picture of her current struggle — a reflection of unresolved grief and loss.

I remind my clients that it is deeply rooted in our fiber to disappear into the cave when we are hurting. We are pulled there to heal so that we can eventually rejoin the rest of the world. However, I also remind them that this hardwiring can at times interfere with other natural states of healing. Instead of working out the poison, we may fail to acknowledge the wound at all so that it begins to fester. When our need to evolve is overshadowed by our need to escape, we are at risk of

avoidant behavior and at risk of collapsing under the heavy weight of painful feelings such as shame and helplessness.

Just as probing the wound can lead to fresh bleeding, revealing the impact of trauma with someone is a tender process. Regardless of where we meet our clients on their journeys, we have to craft the right language for each one, whether that means creating a powerful metaphor or helping them uncover core wounds. Our words and caring presence as counselors can help clients put a face on their pain, while also steering them back to their true path; the mirror's powerful reflection becomes a powerful beacon for someone who feels lost. And our words must also communicate hope.

The richness of life cannot be found in the deep recesses of the hillside. We have to find a way to emerge from the cave, perhaps with the thick skin that only scars can provide. Otherwise, we will continue to suffer, deepening the wound despite our best efforts to avoid the risk of additional harm. We need to encourage clients to step back out into the sunlight,

surveying the landscape and all of the possibilities. We have to find a way. ♦

Kim Johancen-Walt is a licensed professional counselor in Durango, Colo., who contributed a chapter to *The Adolescent & Young Adult Self-Harming Treatment Manual* by Matthew D. Selekman. She has conducted several workshops both locally and nationally on her work with self-harming and suicidal clients. She has also worked in multiple educational settings, including Fort Lewis College. Contact her at johancenwaltks@gmail.com.

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Reader Viewpoint - By Margaret Edwards & Charlotte Chapman

After an assault



First-session do's and don'ts when counseling college students who have experienced a sexual trauma

Today's college students face more than exams, adjustment issues and a tough job market. They also deal with a complex sexual and social landscape that is full of choices and pitfalls, often without the safety net provided by their families at home.

A 2007 Campus Sexual Assault Study conducted with a Department of Justice grant by Christopher Krebs and colleagues found that 28.5 percent of undergraduate women surveyed had experienced an attempted or completed sexual assault either before or since entering college. According to Emily Douglas and David Finkelhor of the Crimes Against Children Research Center, between 9 and 32 percent of girls and 5 to 10 percent of boys come to school with a history of sexual abuse.

Although the statistics vary depending on what is counted, it seems clear that many students on college campuses have experienced trauma and the associated negative psychological effects. Trauma is known, for example, to increase a person's risk of abusing alcohol and other substances, as well as increasing the risk of further trauma. Thus, sexual trauma recovery and related problems are a very common issue for college counselors. Effective intervention soon after a trauma can prevent mental health and substance abuse problems, the interruption of social development and the derailment of academic dreams. But how should a college counselor engage the traumatized student?

The first session after an assault is particularly challenging, and a lot rides on that session because it often determines

whether a student will follow through with getting help in a timely manner. If a client in this situation feels judged, is pressed too fast for details or is offered unsolicited advice, she or he may not return for the second appointment. It is important to slow down and to support these clients as they try to make sense not only of what has happened but also their resulting reactions.

The approach of motivational interviewing, as developed by William Miller and Stephen Rollnick, is especially helpful in establishing a safe, trusting psychological environment in which to work through a trauma. Motivational interviewing is based on autonomy, collaboration and evocation. For example, asking for permission before providing information or advice and reflecting feelings rather than asking questions about what happened allows the counselor to join with the client without also joining her in the trauma. In addition, allowing the client to set the pace and goals of counseling helps her to re-establish a sense of agency in her own healing, which is important in likewise re-establishing her sense of psychological safety.

Client scenario

Anna is a college junior just getting ready to take her final exams. She walked into the counseling center today in tears and said she wanted to talk about a bad date she had two weeks ago. Anna explains that she attended a date function with Chris, the roommate of her friend Josh. At first, she says, things went pretty normally — drinks, dinner, dancing and barhopping afterward. Anna's first

Types of safety

Safety is more than physical, and it remains an issue for anyone who is experiencing a trauma reaction. The following kinds of safety must be re-established for a person to heal after an assault.

■ **Physical:** Your body is not in danger. If a threat presents itself, you are appropriately reactive to any warning signals to ensure that your body is protected. You either remove yourself from the situation or defend yourself (flight or fight).

■ **Emotional:** You can identify your feelings in a

situation, recognize what your intuition tells you and act on these feelings appropriately.

■ **Mental:** You are able to access belief systems and patterns of thinking and awareness to accomplish what you want or need on a consistent basis.

■ **Spiritual:** You can identify and trust in your beliefs about a higher power and your connection to the universe, and you can use those beliefs to lead you to healthy decisions.

— Margaret Edwards & Charlotte Chapman

indication that she might be in trouble was Chris' insistence on pushing more drinks on her. The second occurred when Chris took her home after the function and followed her in, even after she said no. Chris repeatedly suggested they have sex and ignored Anna's response.

