



Counselors Rock!

LPCA CONNECTION

Official Publication of the Licensed Professional Counselors Association of Georgia

Celebrating Dr. Fred Richards A Pioneer of Clinical Mental Health in Georgia

Our first networking event during COVID was in Carrollton, Georgia, to honor one of our profession's strongest advocates and role model, Dr. Fred Richards.

From Fred to all: *"I want to say thank you again, for holding the networking event in Carrollton and also for the presence of LPCA President Tim Robinson, Kelly Moselle, Johnnie Jenkins, and Julianna McDowell, our lobbyist who has done such a fantastic job. You and the others did so much to make the event happen and to make it a meaningful gathering, including all the gift bags, etc. Anne and I were pleased to see Lisa King Smith recognized for her service to LPCA of GA as President and more. She's a dear friend and a terrific colleague and a valued presence in the building where I work."*

Carroll County Mental Health Advocates posted a video paying tribute to Dr. Richards for all he has done for his community and our profession. Go to <https://www.facebook.com/watch/?v=748237275760438>.



Fred Richards, PhD, LPC, a.k.a. "Human Sunshine"

Attendees received an LPCA gift bag filled with hand sanitizer, LPCA face masks, koozies, mobile phone/pen holder for car, yummy chocolates, and a pool noodle for six feet social distancing! In addition there were lots of great "eats" like chicken wings, sliders, BBQ, humus and dips, lots of veggies, coffee, and bottled water.



Our smiling hardworking volunteer, Lei Phyu Tun



Fred signs Lisa's LPCA Presidential Yearbook



Fred discusses advocating for LPCs with LPCA Lobbyist Julianna McDowell

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PRESIDENT-ELECT

Angela Feeser, LPC, CPCS

Do you telehealth?

This is a question that has been asked a lot in the past months; both patients and colleagues. A patient shared that in talking with her friends about therapy, it’s become somewhat of a tagline. It seems that the initial adjustment and awkward period of providing and receiving therapy online, has now become comfortable and progressive.

We’re now in month eight (approx.) since COVID-19 presented and changed how we provide services. COVID-19 triggered a massive acceleration of the use of telehealth. Therapy was expanded during a period where many things were being restricted. Use of telehealth in 2019 was 11% to currently 46% now used to replace canceled appointments (McKinsey COVID-19 consumer survey April 2020), and 76% of patients interested in using telehealth going forward (vs 11% in 2019).

What are patients and providers saying? I asked a few colleagues and patients to share. Patients and providers report preferring the convenience of using telehealth from where they are, i.e. home, work, car, and office. A potential barrier considered by both parties is ensuring the location/setting provides appropriate space to ensure confidentiality. Patients report enjoying the ease of access without the hassle of transportation to and from appointments; likewise providers enjoy not having to commute to an office (if working from their home office). Patients believe they’re more likely to not cancel an appointment due to feeling under the weather (i.e. sniffles, congestion) knowing they can be at home and not expose others. A few patients, depending on their insurance, have zero copay using telehealth. Providers reported a decrease in no show appointments. Patients and providers reported none to little negative impact on efficacy of treatment. Some providers acknowledged that telehealth may not be the best method of providing counseling for some patients. Providers who are able to work from home reported feeling less stress day to day and improved self-care. If an appointment cancels, they can cross off something on their to-do list, enjoy a yoga session, fold a load of laundry, or even take a quick nap!

So what’s next for our field in the use of telehealth?

I believe the use of telehealth will be available, and possibly preferred, by all parties as we move forward. As with anything that we begin to do more of, proper training and practices will need to be evaluated on-going. We will need to not only hold ourselves accountable but also each other i.e.; sharing information, consulting, supervision, training. We will need to ensure that practices are current, evidence based and ethical. Depending on the population receiving therapy using telehealth, we need to ensure that resources and interventions, easily used in face to face sessions, are accessible and modified (if needed) to ensure efficacy and positive outcomes for the patient.

As we begin to prepare for the next convention, I’m sure telehealth will be a key topic of workshops. I’m looking forward to seeing the path of therapy developing using telehealth. What are your thoughts? I’d love to get your input; feel free to email me!

As always, take care of yourself! We cannot pour from an empty cup!

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PRESIDENT

Tim Robinson, LPC, CCTP, CPCS, CAS-F

My visit to the Western District was very rewarding. All attendees were given gift bags and treated to a wonderful meal. We had several people to honor. Before there was a Composite Board there was a licensing agency for our state for marriage and family therapists. Fred Richards was instrumental

in bringing people together, including those who enacted legislation creating the profession of counselling. He was friends with, and worked with, those who also shaped the foundation of the Georgia Composite Board of PC, SW, MFTs. He also worked with our founding fathers of LPCA of GA. Past President Lisa Smith was also honored and was presented with her Yearbook; things we were unable to do via the virtual convention. Finally, we honored Julianna McConnell, our lobbyist, for her achievements in getting the 1013 and diagnosing bills passed (as well as her many other contributions). We will be hosting events in the other districts as well and I look forward to meeting you.

Please contact your legislators when you get the e-mail blasts asking you to do so. If we want parity with Medicare and Medicaid, that is our power. Our project of a mural on the beltway is taking shape quickly and we have artists. If you have a building that would let us do one in your town, let us know. We are bonded and insured. If you are a faculty member at a school that does not have a Student Affiliate Organization, please consider volunteering to start one. We can offer support and help.

Any member can contribute to the newsletter and we are always in need of articles. I encourage you to write one. As an author, you can receive additional copies from LPCA. Possible topics can include: workshops you attended or presented, local events relating to our profession, a case study, ethics, supervision, a therapy model, telehealth, self-care, trauma, a book review, advice to new graduates, or any other topic that you can think of. Photos are also welcomed!

I want to thank you for being involved in our association and I look forward to your continued support. Please come to our events and I look forward to seeing you soon!



Counselors networking safely outdoors during Covid



LPCA Lobbyist Julianna McDowell receives beautiful chrysal award for her continued fight for legislation advocating LPCs in Georgia.



Good food and good atmosphere proves that networking can be fun.



A parade of pool noodles for fun social distancing!



IMMEDIATE PAST PRESIDENT

Carolyn Ramp, LPC, NCC, ACS, CPCS

Hello Fellow Counselors! Are you aware that Congress has passed a landmark VA Mental Health Counselor Bill? The House of Representatives approved and sent S.785 to President Trump for signature. This bill is the most significant new legislation for

the counseling profession in over a decade and is a step in the right direction for Licensed Professional Counselors to be approved to work with Medicare beneficiaries in their communities.

This is a huge advancement in the recognition of LPCs nationally. Your involvement, by sending emails and letters, and making calls to your representatives in the government, helped to make this possible. But our work is not finished!

While this bill is historic and directs the U.S. Office of Personnel Management to create the first ever federal government classification for mental health counselors (referred to as an Occupational Series), we are not yet able to offer our services to Medicare beneficiaries for private counseling. We must remain vigilant to what is happening in our profession! We must push forward and encourage our representatives to back HR 945 which could provide LPCs the opportunity to help all Medicare beneficiaries. Our state representatives need to hear from YOU! Yes, every single one of us should be reaching out through emails, letters and even calling our representatives about the importance of including LPCs for Medicare reimbursement. We can make another historic step!

HR 945 authorizes licensed mental health counselors to provide mental health and addiction services to Medicare beneficiaries. LPCA has been contacting the U.S. House of Representatives; we have sent out a call to action for you to let Congress know how important this is. Please take just five minutes and email your Representative asking them to include HR 945 in the House Energy and Commerce markup of mental health legislation. Let's remove the barriers to Mental Health Therapy! If you need help finding your representatives, just let us know at LPCA of GA and we will assist you.

LPCA of GA is one of the largest chapters for Mental Health Professionals in the United States! We have the opportunity to let our voices be heard. Imagine what we could do if every single member of our association contacted their representative! Join me in this effort. Make the future of our profession better—for yourself and for those who follow us!

**Please open and respond to the
LPCA Call To Action emails.
Your voice CAN make
the difference!**

EXECUTIVE DIRECTOR

Gale Macke LPCA@LPCAGA.org

Office Staff

We have two more staff members and a returning volunteer, Garland Hogan, Sam Nelson, and Lei Phyu Tun, for August–October joining Kelly Moselle, MA, MS, CAM-S, and I.

We had the privilege of working with Garland Hogan, a retired attorney, for several weeks. He established protocol and moved 35 programs from our “Live Webinar” programs to the on-demand online system. The work involved was quite complicated because of the conversion and the amount of material needed in order to meet NBCC’s CE approval for online on-demand workshops.



Sam Nelson

Our newest staff member is Sam Nelson, a full-time student at Brenau University, working on his Master’s in mental health counseling. He just recently graduated from the University of Alabama with his Master’s in Psychology. We’re excited to have him as one of our team members.

Volunteer Lei Phyu Tun, future APC, has returned from New York and is back in the LPCA office volunteering. She worked for Behavioral Health Links Georgia Crisis Center for a year on the night shift. She grew up in Burma now called Myanmar, and has a Master’s in Counseling from Rochester, NY. She is currently looking for employment as an LAPC. Again, we are so happy to have her on board!



Lei Phyu Tun



Dr. David Markwell

Administration

Under the wise vision of Dr. David Markwell, LPCA Supervisor Chair, a total of 1,062 CPCS recertification applications were processed. 577 of those were 9/1 or later. 429 of those were 9/15 or later. 107 were 9/30 or later. 184 new CPCS credentials were awarded.

Due to the influx of issues with license renewals, consultations with licensure issues, people looking for workshops, and CPCS recertifications, during the week of September 28th, caused our phone lines to be tied up continually. This temporarily prevented staff from processing their current workload just to keep up with the phone calls. The LPCA Board of Directors, all volunteers, and the LPCA staff worked together, overtime, without additional funding, processing hundreds of applications/consults per day in order to get everyone through by the September 30th deadline.

Communication

September, we sent out 667 email blasts for various subjects: updates on advocacy for Medicare and Medicaid, special changes by the licensing board for license renewal, and of course CPCS recertification instructions, directions, and how-to videos. One member called and said he read the email instructions, then received the special directions, and said he knew there was an issue when we emailed a step-by-step video. He liked the video best.

Emails for all five LPCA of GA email addresses totaled over 2,000 per week. Phone calls averaged over 110 per day (lost count on most days).

We had one very difficult week with 317 consultations, most having complicated issues with licensure and requiring several follow-up emails and phone calls. This a valuable benefit of your membership. Thank you to the various board members who stepped in to help!

Composite Board Update: New CE Rule and License Issues

It is here: the new CE rule 135-9. What is new? Not much. Same rules as before, no more than 10 hours online. But now, those “live webinars” count as in-person. The online/on-demand has moved back to the ten-hour limit as the emergency rule expired.

The Licensing Board members and staff, still not in the Macon office building processed 600+ applications. Yes, 600+. But they expressed their frustration at the quantity of very poor/incomplete applications. Supervisors, please do not let your supervisees file an application without first reviewing it. Better yet, use the LPCA Consult form and get a complete detailed application review.

How many denied/pending applications do we see monthly? Currently we are processing 35–65 consults per week. These are very complicated consults because of lack of forms, incomplete forms, not enough hours to qualify for licensure. Supervisors: don't let your supervisees file without you because the Licensing Board will ask why this is happening.



A Special Thank You to Dr. Brady Radford, LPC CPCS

Reverend Radford volunteered to assist in a consultation and spent weeks providing guidance and direction to an LPC applicant who will have to repeat three years of work under supervision due to a supervision issue. Being a mentor in this new environment is very difficult. We thank Rev. Brady for his time and dedication.



What People Are Saying About LPCA of GA

LPCA of GA has a **5 Star Rating** on Google!



Live In-Person Trainings Accepted by the Licensing Board

yourceus.com

National provider of internet based continuing education courses with several years of experience in developing content specifically for the nascent field of e-learning, utilizing advanced e-learning programming capabilities. For social workers in twenty-nine states and the District of Columbia under the National Provider program of NASW, and now for Licensed Professional Counselors and an approved provider for NBCC.

<http://www.YourCEUs.com>

Historic Federal Legislation for LPCs!

Congress Passes Landmark VA Mental Health Counselor Bill on September 24, 2020

Update by David Bergman of Bergman Strategies

The House of Representatives approved S.785, sending a major VA mental health and counseling bill to President Trump for signature. The bill is the most significant new legislation for the counseling profession in over a decade and a tremendous advancement for mental health counselors working for the federal government, and particularly the Department of Veterans Affairs.