Since the date function, Anna says, she has been unable to sleep without the lights on, and she can't remember what she just read, no matter how many times she reads it. She says she is afraid this will wreck her semester and end up costing her admission to medical school. Anna also says she is terrified she will run into Chris; she finds herself looking out for him constantly. She is afraid people will take sides against her or judge her if she reports the incident. Anna says she blames herself because she was unable to stop Chris and because she was drinking before the incident happened.

Listening to Anna's story as a counselor, it would be easy to fall into the trap of asking her too many questions, labeling what happened, jumping to a diagnosis or even reflecting back in such a way that causes Anna to feel judged. Understandably, it can feel especially urgent as a counselor to give the client advice about reporting this kind of incident or seeking immediate medical help. Doing so, however, increases the risk of making the client feel judged, unheard and more anxious, which can result in the client refusing to continue with counseling.

First-session do's and don'ts

Do:

■ Build rapport through eye contact that meets the client's, mirroring her own.

■ Relax your body posture, and breathe to help the client breathe.

■ Listen, and ask as few questions as possible, making them as open-ended as possible.

■ Affirm the client's desire to be in control of her reaction, her right to make a choice about how she responds or reports, and her desire to be autonomous. This is especially important if she is unused to asking for help.

■ Use the client's language as closely as possible, especially in terms of how she refers to the incident (even if she refers to it as "bad sex" and you think it was rape).

■ Summarize frequently.

■ Ask about safety issues (see sidebar above for more details).

■ If the client needs help managing her anxiety as she is telling the story, ask for permission to teach her to ground herself through a breath or by focusing on a physical sensation (such as two fingers touching).

■ If the client asks about why she is having certain symptoms or expresses a concern that she is "feeling crazy," ask for permission to explain the physiological and psychological responses to trauma. Avoid jargon. For example, the counselor can explain that many people have reactions to a loss of physical or psychological safety that last for a while beyond the incident. Symptoms that some people experience include jumpiness, difficulty sleeping (or sleeping too much), changes in appetite, difficulty focusing or paying attention in class, a feeling of numbness or, alternatively, feeling tearful. If the client wants to know more, she might find it helpful to read Peter Levine's excellent explanation

of how trauma affects the brain, *Waking the Tiger: Healing Trauma: The Innate Capacity to Transform Overwhelming Experiences*.

Don't:

■ Call the incident rape or assault unless the client does. Do not otherwise label her experience because she may be experiencing ambivalence about what to call it herself. If you label, she may feel you are judging or pushing her too fast.

■ Refer to the perpetrator in language stronger than the client uses, especially if the perpetrator is someone she knows. If you do use stronger language, the client may feel an impulse to defend the perpetrator.

■ Be overly expressive in terms of sympathy. Many clients need to see whether it is safe to tell you their story. If your reaction to what they are saying is stronger than their reaction, clients can become flooded or feel a need to hold back in order not to upset you.

■ Ask for more details than the client wants to provide (including how much she had to drink, what she was wearing or whether she kept any evidence). Beyond what is necessary to assess for the client's current physical safety (such as whether the perpetrator lives nearby or has access to the client's contact information), you do not need the full story to start the counseling work.

■ Insist that the client report the incident right away. If there is a reporting procedure at your school or an advocate who helps students through the reporting process, you can ask if the client would like information about those resources.

Focus on safety

As experts such as Judith Herman and Lisa M. Najavits have observed, unwanted sexual contact of any kind results in loss of one's core sense of safety. Many authors, including Babette Rothschild and Peter Levine, have described how reactions to this loss vary depending on a person's prior experiences, sense of autonomy, culture and neurobiological factors. Even very decisive, assertive people can freeze and/or be unable to defend themselves when faced with an unexpected sexual assault, regardless of whether they know the perpetrator. As a result, many blame themselves, numb themselves to avoid feelings and, thus, lose some of their ability to sense danger.

One of the core purposes of counseling a college student who has been raped is to re-establish that student's sense of safety and control. Even in the initial session, it can be helpful to ask the student to identify elements of a safety plan that includes practical physical and psychological elements as a first step toward this treatment goal.

There are three key areas of safety questions to ask a client:

■ **What** makes you feel physically safe when you are alone? What are some things you can do to feel physically safe in your room?

■ **Who** helps you feel safe? Why do they feel safe? What do they need to know about you and about what has happened to help you feel safe?

■ **How** can you establish some boundaries so that [the perpetrator's name] cannot make contact with you without your permission?

Conclusion

As counselors, we sometimes struggle with the reality that we cannot change what has happened to our clients. Similarly, we cannot protect them from the unfolding series of reactions that are common to people who have experienced trauma. They do the work, not us.

As our clients make their way through a cycle of reactions — among them anger, guilt, shame and grief — we *can*:

- Listen as they make sense of their story
- Reflect compassionately as they learn

ways to cope with their responses

■ Offer practical help, as they ask for it, so they can re-establish their ability to sense and respond effectively to danger, manage their emotions and regain their feeling of control over their lives

The first and most important step, however, is to help clients establish a feeling of safety in the counseling relationship. ♦

Margaret Edwards, a licensed professional counselor, is a trauma counselor at the University of Virginia Women's Center. Contact her at me8n@virginia.edu.

Charlotte Chapman, an LPC and national certified counselor, is director of counseling services at the University of Virginia Women's Center. She is also a member of the Motivational Interviewing Network of Trainers. Contact her at cmc5nq@virginia.edu.

Letters to the editor:
ct@counseling.org

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McDonald, Nodar earn recognition in ACA Foundation essay contest focused on the future of the profession

Christen Peeper McDonald and Martha Nodar, graduate students in counselor education, were recognized as winners of the fall 2012 essay contest sponsored by the American Counseling Association Foundation.

The ACA Foundation continues to support and celebrate all counseling graduate students and new professionals. As part of this celebration, the ACA Foundation encouraged all counseling graduate students and new professionals to write a brief essay concerning their thoughts on what the future of the profession will encompass.

For submitting the top-rated essays, McDonald, a doctoral student at Georgia State University, and Nodar, who is pursuing a master's degree at Mercer University, Atlanta Campus, were awarded one-year ACA memberships.

Note: The following essays were edited only for spelling and minor style issues. The views expressed are those of the essay authors.

Christen Peeper McDonald earned recognition for her essay on how professional counseling will be affected by an increasingly diverse population.

It is no small fact that America continues to grow more diverse every day (Shih & Sanchez, 2009). One need only look around to find that the racial backdrop of America is a colorful mix of people who no longer fit into tidy racial categories. With this growing population of Biracial/Multiracial individuals comes an increased need for understanding the unique experiences of these individuals. As a Biracial person who often gets mislabeled as monoracial, specifically White, I can't help thinking that though race has had a major impact on our country, I get the distinct impression from some of my own counseling colleagues that we as a profession have the concept of race "all

figured out" and that it is time to move on to other issues of diversity. However, it is this student's opinion that diversity is not a linear concept or set of concepts that we move through, climbing the ladder of competence as we master race/ethnicity, classism, LGBTQ issues and so forth. Rather, I believe that diversity, especially in the wake of an increasingly diverse America, is a concept that should be revisited time and time again, a concept that we are never able to master, but one in which we continually increase our knowledge and empathy toward each client we encounter. In this way, the examination of the conceptualization of race, identity, and labeling are especially salient issues in reference to Biracial/Multiracial individuals within the counseling profession.

On a societal level, I wonder where the need to label, categorize, and box human beings based on appearance comes from. As professional counselors, I would argue that we should resist societal norms in this way, and in the name of Wellness, empowerment, and good old-fashioned rapport building, allow our clients to label and identify themselves. When we put it in terms of Biracial and Multiracial, how could one even begin to describe what a Biracial or Multiracial person looks like? By definition, there are an endless number of racial combinations that could make up a Biracial/Multiracial person. Yet, even my fellow counseling students and professors have been surprised and sometimes resistant to me self-identifying as Biracial because I don't fit into their Biracial schema. This idea of a Biracial/Multiracial person looking a certain way is also reflected in the existing literature. Though a Biracial Identity Development Model has been created by Poston (1990) to account for the unique issues Biracial individuals face, the model fails to take into account the effects of being classified as a race by Others that is different than how one self-

identifies. The research on racial identity and perceptions appears to assume that one's outward appearances match social constructions of race. This constitutes a major gap in the literature and in the way we conceptualize race and ethnicity as professional counselors.

As counselors working from the Wellness perspective, what do we think happens to people that we mislabel? I can say from my own experience that I have truly had to fight not to let go of my identity as Biracial, even though many parts of that identity are readily available — for example, my multiple names. I have an English name and a traditional Cherokee name. When people categorize me as White, I make a very conscious decision to politely correct them, though this option is not as easy as just letting them label me as White. What harm could it do? By not advocating for myself and showing that "Biracial" doesn't look one way, I hold onto my identity and my belongingness to both the White and Native American parts of me. It is inevitable that our population will continue to grow more and more diverse, but if professional counselors fail to revisit our current assumptions about race, we will not be able to competently and empathically serve this increasingly diverse population. Though more research is needed in the area of racial mislabeling, one suggestion I have for professional counselors is to forgo all assumptions related to clients and allow them to use labels as they see fit. Some clients, like myself, find empowerment in being given the opportunity to self-label, but other clients may find labels too restrictive. Labels have the power to help or hurt, and when we take our own assumptions out of the equation and encourage our clients to use labeling as they see fit, this is a step in the direction of Wellness that will allow us to celebrate the growing diverse population rather than box it in.

Martha Nodar received honors for her essay identifying an issue she believes will have the greatest impact on tomorrow's professional counselor.