This historic legislation directs the U.S. Office of Personnel Management to create the first ever federal government classification for mental health counselors, referred to as an Occupational Series. The Series will allow counselors to work in federal government agencies under the title of mental health counselor instead of generic Series that applies to many professions. Social workers and psychologists have had their own Occupational Series for decades and it is past time counselors have the same level of recognition.

The bill also creates scholarships for counselors interested in working for the VA Readjustment Counseling Program.

Senate Bill 785, called The Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019, also takes several steps to increase the hiring, training, and advancement of mental health counselors within the Department of Veterans Affairs (VA).

The bill requires the Comptroller General of the United States to prepare a study on staffing levels of mental health counselors and marriage and family therapists. The study will identify “impediments to carry out the education, training, and hiring of mental health counselors and marriage and family therapists,” as well as a “description of the objectives, goals, and timing of the Department with respect to increasing the representation of such counselors and therapists.”

The bill also creates scholarships for counselors interested in working for the VA Readjustment Counseling Program. AMHCA lobbying firm, Bergman Strategies, worked closely with Members and staff from the Senate and House Veterans Affairs Committees to develop and advance this important legislation.

LPCA of GA, a state chapter of AMHCA, would like to thank all its members for the phone calls and emails which made this possible.

AMHCA was the only national counseling organization to help shepherd this bill through both chambers, partnering with the American Association for Marriage and Family Therapy/California Association of Marriage and Family Therapists.

Editor's Note: David Bergman is now working with AMHCA. You may remember him as the behind the scenes helping us successfully get the word “diagnose” into the LPC Scope of Practice. Thank you Dave, for this federal legislation!

COASTAL DISTRICT

Joy F. Welcker, PhD, LPC, CPCS, OMC

Hello to the members of the Coastal District!

Hopefully everyone is reorganizing their professional work lives and hitting their stride again in the midst of the unexpected hurdles of 2020. We have been challenged to walk the walk we propose to our clients/patients every day. While the many challenges associated with COVID19 have been at the forefront of our daily lives, I find that I am also hearing a positive side to the stories of many families, such as time to reassess what is important (priorities), spending more time in family units while everyone is at home, parents becoming more involved in their children's education, thinking of others who may need assistance or be at higher risk, time for personal reflection, and room for gratitude. When clients come in and share these stories, I recognize how responsive, adaptable, and compassionate people are when they need to be. While there can be no doubt that COVID19 has been a destructive force for our safety and security (physically, financially, and emotionally), there does appear to be some element of positive reorganization at the personal and social level. Often I am asked if my work is "depressing" and I wonder at that question; to the contrary, I am usually inspired and bolstered by the resilience and compassion I see in my clientele on a daily basis. In the words of Jack Nicholson, they make me want to be a better therapist!

As Coastal District Chair, in the upcoming months I would like to host a couple of CE events in various areas of our Coastal Region. Ideally, these would take place between January and April of 2021. I would like to hear from anyone who is interested in presenting a topic during that time frame and I will work to arrange it. The key locales that I am targeting are Statesboro and Kingsland, but hosting from other locations is also welcome. Feel free to reach out with comments or interest to joy.welcker@yahoo.com.



EASTERN DISTRICT

Britland G. Stefani, LAPC, NCC

Just like many of you have likely experienced, this pandemic has brought about many personal and professional challenges for counselors. Directing our clients to practice positive self-care while attempting to find new self-care methods for ourselves is just one small example of this. We are in a role where we are helping others navigate the uncertainty and anxiety of this return to a "new normal" while simultaneously navigating this for ourselves.

Although it has been difficult in some aspects, it is also forcing us to think outside the box at times. In choosing to look at the positives amongst the uncertainty (part of my own self-care), I have been impressed with counselors' resilience in their responses to this pandemic. Many of you have been thrown into the world of telehealth when maybe technology has never been your "thing" nor your desire; you've learned, adapted, and overcome this in an effort to continue to support your clients. For those of us who work with children and adolescents, we've had to learn from others who are seasoned in tele-play as we find new ways of engaging our younger clients outside of the therapy room. Many of the colleagues I have spoken with have described a new gratitude and appreciation for both the in-person therapy experience and the ability to meet clients where they are at via telehealth.

As your new Eastern District LPCA Representative, it is my goal to find ways of supporting and encouraging members of our district as we continue to navigate the residual challenges and changes that 2020 has brought. I hope to elicit your feedback regarding various interests in networking events, workshops, and other areas of advocacy you wish to see in our district. Please look out for emails from me over the next few weeks as I attempt to gauge your interests in various events and needs. I genuinely look forward to serving in this role and thank you in advance for your support and feedback.



WESTERN DISTRICT

Louis Boynton, PhD, LPC, NCC, CPCS

The Western District is currently developing several supervision advanced topics including Narrative interventions for Supervision, Humanistic, and Existential Supervision, and a collaborative workshop with Charlie Safford LCSW on 21st Century Clinical Techniques. These workshops will

be conducted online and will be announced through the LPCA of GA starting in December.



NORTHERN DISTRICT

Britney Turk, PhD, LPC

The holiday season is quickly approaching and I hope you all are able to spend some time with your families and recover from what has been a unique and busy year! While the district has been quiet due to COVID-19 restrictions, members have been networking with each other through social media and sharing

relevant information to the profession and online CE events. This past October a networking event between counselors and psychologists was held with the psychiatry group of Northeast Georgia Physicians Group. Additionally, I hosted a webinar on biofeedback which held record attendance!

Thank you all so much for your devotion to the field and supporting each other in uncertain times! If anyone is interested in hosting a continuing education event or wanting to widen their referral network, please let me know at britneyallencounseling@gmail.com. Also please let me know of any continuing education topics you would like to know about and I will try my best to organize a CE!