A commitment to genuine self-awareness will be the issue that will have the greatest impact on tomorrow's professional counselor because self-awareness is a challenging and rare dynamic for both clients and counselors. True self-awareness is not common despite the many "talks" we have on the subject. Gaylin (2001) argues that "what passes for self-awareness is often mere fantasy and delusions" (p. 292). As a graduate student, I frequently witness a tendency around me to highlight "the positive" and a resistance toward including other layers of the self, such as our common human imperfections. Gaylin (2001) suggests the tendency toward "self-deception is universal ... and its power should never be underestimated" (p. 292). Self-awareness is not a destination, but rather a genuine commitment to an ongoing process that exists on a continuum and depends on whether we lean toward objectivity or subjectivity.

Subjectivity falls under the umbrella of self-serving biases and affects our cognitive ability to accurately process information about ourselves and others (Myers, 2000). Objectivity is an attempt to observe things as they are, not as we want them to be. Both subjectivity and objectivity are at opposite ends of the spectrum. Bowen emphasizes: "Observe yourself; examine yourself" (Kerr & Bowen, 1988, p. 131). Bowen proposes that objectivity is required for counselors to identify the real issues that may prompt clients to seek counseling, which may be hidden from the clients' awareness (Kerr & Bowen, 1988). When counseling under the umbrella of subjectivity for the most part, counselors may help clients with their presenting symptoms, while the real distress that brought them to counseling may remain under the surface. I submit that the extent to which we may engage in subjectivity in the therapeutic session, the more likely we will divert from beneficence because subjectivity may fog our perceptive ability to prevent harm. This is the reason I argue that engaging in genuine self-awareness is pivotal for the counselor of tomorrow.

Jung (1957) champions self-knowledge,

which is deeper than self-awareness because it not only calls for being aware of our history, but also an awareness of our self-deceptions. Echoing Jung, Gaylin (2001) argues that "it is essential to know oneself" (p. 303). When we are driven mostly by our subjectivity, we are "reacting with sympathy" to our clients' distress by identifying with the issues they are bringing to the counseling room. Under the realm of subjectivity, we have a tendency to rescue the clients from their feelings because they may be triggering our sore spots. Our sore spots may be holding similar feelings as our clients. When we are driven mostly by objectivity, we are "responding in empathy" to our clients' distress. Thus, we encourage our clients to stay with the feeling. We are able to go deeper when our sore spots are not activated by our clients' distress. We cannot take our clients where we have never been. I would argue that meeting the clients where they are takes nothing less than our full awareness about our own issues.

Bowen suggests we need to become aware of how our body may react to our clients' narratives when we are in the counseling room. How do we feel when we listen to our clients' issues and concerns? Are we empathically listening to discern meaning, or are we distracted by how our internal dialogue may have been triggered by our own sore spots? Are we automatically reacting, or are we consciously responding? While the counselor's self-awareness is the road map to identifying, assessing, and responding to the client's meaning, objectivity is the compass. Together, self-awareness and objectivity encompass the most important gear impacting how a counselor navigates through the counseling session today and tomorrow.

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The WHO wants you

The World Health Organization (WHO) Department of Mental Health and Substance Abuse invites members of the American Counseling Association to register for the new Global Clinical Practice Network. The goal of the network is to help inform the development of the classification of Mental and Behavioral Disorders for the next version of the *International Classification of Diseases (ICD-11)*.

Participants may be asked to provide information and feedback, review materials or participate in field studies as the WHO develops the new classification system for the *ICD-11*, set for publication in 2015.

According to the WHO, "The information you provide will inform our decisions about the content and structure of the new classification system, as well as how that information will be presented to different users. The surveys that we send to you will be based on your own professional interests and areas of expertise. Once registered ... you will receive survey requests no more than once a month, and each survey will take approximately 20 minutes to complete."

"This is very important work that will ensure any new classification is clinically useful," says Rebecca Daniel-Burke, the director of professional projects and career services at ACA. "A very small group of 'licensed counselors' — their words — were involved in the *ICD-10* revision process. Now that they want 2,500 [mental health professionals to participate], hopefully we will have more 'licensed counselors' representing our profession."

The first studies are expected to begin within the next few months. To register, visit http://kuclas.qualtrics.com/SE/?SID=SV_6xm6vdPhl8S3hUF.

FY 2013 Election Results

American Counseling Association

President-elect

Robert L. Smith

Governing Council Student Representative

Anna Flores Locke

Association for Assessment and Research in Counseling

President-elect

Shawn L. Spurgeon

Treasurer

Jacqueline Swank

Member-at-Large for Membership

Elizabeth A. Prosek

Association for Adult Development and Aging

President-elect

Robert A. Dobmeier

Governing Council Representative

Catherine B. Roland

Treasurer

Meghan R. Lehembre

Association for Child and Adolescent Counseling

President-elect

Gail K. Roaten

Secretary

Evette Horton

Trustee Position 1

Phyllis Post

Trustee Position 2

Yumiko Ogawa

Association for Creativity in Counseling

President-elect

Thelma Duffey

Governing Council Representative

Shane Haberstroh

Trustee Position 1

Ioana Boie

Trustee Position 2

Jason H. Rydzewski

American College Counseling Association

President-elect

Tamara Knapp-Grosz

Governing Council Representative

Perry C. Francis

Treasurer

Sylvia E. Shortt

Member-at-Large

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Association for Counselors and Educators in Government