Tell us you're a member of LPCA

www.geico.com/disc/lpca
800-368-2734



SOUTHERN DISTRICT

A.J. Ramirez, EdD, LPC, CPCS

Power, Privilege, and Collaborative Approaches

I want to focus on one statement that deeply resonates with me from Patricia Hill Collins (2017): "Without human oversight or agency, social institutions routinely replicate power hierarchies where violence

is vested less in speech but rather in bureaucratic action and custom" (p.86). This statement connects to my reflections about the ways I have been socialized in my career and the countless ways in which power dynamics are perpetuated without question or pushback. Because of the nature of power, those in positions without power do not have enough agency to challenge the norms without fear of retaliation or fallout. The political and economic climate adds additional stressors for our clients and their families, and the presence and absence of "power" adds to the stress of those we serve in the therapy context. Issues of race and gender remain at the forefront of conversations on power and violence and often impact how our clients are responding to their own experiences in treatment. In a time with COVID-19, elections, and the holidays approaching, it is hard to imagine how life functioned prior to this year. Our clients continue to persevere through these times as so do we, however let us be cognizant that much of what is occurring is impacting our clients daily. It is important that we acknowledge our own privileges and lack thereof as we process and facilitate change with our clients. Harlene Anderson the founder of collaborative therapy teaches the collaborative approach between individual and therapist may be particularly helpful to those experiencing issues with power differentials in relationships or those who have difficulty trusting others, especially figures of authority.

References:

Collins, Patricia, Hill (2017). Found in Valentine, Catherine, Trautner, Mary and Spade, Joan. (2019) The Kaleidoscope of Gender Prisms, Patterns, and Possibilities 6th ed. SAGE Publications.



CENTRAL DISTRICT

Joseph Wolstencroft, MDiv, PhD, LPC, CPCS

I was reflecting on, as I gathered my CE certificates for the 2018–2020 licensed renewal and CPCS recertification cycle, the CPCS Summit in Macon. Yes, there were several Summits, but this one I remember because everyone was getting concerned about the winter storm moving into Atlanta

and one of the attendees was from north of Atlanta. At that event, it was the last time I spoke in-person with James Pace. He was always engaging. So much has changed since then.

I just finished reading the new changes to continuing education hours. I know that I will have a difficult, if not impossible task, being there "in person" as a high-risk survivor of a recent medical event. I have to watch what I do and where I do it. I would hope that my situation would change, but I am not counting on it anytime soon. Glad to hear, the Licensing Board has available a petition for a variance on how CEs are obtained in cases of severe medical hardships.

Editor's Note: James Pace, LPCA Administrator and Director of Member Services, passed away quietly on March 29, 2020. It was not COVID related.

ATLANTA DISTRICT

Joanna Goulding, MA, APC, NCC

The seventh annual Youth Protection Seminar organized by the Boy Scouts of America and the Youth Protection Committee, was held on October 8, 2020. Following pandemic trends, this event was held virtually for the first time. Attendance was even better than expected. This annual seminar caters to community and civic leaders, and youth serving organizations who have an impact on children's lives. The goal is to partner together and create a safer community for all of our children. The LPCA of GA was a proud sponsor along with other significant organizations like the Cobb County School District, Boys and Girls Club of Atlanta, Big Brothers Big Sisters, The Atlanta Police Foundation, Georgia Bureau of Investigations, the YMCA, and Wellstar.

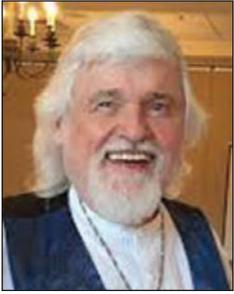
The Youth Protection Seminar included breakout sessions that provided continuing education to a variety of organizations. Topics included: forensic interviewing, online grooming, secondary trauma, polyvictimization, sex trafficking, preventing trauma and building resilience, mentoring kids who have experienced trauma, and the impact of the Coronavirus on services for children and families.

It was also an honor to attend the VIP event on October 7. This event allowed for more personal conversations with influential individuals in the youth protection arena including Tracy Techau (CEO of the Atlanta Area Council of the Boy Scouts of America), The honorary event chair Vic Reynolds (director of the Georgia Bureau of investigation) and First Lady Marty Kemp, who has been a strong advocate in fighting sexual exploitation and trafficking of minors.

I have served on the Youth Protection Committee for the past three years, and have been privileged to work closely with experienced and effective advocates for protecting our children. As a psychotherapist in the Atlanta area, and LPCA Atlanta District Representative, I see the value of partnering with the Boy Scouts of America and their many notable sponsors, in supporting and participating in future youth protection events.



Joanna Goulding and Georgia First Lady Marty Kemp



Holding on to Hope and One Another in a Wounded World

Fred Richards, PhD, LPC

Written for the June, 2020, issue of West Georgia Woman

Here is the scene. It is 1916. The German army is launching a gas attack against the Russian defenses. A moving wall of yellow

fog envelopes the Russian troops. The German infantry advances, breaks through the barbed wire barriers and then disappears.

The winds shift and both armies are engulfed in the deadly cloud. Birds drop from the sky. Flowers, trees, grass, bees turn black, decompose. German soldiers, many naked, crazed, and blind, flee the carnage, carrying Russian soldiers to safety. Imagine dying soldiers, some barely older than boys, lying together in trenches, desperately clinging to one another. Germans and Russians, boys and men at war, reaching out in the dark, wanting to be held as they die.

I write this sitting in my small study at home, sheltering in place, on my desk a mask and gloves I will wear when I venture outside. The soul-wrenching account of men at war is found in *Lazarus* by André Malraux, written as he struggled with a serious illness and the specter of his own death.

I have, for many years, sat quietly, closed my eyes, and meditated on my own decline and death, and the deaths of those I love. Realistically, it's a kind of preparation, a way of rehearsing for the inevitable losses and finalities that are part of living. I want to do as well as I can when I say goodbye, to my life and to others. The death meditation I do has, it appears, helped me to prepare for the pandemic now moving across the world.

Some believe my practice of death meditation is morbid, but it is not. When I open my eyes, I'm struck by how beautiful the world is, despite all the heartbreak, loss, cruelty, violence and despair that is part of the human condition. An object previously unnoticed seems to shine. I know how amazing it is to be alive. I want to jump up and tell others I love them, maybe even cry while saying it. I feel the urge to hug a lot of people, even people I barely know, or say to them something crazy like: "Do you realize we're all going to die? Celebrate being here now. Don't wallow in your misery. Take hold of those you love and let them know how much you love them, how glad you are they're in the world." I want to ask, with the words of Mary Oliver: "Tell me, what is it you plan to do with your one wild and precious life?"

Some of the people I encounter in the dark times may understandably experience my joy as naïve and even inappropriate. They may not realize my enthusiasm is actually a self-controlled version of what I feel. I have had passing moments when I felt my heart was big enough to take in the suffering of the world and pour out love in return.

Novelist and poet, Carolyn Houghton, writes that "we skate on hot blades over thin ice." Sometimes the ice breaks and we fall through; we confront the pain and suffering that is often concealed underneath the surface of everyday life. Therapist and author Mark Epstein wants to free us to live so he keeps reminding us it is necessary to face the trauma that is simply a fact of life. Trauma "does not go away. It continues to reassert itself as life unfolds." Right now this revelation is probably not "breaking news" for any of us.

Epstein further tells us that traumatic events do not have to destroy us. They can help us to discover resilience and strength we did not know we had. They can awaken in us, while we are still here, the realization that life calls us to choose to be among the truly alive rather than the walking dead. Facing the trauma of everyday life, particularly when living in the midst of a pandemic, we can discover more deeply who we are, what truly matters, what we value the most.

Joan Halifax in her book, *The Fruitful Darkness*, reminds us that "our personal suffering is also the world's suffering." The truth is this: we are not really alone in the trenches of life. Everyone who suffers is here with us. We are not just an "I." "I" and "you" are actually a "we." Sharing our suffering, Halifax writes, brings forth "the fruit of compassion, the fruit of joy." And yes, the fruit of hope as well. She sees catastrophic events as potentially "sacred" or "holy failures," capable of helping us to see that we are a part of everyone, everything. In the trenches of life, despair can morph into hope when we reach out and hold on to one another while we are still here, still alive! In *Joy, Inspiration, and Hope*, author Verena Kast writes: we are capable of being creatures of joy and not defeated victims living "our lives in tragic resignation" during the darkest times. Healthy, responsible joy gives birth to hope and hope allows "us to find shelter in life," and trust "in the future in spite of knowing better." To be a bringer of hope is to "turn toward a light that does not yet exist, though we have the impression that it must."

"Take hold of those you love and let them know how much you love them, how glad you are they're in the world."

One of my favorite poems is *A Ritual to Read to One Another* by William Stafford. In this circus we call life, it is crucial we hold on to one another so we don't lose our place in the human community. The poem depicts a chain of circus elephants parading through town. Each elephant is holding another elephant's tail because "if one wanders the circus won't reach the park." In many ways, the park represents where we all want to go to be. It's the place where we get to play and be happy, connect and communicate, and be with and for one another. Stafford cautions us to slow down, wake up, pay attention, and see what's happening. He tells us to hold on to one another so our "mutual life" is not "lost in the dark" because he warns: "the darkness around us is deep." His poem is one to read to each other as we huddle together in the trenches of the global pandemic.

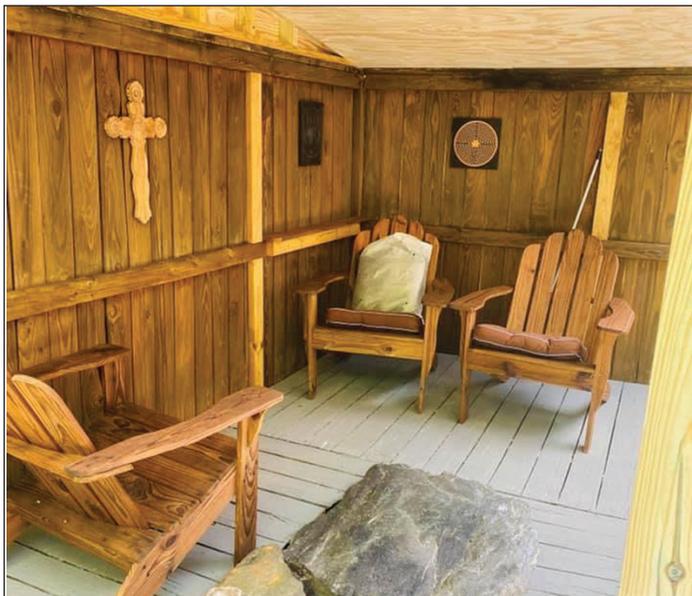
I am painfully aware of the unimaginable suffering persons are experiencing around the world and in my own community. My intention is not to minimize this suffering in any way. I also consider the possibility that some persons may be troubled or offended by my encouraging them to earnestly try to bring joy and hope to others overwhelmed by death, loss, heartbreak, and fear. Theologian Jurgen Moltmann in *The Theology of Play*, also struggles with how it is possible to laugh, be joyful, and rejoice when all of us, some more than others, are weighted down with worry and depression, when so many are traumatized and tortured by the dark state of the world. "Is it right," he asks, "to laugh, to play, and to dance without at the same time crying out and working for those who perish on the shadowy side of life?... How can we laugh and rejoice when there are still so many tears to be wiped away and when new tears are being added every day?"

Is it really compassionate and life-affirming to say yes to life in the presence of all this suffering, when the life we took for granted has disappeared and the future is uncertain and unknown?

In my best moments, I answer the latter question with a heartfelt YES. I shout, even when I myself am sad and fearful, amor fati! (love one's fate), strive and affirm the gift of life, even in, perhaps especially in, the dark times that can wound us the most. All the spiritual traditions I'm acquainted with proclaim it is possible to live life without being dominated by the fear that just comes with being human. They tell me we can become persons capable of bringing authentic hope to even what appear to be hopeless times. We can bring joy and hope in times of despair. They teach that practicing justice, again and again, is a way to become a just person. Practicing kindness, again and again, is how we become kind persons. In the words of psychologist and author, I. David Welch: "Every time we act we increase the chances of doing the same thing again. . . We are as likely to act ourselves into a new way of thinking as to think ourselves into a new way of acting." Every one of us, no matter who we are, can choose to make it our ultimate concern to strive to do no harm, to be a healing, hopeful presence in our own unique, imperfect way. I say imperfect, because those of us who seek to heal ourselves and others, are also the wounded. Those of us who seek to be whole are broken as well.

My wife, Anne, and I have a friend who, with an IQ of 52, is described as intellectually-challenged. When asked what he could do at work to make customers feel appreciated, he answered: "Smile, wish them a nice day, ask them how they are doing or feeling, be nice, and ask them if they need help." We are, of course, all challenged in one way or another. I continue to believe that most people, perhaps close to everyone, have the capacity to learn and know the difference between being kind and unkind, between harming others or seeking to do them no harm.

We don't need more advice, more information to know what to do and be in order to hold on to hope and one another. To live, for ourselves and others, a more meaningful, fulfilling life we must earnestly strive to bring what offerings of hope, love and joy we can, for "the darkness around us is deep.