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Lynna Meadows Morton

Governing Council Representative

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Director

Judith Mathewson

Miles T. Sakaguchi

Angie Waliski

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Association for Counselor Education and Supervision

President-elect

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Governing Council Representative

Gerard Lawson

Secretary

Jennifer Jordan

Association for Humanistic Counseling

President-elect

Brandé Flamez

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

President-elect

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Association for Multicultural Counseling and Development

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Student Representative

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American Rehabilitation Counseling Association

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Jane Warren

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Education Sessions: March 28–30, 2014

April 1, 2013: Online proposal site opens

June 5, 2013: Proposal Submission Deadline (5:00 p.m. ET)

August 7, 2013: Acceptance/rejection notices emailed

October 30, 2013: Scheduling notices emailed

December 15, 2013: Education Session Presenters Registration Deadline

Please visit counseling.org/conference for additional information.

Note: *The primary presenter must be an ACA member.*



NCDA celebrates 100th anniversary

*Submitted by Deneen Pennington
dpenn@ncda.org*

This year marks the 100th anniversary of the National Career Development Association. Originally named the National Vocational Guidance Association (NVGA), the first president was Frank Leavitt. “It was through humble beginnings where career development was born and began to thrive,” says NCDA President Rich Feller.

Here is a start regarding how we can all celebrate together:

- The annual Global Career Development Conference, to be held July 8-10 in Boston: The conference will highlight a series of memorable anniversary events in addition to the comprehensive professional development institutes, special tours, keynote and featured speakers, and rich learning experiences.

- The *Career Development Quarterly (CDQ)* 2013 special series: The journal is publishing a special series of articles in the next four issues highlighting historical developments connected to career counseling and NCDA. Members access the *CDQ* online, under MyNCDA on the website.

- Historical articles published in *Career Convergence*: Beginning with the Feb. 1 issue, the NCDA web magazine will include documents from the years surrounding the 1913 debut of NVGA. Articles covering current trends will also include a reference to the historical perspective of the topic.

- *Career Developments Magazine* looks to the future: “Celebrating Career Development in the Next 100 Years” is the theme of the first issue of volume 29. Many advances will be made to our field in the future, and NCDA members can rely on the magazine to aid in the process of honoring and valuing the work we do. Also, each issue in 2013 will include a list of significant dates in the history of career development.

- NCDA website (ncda.org) includes the NCDA mission and history: Listed

under “About NCDA,” a few paragraphs give a brief overview of the history of our organization. A list of NVGA/NCDA past presidents is included — see how many names you recognize!

Watch for more ways to acknowledge our centennial.

ACCA announces research grant opportunities

*Submitted by Taffey Cunnien
taffeyc@gmail.com*

The American College Counseling Association announces two research award opportunities for 2013. Grants are awarded to research in the field of college mental health at both the graduate and doctoral levels of study.

- \$5,000: This funded research is designed to recognize and honor individuals who are seeking to complete a comprehensive research study, providing a cash award of up to \$5,000. The purpose of this financial support is to fund research efforts supporting research related to college counseling practices.

- \$1,000: This funded research is designed to recognize and honor individuals who are seeking to complete a comprehensive research study, providing a cash award of up to \$1,000. These investigations include counseling at community, vocational and technical institutions, as well as colleges and universities. The purpose of this grant is to support research that increases understanding of professional counseling as it relates to college student populations and the professionals who serve those populations.

Applications can be found on the ACCA website at collegecounseling.org. Deadline for applications is June 3. Contact MJ Raleigh with any questions at mj.raleigh@uncp.edu.

AHC honors award winners

*Submitted by Jeff L. Cochran
Jcochr11@utk.edu*

- Humanistic Leadership Award: John Parkman for dedication to the

Association for Humanistic Counseling and the counseling profession, for his open, warm and caring way, and for leadership through his examples of volunteerism, service and career.

- Past President’s Award: Michelle Perepiczka for her energy, hard work and organizational skills. She has welcomed many into the AHC fold and leadership.

- Past Editor’s Award: Colette Dollarhide for maintaining and increasing high standards of humanistic scholarship, while treating each author-submitter with the utmost respect and support.

- Humanistic Clinician Award: Brandé Flamez for promoting social change in supporting schools, orphanages and other support systems in Tanzania.

- Distinguished Journal Reviewer: Gloria Aquino Sosa for thought-provoking reviews, proving that one can be friendly, professional — humanistic, even — in manuscript reviews.

- Humanistic Educator/Supervisor Award: We honor two educator/supervisors. Sue Bratton was nominated by former and current students for always making time for students, her tenacious belief in their capacity and that of all persons, and her personal connection and commitment to students. Christopher Schmidt was nominated by peers and his chair, on behalf of student accolades, as a counselor educator who consistently demonstrates a humanistic philosophy and a model of what service should look like.