Dr. Fred Richards transformed his back deck to provide therapy in person.

BOOK REVIEW

How to Fail as a Therapist

Tim Robinson, LPC, CCTP, CPCS, CAS-F



The purpose of this review is to introduce a text that provides valuable clinical information and guidance for beginning counselors. The title is "How to Fail as a Therapist: 50 + Ways to Lose or Damage Your Patients" (Schwartz & Flowers, 2010). This book can also be helpful for seasoned professionals. This publication is a part of "The Practical Therapist Series" of books.

This book is easy to read. The font is large and the authors make use of numbering and quotes in order to break up the text. It is laid out well and follows a sensible progression. The writing is designed to point out common mistakes that therapists make and then to offer ways to avoid them. These include behaviors that counselors engage in, as well as steps that they fail to take that result in poor treatment.

The book begins with a Forward by Dr. Arnold Lazarus. An Introduction and a Table of Contents follows. It ends with citations, a Bibliography, Appendixes that include assessments that can be used in therapy, a list of suggested assessment instruments, a list of suggested readings and an Index. The book provides realistic examples of how therapy breaks down and ways to avoid each pitfall.

This book is composed of fourteen chapters. Each chapter is further divided into the various skills that make up each topic. Each chapter begins with pertinent quotes. This book is impressive because it makes heavy use of quotes from recognized therapists throughout. Peer-reviewed sources are also prominent. It is heartening to learn from experienced counselors.

The chapters follow roughly the order of treatment. Preparing a client for therapy, assessment, expectations, boundaries, confrontation and various forms of non-compliance or miscommunication are addressed. This is a conglomeration of the actual chapters. Two chapter that seem to stand alone include one that addresses therapist burnout and another that outlines ways to successfully work with children.

In keeping with the title, the chapters are phrased in the negative sense. An example of a chapter title is: How to Guarantee Noncompliance with Assignments (Schwartz & Flowers, 2010). The use of the term "how to fail" in other chapters is not just a catchy technique to capture the reader. Rather, this is because each chapter opens with a relevant and realistic case study in which therapy goes wrong.

The authors then explore the vignette in detail. They list several errors and then offer solutions. Some of the mistakes may seem obvious. At the same time, other mistakes are more obscure or complicated. It is here that the teaching that the authors offer are invaluable. These suggestions are practical and will ensure best practice. It is important to note that they offer multiple answers for each problem.

I strongly recommend this book to those who are starting a counseling career. It provides guidance, tips and recommendations that are extremely helpful. The scenarios that are used as illustrations are brief and realistic. The book is easy to read and it is backed up by experience and research. The back matter alone is reason enough to obtain a copy of this text.

References:

Schwartz, R., & Flowers, J.V. (2010). How to fail as a therapist: 50+ ways to lose or damage your patients. Atascadero, CA: Impact Publishers.

Parental Burnout: A Deeper Concern in the Midst of COVID-19 and School from Home

Britney Turk, PhD, LPC, C-DBT
Michelle Ackerman, PhD



Britney Turk



Michelle Ackerman

Parental burnout is a concern that has gained increasingly more attention especially since the onset of the COVID-19 pandemic and requirements for children and adolescents to receive education from home in an online setting. In the early 2000s, a sharp increase in parental burnout was found in Europe. A similar trend was observed in the United States with 3.5 million

parents identified as experiencing parental burnout (Mikolajczak, Gross, & Roskam, 2019). Recently, a 14% increase has been detected (Hubert & Aujoulat, 2018). Due to these rising numbers, parental burnout has been investigated as a clinical syndrome deserving of mental health clinician attention. The purpose of this article is to educate our members about this syndrome.

Parental burnout is characterized by three symptom domains: exhaustion, emotional disinterest, and poor self-efficacy in the parenting role (Kawamoto et al., 2018; Mikolajczak et al., 2019). Parental burnout results from exposure to chronic levels of parenting stress and situations in which parenting demands outweigh available parenting resources. Extreme levels of parental exhaustion lead to parents experiencing a need to isolate themselves from their children and ultimately feeling ineffective in their role. Severe long-lasting consequences have been identified for children and parents such as depression, anxiety, parental addiction and sleep disturbance, child development issues, medical problems, relationship conflict, parental escape ideation, child neglect, and parental violence (Mikolajczak et al., 2019). Adverse childhood experiences (ACEs) have also been associated with parental burnout (Crouch, Radcliff, Brown, & Hung, 2019). Quarantines and new educational transitions for children and adolescents have increased the prevalence of mental health issues such as panic disorder, anxiety, depression, post-traumatic stress disorder, substance and behavioral addiction, domestic and child abuse, self-harm, suicide, and other psychosocial stressors such as loss of job, social isolation, homelessness, and relationship strain as well as increase vulnerability to parental burnout (Holmes et al., 2020).

In a recent research study for my dissertation, it was found that decreased emotional intelligence when combined with increased avoidant coping can collectively predict parental burnout and avoidant coping predicts higher burnout levels. These findings provide support that treatment protocols for parental burnout should integrate and address emotional intelligence and coping style. More than ever, it is critical that we provide emotional intelligence and coping education services for the parents of the children we serve. If you would like more detailed information on parental burnout, treatment protocols, or data from this study, please contact me at britneyallencounseling@gmail.com.

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Social Problems— Play Solutions

*Johnnie L. Jenkins, III
MA, LPC, RPT-S, CPCS, ACS*

Our nation has endured a difficult six months dealing with two difficult to solve problems at the same time. These are social unrest and a pandemic. Both crises seemed to make less discussed cracks in our society more apparent. Both seem to underscore the definition of a disparity and how they impact some communities worse than others.

Paris Goodyear-Brown (www.nurturehouse.org), a good friend and professional colleague in Nashville, TN, asked that I participate on August 1, 2020 in an on-line panel to discuss how traumas such as these impact children. Those on the panel were diverse with the African American, Latino, Asian, Native American, and non-heterosexual cultures represented. Paris Goodyear-Brown served as moderator for the three-hour discussion.