- Humanistic Impact Award: Tricia McClam for her long and going-strong career in human services and counseling, and whose scholarship and service is positively changing the lives of children, youth, families and students.

- Humanistic Advocacy and Social Justice: Bob Kronick for bringing wide-ranging supportive services into full-service community schools for some of our most troubled children and inspiring students to service and advocacy.

■ Humanistic Dissertation Award: Janee' Avent, University of North Carolina-Greensboro, for her outstanding dissertation with significant humanistic content: "What Then Shall We Say to These Things? An Investigation of African American Pastors' Response to Mental Health Needs in the Black Church and Their Influence on African American Help-Seeking Behaviors and Coping Strategies."

■ The Joe and Lucille Hollis Publications Award: Nancy Cochran, William Nordling and Jeff Cochran for *Child Centered Play Therapy: A Practical Guide to Developing Therapeutic Relationships with Children* (2010, Wiley).

TCCA and TCA join forces for conference on college counseling

Submitted by Robin Rumancik
robin@txca.org

The Texas College Counseling Association is pleased to announce the fourth annual College Counseling Conference in Austin, Texas, to be held May 19-20 at the Austin Marriott South. This year's theme is "Challenges of College Counseling." Attendees will have the opportunity to earn at least nine CEUs. All programs are specifically designed to address the unique interests and continuing education needs of professional college counselors, student service personnel and those working in college counseling settings.

If you find yourself concerned about the rising number of campus crises, diminished budgets, suicidal students, doing more with less and threat assessments, then this conference is a perfect fit for you. Programs will also address higher education changes, counselor self-care and case management, among other topics. The 2013 College Counseling Conference opens on May 19 at 2:30 p.m. and closes May 20 at 3:30 p.m. Preregister for just \$100 by May 6. Onsite registration is available for \$130. The conference is co-hosted by TCCA and the Texas Counseling Association. For complete conference details, visit txca.org/CCC. ♦

From the President

continued from page 5

I know about mentoring by observing great mentors in action — and there are hundreds of exceptional mentors in ACA.

And that leads me to the real reason for this month's column. What mark will you leave on the next generation of professional counselors? How will you help to grow and nurture the future of our profession? Answer: Become a mentor and make a true and lasting difference, one mentee at a time. Mentoring students and new professionals takes little time and almost always is as rewarding for the mentor as it is for the mentee. But how, you ask, do you go about finding a mentee? This is your lucky day — and an even luckier day for your future mentees!

To directly address the mentoring needs of ACA's student and new professional members, the ACA Graduate Student Committee has updated, redesigned and expanded the previous year's pilot mentoring program, and applications are currently being accepted, both for mentors and mentees. In fact, the ACA mentoring program has already made more than 40 matches.

The program is designed to provide an opportunity for counseling graduate students, or newer counseling professionals who have graduated within the past year or so, to pair with more-seasoned professional colleagues who share similar interests, experiences and goals. Participation in the program can involve as much (or as little) time as both parties are interested in committing. Please email mentoring@counseling.org to receive an electronic link to the online application form. It only takes a few minutes to complete the application, but please have your ACA member number handy because you will need to enter this information.

To help with the mentoring process, Graduate Student Committee members also have compiled useful resources, which are posted to the COUNSGRADS Listserv on a monthly basis. The committee co-chairs, Victoria Kress and Nicole Adamson (the first graduate student in history to chair an ACA committee), have worked tirelessly to get this program up and running and to follow up with the mentoring pairs, offering resources and questions for potential discussion. The mentoring commitment officially runs for one year, from the beginning of July to the end of the following June, but the relationship can continue indefinitely if both parties so choose. Current mentoring pairs are reporting numerous personal and professional rewards from their participation in the program.

So make a difference in the professional development of a student or new professional colleague. Volunteer today to be a mentor through the ACA mentoring program. You will become an inspiration and help make all the difference in the lives of the next generation of professional counselors. Type in mentoring@counseling.org and hit "Send." It will change your life. It will change the counseling profession. ♦

Submit your news and upcoming events

All divisions, regions and branches of the American Counseling Association may submit monthly news articles of 350 words or less to "Division, Region & Branch News." In addition, divisions, regions and branches are invited to list their upcoming events in "Bulletin Board." For submission guidelines, contact Heather Rudow at hrudow@counseling.org. Be advised of the following upcoming deadlines for submitting items to either section.

May issue: April 1 at 5 p.m. ET
June issue: April 25 at 5 p.m. ET

July issue: May 30 at 5 p.m. ET
August issue: June 27 at 5 p.m. ET

COMING EVENTS

CCA Annual Conference

**April 5
Mystic, Conn.**

Join the Connecticut Counseling Association at its annual conference, “Counseling Connections 2013: Changing Tides — Fostering Resiliency and Finding Inspiration.” We are excited to be visiting Mystic this year and hope that your visit will not only include networking and educational workshops but also opportunities to have fun with your colleagues in the evening hours. This New England town is family friendly, so book a room at the Mystic Hilton at the special conference rate and bring your family along to spend time at the Mystic Aquarium and Olde Mystic Village. Registration is priced low, and CEUs are available. Student scholarships are available to CCA members. Email ccaconference@hotmail.com or visit ccamain.org for more information.