The objectives of the workshop were to:

1. Explain TraumaPlay
2. Describe three ways play therapists can practice humility with facilitating trauma narrative work
3. Define what it means to be an anti-racist play therapist from a TraumaPlay perspective
4. Articulate the role that shame can play in keeping all of us from engaging in difficult conversations
5. List activities clients can use to further explore their racial, and cultural, or ethnic identities

Participants were asked to discuss topics ranging from:

1. Childhood story were you understood the marginalized status with the culture of institutional racism
2. One gift your cultural heritage gives to society
3. Tips for parents who adopt children of different races
4. Discuss a time you expressed a racist belief
5. Tips for parents to raise anti-racist kids
6. Play intervention you use to help clients express their culture

Okay ladies and gentleman, I knew when I agreed to participate in this project that I was in good hands. I have been a fan of the moderator since I first heard her in 2000 in New Orleans at an Association for Play Therapy Conference. But what I did not see until it occurred was how these questions when asked to a diverse group does not have the same answers but all share the same pain and hurt. If we as adult professionals hurt when discussing it imagine what the children growing up in it must feel.

This panel reaffirmed for me why the work of mental health professionals and play therapists is so needed at this time. I look forward to offering more time when asked to serve on panels to start the healing process.



Play Therapy: Mourning the Passing of a Superhero

Posts from Facebook:

"That's deep. Kids with their toys know how to skip some steps. Well said without saying a word. The power of play."

"I just posted about this picture and the power the child expressed in it with few words as his tribute to Chadwick Boseman's death. His action shows the power and symbolism in play as we play therapists help kids say a lot with no words."



The “Infamous” National Counselor Examination, Otherwise Known as the NCE

Many of us are truly scared of standardized tests. Some of this fear we’ve carried since elementary school. As we progress in our careers, tests impacting our professional standing have even more meaning. One such test evoking fear in the hearts of many is the National Counselor Examination offered by the National Board for Certified Counselors.

On October 17, 2020, a workshop was conducted at the LPCA office to learn more about taking this test. Participants were given information on test-taking strategies, counseling theories, human growth and development, social and cultural diversity, counseling and helping relationships, group counseling and group work, assessment and testing, and research and program evaluation. The day ended with the participants practicing the information learned in a case study.

The NCE covers the following topics: Professional Practice and Ethics, Intake, Assessment, and Diagnosis, Areas of Clinical Focus, Treatment Planning, Counseling Skills, Interventions, and Core Counseling Attributes.

The NCE workshop is offered in a one-day format and includes an extensive NCE Test Manual, lunch, and eight CE hours. This workshop is designed to help counselors approach the exam realistically and confidently by understanding the structure of the exam and the content it attempts to measure. It is also a review course as our NCE study material has been updated for the DSM-5™. Attendees are encouraged to spend additional time in study preparation outside of this workshop.

Review from recent attendee: *I recently passed the NCE Exam, and I owe that in part to the NCE Prep Workshop that I attended. It provides a great overview of the material offered on the test, along with a binder to refer back to and study from. I would definitely recommend the NCE Prep Workshop for anyone looking to take the NCE. It was worth it!*



Aparna Hinduja, Eleanor Wassenberg, Angela Christine Pinson



U.S. Virgin Islands: A Diamond in the Rough

Johnnie L. Jenkins, III, MA, LPC, RPT-S, CPCS, ACS

The issues facing America this summer has impacted all 50 states and territories. One such notable place is the U.S. Virgin Islands.

This island nation has many challenges that some may not know about. The island has scarce mental health resources yet still has many of the challenges and mental health concerns all societies face.

Jessica Whyte, LPC, a USVI based counselor asked myself and Melissa Brown, LPC, RPT, CAMS, based in Norcross, to participate in a six-day virtual discussion to educators/school counselors, and parents about adjusting to the new normal. The first three-day block ran from 10AM to 1PM, August 18–20, and engaged teachers and professionals to discuss, burnout/self-care, adjusting to the new normal, grief and loss, and teachers learning about and teaching social justice. The second three-day block ran from 10AM to 1PM August 25–27, and engaged parents to discuss self-care, navigating the new normal, developmental stages, normal vs. abnormal, oppositional defiance and conduct problems, school refusal behavior, Errorless Compliance Training, behavioral modification, filial therapy, and social justice.

One of the key assets of knowledge is sharing it. In my opinion knowledge not shared is wasted. One concern I had going into this presentation was whether or not the knowledge I learned from a European perspective yet filtered through the eyes of an African-American male would resonate in a Afro-Caribbean culture. To my relief the learning does work but it must be reformulated to apply to the new setting. When the theories are presented with the audience in mind, learning quickly follows. Both groups asked many questions and learned many important things about themselves and children. They were able to address the challenges and strengths of their community. It is hoped this is the start of other workshops with the people of the U.S. Virgin Islands.



Georgia Senate and House of Representatives Health and Human Services Committee Special Event

Gale Macke, LPCA Executive Director

The Health and Human Committee protects the health of all Georgia residents and is responsible for legislation that affects the conditions of safety regulations and health services for the citizens of Georgia. This Committee also addresses the legal areas surrounding medical professionals as well as medicinal provisions. It has general jurisdiction over legislation that relates to health care and social services. This committee also addresses areas related to the licensing and regulation of health care professionals.

Senator Ben Watson, representing Savannah, is the current chairman of the Health and Human Services Committee, replacing Senator Renee Unterman who was running for US Senate. He also serves as a member of the Appropriations, Public Safety, and Transportation Committees, as well as an ex officio on the Insurance and Labor Committee, and the Veterans, Military, and Homeland Security Committee. As a new senator, he shared an office with the late Senator Greg Kirk, LPC, who was also a Past-President of LPCA of GA.

This particular event gave me the opportunity to discuss with our leaders matters that are currently of concern to LPCs during this pandemic.

In late April, Governor Kemp “opened” our state up to allow businesses to provide services again. At first, some health experts worried that the reopening would lead to an increase in cases that could overwhelm hospitals. So far, that fear has not been borne out. However, as we are now moving into flu season, and there is a mounting concern for those in the counselling profession about the psychological side-effects of this lingering and persistent pandemic. Schools, restaurants, and many businesses continue to struggle with reopenings and restrictions. Many children struggle with the new reality of home schooling, the isolation from their friends and family, and the inability to participate in many activities. Parents are also struggling with the stress of having to wear “too many hats.”



Holli Kelly, LMFT, and Past Executive Director of GAMFT, sporting our new LPCA face mask!

At this event, I had the opportunity to speak briefly with Governor Kemp about how LPCs are handling services during this world-wide pandemic. We discussed the 60% increase in job postings, LPCs seeing seven to ten patients per day, and the struggle with their own self-care. Because our governor wants to know more about issues concerning our profession, our office is planning to send a survey out to our membership.