MeCA Annual Conference

**April 8-9
Rockport, Maine**

Join us in beautiful Rockport for the Maine Counseling Association Annual Conference. Our keynote speaker, Mark Tappan, a Colby College professor and author, will discuss a key topic: “Engaging Boys: Resistance, Relationships and Getting Real.” In addition to this wonderful keynote, we will have a multitude of session offerings that will serve as professional development opportunities for mental health counselors, K-12 school counselors and admissions counselors. For more information, visit maineca.org.

ACAM Annual Conference

**April 11-13
Jefferson City, Mo.**

ACA of Missouri’s Annual Conference and the Missouri Career Development Association Exposition Day will be held at the Capital Plaza Hotel. John Krumboltz and Howard Rosenthal will present as keynote speakers. For more information or to register, visit counselingmissouri.org.

Young Child Expo & Conference

**April 17-19
New York City**

The 10th annual Young Child Expo & Conference will be held at New York’s Hotel Pennsylvania. The conference will bring together attendees across various disciplines to integrate learning about typically developing children and those with special needs. For more information or to register, visit youngchildexpo.com or call 212.787.9700 ext. 333.

NJCA Annual Conference

**April 19-21
Lincroft, N.J.**

The 2013 New Jersey Counseling Association Annual Conference will take place at the Donald D. Warner Student Life Center at Brookdale Community College. The conference brings together students and professionals in counseling-related programs and careers for thought-provoking seminars, workshops and relationship development. The conference will continue the tradition of providing attendees with interesting and diverse speakers and experts in a variety of specialties within mental health and related fields. The National Board for Certified Counselors will approve programs for continuing education credits. Visit njcounseling.org for more information.

International Counseling and Education Conference

**May 2-4
Istanbul, Turkey**

The American Counseling Association is co-sponsoring the second International Counseling and Education Conference, to be held at Istanbul Commerce University. ACA President Bradley T. Erford will present a workshop on the “35 Techniques Every Counselor Should Know.” For more information, email iceconference@gmail.com or visit ice-c.net.

TCCA and TCA College Counseling Conference

**May 19-20
Austin, Texas**

The fourth annual College Counseling Conference will be held May 19-20 at the Marriott South in Austin, Texas.

Attendees can earn at least nine CEUs. If you are concerned about the rising number of campus crises, diminished budgets, suicidal students, doing more with less and threat assessments, then this conference is a perfect fit for you. Programs will also address higher education changes, counselor self-care and case management, among other subjects. Preregister by May 6 for \$100. Onsite registration is \$130. The conference is co-hosted by the Texas College Counseling Association and the Texas Counseling Association. For complete conference details, including hotel information and to register, visit txca.org/CCC.

IAMFC Northampton Institute

**May 29-June 3
Northampton, England**

The International Association of Marriage and Family Counselors is pleased to announce its 10th annual Northampton Institute, to be held at Park Campus, University of Northampton. The theme will be “Families and Diversity.” This event will bring together an international group of counseling professionals, students and educators who share a common interest in family counseling research, education and practice. In addition to presentations on family counseling-related topics, the institute will provide an immersion experience into English culture, including escorted day trips to sights in central London and rural Northamptonshire. The \$795 fee includes five nights at the Sunley Centre, a modern, on-campus hotel facility. IAMFC invites proposal submissions from educators, clinicians and others. For more information, visit nsi.vpweb.com or email drbbsc@aol.com.

AHC Summer Conference

**June 7-8
New York City**

The Association for Humanistic Counseling’s 2013 Summer Conference will be held at the New York Institute of Technology. The theme is “Humanism in the Counseling Profession.” Presentation topics related to counselor wellness, graduate counseling students, career

counseling, school counseling, clinical mental health, and counselor education and supervision will be offered. For more information, contact Michele Perepiczka at mperepic@nyit.edu or visit humanisticcounselor.com.

International Career Conference June 20-22

Padova, Italy

The American Counseling Association is partnering with the Laboratory of Research and Intervention in Vocational Guidance (La.R.I.O.S.) and organizations from around the world for the international conference "Life Designing and Career Counseling: Building Hope and Resilience." Themes include hope and optimism in times of crisis, positive psychology in career counseling, career counseling and life designing for unemployed and underemployed workers, and much more. For more information, visit larios.psy.unipd.it.

NASAP Conference June 20-23

San Diego

The 2013 North American Society for Adlerian Psychology Conference will be held at the Town and Country Resort. The theme will be "Encouraging Each Other, Healing Our World." Both Alfred Adler and Rudolf Dreikurs emphasized the importance of encouragement for healthy human growth and development. For more information, visit alfredadler.org/conference-2013 or email watts@sbsu.edu.

AADA Summer Conference July 18-19

New York City

The Association for Adult Development and Aging's 2013 Summer Conference will be held at the Roosevelt Hotel in Manhattan. The theme is "Adult Identity Evolution: Diversity Within Personal and Professional Transitions." On July 18, there will be two preconference workshops, one addressing supervision and the other focusing on professional ethics. Presentations addressing a wide variety of counseling issues related to adults across the life span will be presented July 19. For more information, contact Catherine Roland (rolandc@mail.montclair.edu) or Suzanne Degges-White (sdegges@olemiss.edu), or visit aadaweb.org.

FYI

Call for editorial board members


The *Journal of Counseling & Development (JCD)* is seeking applications for positions on its editorial board. Board member appointments begin July 1 and extend for a three-year term, including review responsibilities during the summer. Reviewers must hold membership in the American Counseling Association and have experience publishing in counseling-related journals. Preferred qualifications include experience with quantitative, qualitative, mixed-methods or single-case research designs, and/or expertise in the counseling field with respect to theory and practice. Because the journal utilizes an electronic review process (Scholar One), applicants must have email capabilities and access to the Internet. Please email a letter of application specifying areas of expertise and qualifications, including ACA membership number, commitment to board service and a current curriculum vita, to ShinHwa Lee, editorial assistant for *JCD*, at Shinhwa.Lee@tamucc.edu.

Call for submissions

The Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling invites submissions for the *Journal of LGBT Issues in Counseling*. The intent of this journal is to publish articles both relevant to working with sexual minorities and of interest to counselors, counselor educators and other counseling-related professionals working across diverse fields. Topic areas include new research, new or innovative practice, and theoretical or conceptual pieces, including literature reviews that reflect new ideas or new ways of integrating previously held ideas. The journal is distributed quarterly. For detailed submission guidelines, contact Ned Farley at efarley@antioch.edu or visit tandfonline.com/action/authorSubmission?journalCode=wlco20&page=instructions.

Bulletin Board submission guidelines

Email hrudow@counseling.org for submission guidelines. See page 67 for upcoming submission deadlines. ♦



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issue of abortion discussed instead of swept under the rug, I would be hesitant to endorse a technique of counseling that is not empirically supported at this time by the research literature.

*Lauren
Conroe, Texas*

I was both pleased and interested to read the article on abortion aftercare in the 21st century. I believe it is a topic that has been swept under the rug for too long.

I agree with most of what Ms. Johnson wrote. Women need to be accepted and treated with respect and without judgment. However, the blame and shame Johnson spoke of that keeps women from addressing their grief in counseling comes not only from pro-life messages but also pro-choice messages. If you are unaware of the pressure and judgment from both sides, you may lack the ability to truly connect with your client.

The author did a good job describing the message from the pro-life side of the debate but ignored messages from the pro-choice side, which says that abortion is in itself the solution to a woman's problems and therefore brings healing. I believe a strong message is sent that if a woman is in control of her body and her decision, she should be happy. Grief is never brought up, and a woman may feel guilty or weak for having these feelings. I believe that in helping a client to heal,

normalizing these feelings of grief is essential.

Regardless of whether we are pro-life or pro-choice — and whether we are acting in a professional or personal capacity — we need to be honest and let women know that having an abortion is not without its potential consequences. The more information a woman has, the more confident she may be in her decision — and the more likely she will be to seek help in her healing.

*Amanda, LPC
Ann Arbor, Mich.*

Defining Adler and Freud's relationship

I would like to correct a statement made in the December 2012 "Through a Glass Darkly" column in which Alfred Adler is described as a "famous student" of Freud's ("The continuing evolution of 'great' counseling"). This is a most often noted mistake about Adler, who was not a student of Freud's. Adler made this very clear in his writings. In fact, Adler was known to carry the invitation note from Freud in his shirt pocket for many years that identified the relationship as collegial, not pedagogical.

Any accurate discussion of the evolution of counseling would be expected to present this detail correctly.

*G. Thomas Vaughn, LPC/S, NCC, ACS, CEAP
garlandvaughn42@webster.edu ♦*

Letters policy

Counseling Today welcomes letters from ACA members; submissions from nonmembers will be published only on rare occasions. Only one letter per person per topic in each 365-day period will be printed. Letters will be published as space permits and are subject to editing for both length and clarity. Please limit letters to 400 words or less. Submissions can be sent via email or regular mail and must include the individual's full name, mailing address or email address and telephone number.

ACA has the sole right to determine if a letter will be accepted for publication. *Counseling Today* will not publish any letter that contains unprofessional, defamatory, incendiary, libelous or illegal statements or content deemed as intended to offend a person or group of people based on their race, gender, age, ethnicity, religion, sexual orientation, gender identity, disability, language, ideology, social class, occupation, appearance, mental capacity or any other distinction that might be considered by some as a liability. ACA will not print letters that include advertising or represent a copy of a letter to a third party. The editor of *Counseling Today* will have responsibility for determining if any factors are present that warrant not publishing a letter.

Email your letters to ct@counseling.org or write to *Counseling Today*, Letters to the Editor, 5999 Stevenson Ave., Alexandria, VA 22304.

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Hi Dr. Janis,

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Best,
Solana Varner



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