It is always my honor to represent LPCA of GA at these important networking events.



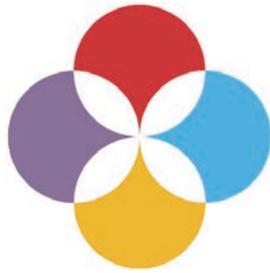
Gale Macke with Ben Watson, M.D., Georgia State Senator for District 1



Governor Brian Kemp with Gale Macke



Gale Macke with Deborah Silcox, Georgia State Representative for District 52



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"Loved the conversations and examples used to ensure participants can apply the information...This was an amazing training!"

"Very positive and enjoyable experience. Dr. Sutherland offered useful personal experience and was extremely personable throughout."

- **TeleMental Health: Breaking Geographical Boundaries in Counseling** (6 Telemental Health CEUs - satisfies Georgia TMH rule requirement)
- **Social & Cultural Diversity Ethics: Justice for All?** (6 Ethics CEUs)
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The National Board of Forensic Evaluators has three primary missions:

- Promote and serve the continuing education needs of mental health professionals. This is accomplished by educational seminars, workshops, publications via a highly specialized team of trained forensic mental health professionals.
- Serve families by providing specialized assessments, educational materials and treatment plans. This is accomplished through a professional team approach used to assess and diagnose attention deficit hyperactivity disorders, autism, disruptive behaviors, oppositional defiant disorders and various other problematic child behavioral issues.
- Serve the needs of our veterans and nursing home residents by promoting entertainment modalities throughout our senior communities. Additionally, establish and serve the needs of at-risk children and families by promoting entertainment modalities throughout local communities.



The National Board of Forensic Evaluators (NBFE) has been approved by the National Board for Certified Counselors (NBCC) as an Approved Continuing Education Provider, ACEP No. 6189. Programs that do not qualify for NBCC credit are clearly identified. NBFE is solely responsible for all aspects of the program.



This workshop has been approved for 8 hours of continuing education (7 CORE hours and 1 hour Ethics hour) with the Licensed Professional Counselors Association, CE approval #9469-19C and 8 hours of continuing education (6 general hours, 1 domestic violence hour, and 1 hour ethics/professional boundaries) with the Florida Board of Clinical Social Work, Marriage & Family Therapy, & Mental Health Counseling and Florida Board of Psychology, CE Broker Tracking # 20-551881 (CE Broker Provider #50-15823). NBFE is recognized and endorsed by the American Mental Health Counselors Association.



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SUPERVISION AND BUSINESS CONSULTATION. Free initial consult. **Jack L. Abernathy**, NCC, CCMHC, LPC, CPCS, Founder/Director Institute for Health, Hope, and Success, Inc., 900 Circle 75 Pkwy. SE, Ste. 1435, Atlanta, GA 30339, and 2430 Glenwood Dr. NE, Atlanta, GA 30305. Video conferencing available for supervision, and business consultation. Contact: jack@ihhsi.com, 404-895-0990 ext. 1.

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CLINICAL SUPERVISION FOR INDIVIDUALS WORKING TOWARD LPC LICENSURE or consultation for experienced counselors. I am a counselor and counselor educator with over 20 years of experience in various mental health settings and with various populations (children, teens, adults, couples, groups). I work from a developmental model to meet each individual where he/she is and to identify specific needs. I am also pretty good at sorting through the laborious paperwork and challenges associated with the licensure process! Convenient Roswell location. Contact **Mary Kate Reese**, PhD, LPC, NCC, CPCS, at 404-641-0548 or mkreese@argosy.edu.

INDIVIDUAL AND GROUP SUPERVISION for those seeking MFT or PC Licensure, and/or Play Therapy Registration or Certification. **Trudy Post Sprunk**, LMFT&S, LPC&CPCS, RPT&S, CPT&S, and AAMFT, approved supervisor. 770-491-7423.

SUPERVISION TOWARD LPC LICENSURE—experience with diverse populations including teens, adults, family and couples counseling; gay/lesbian and multicultural issues. Supervision style is Interpersonal Process Recall. **Ruby Blow**, MA, LPC, NCC, www.DevelopmentCounts.com, 404-642-3738, Ruby@DevelopmentCounts.com.

SUPERVISION FOR LICENSURE OFFERED IN CARROLLTON. West Georgia area as well as Marietta. Individual and group, using a developmental model. Experience with diverse populations and affordable rates. Contact **Curt Morrison**, 770-262-6376, cm4698@gmail.com.

CLINICAL SUPERVISION FOR LPC OFFERED IN COLUMBUS, GA AREA. Supervisor is experienced in clinical mental health services. Individual and group using a developmental model. Member of the LPCA Registry of Professional Counselor Supervisors. Contact **Vivian Jones**, LPC, NCC, CCMHC, CPCS, 706-718-7076, rainbowofcare@gmail.com.

INDIVIDUAL AND GROUP SUPERVISION OFFERED IN VALDOSTA, GA, through small group and individual sessions. I practice from a systemic perspective which includes collaborative, postmodern, and narrative therapy approaches. Contact **Dr. A.J. Ramirez**, EdD, LPC, NCC, CPCS, at leaftherapyservices@gmail.com, or 229-834-5986.

CLINICAL SUPERVISION OPENINGS: I offer individual supervision hours and workshops across five disciplines: Professional Counseling, Marriage and Family Therapy, Play Therapy, Supervision, and Addictions Counseling carrying GAMFT, ADACB-GA, GACA, LPCA, APT, and NBCC provider numbers. With 25 years of experience in private practice and school settings, I can promise time for clinical staffing and a variety of effective, experiential, integrative interventions. Join me for an informative approach to counseling, training, and supervision. **Shannon M. Eller**, LPC, LMFT, CPCS, AAMFT-Approved Supervisor, RPT-S, CAADC, CCS, 770-468-7424, shannoneller@brighter-tomorrows.com, www.brighter-tomorrows.com, www.btcinstitute.org.

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HAVE YOU STRUGGLED WITH FINDING A SUPERVISOR WITHIN YOUR AREA? Then HRG Counseling and Supervision Agency is the agency that can provide your supervision needs. Please check out the website for more information: <https://www.hrgcounseling.com>. Feel free to contact **Destiny Huff** who is an LPC and CPCS within the state of Georgia and can provide Supervision via telehealth. Contact **Destiny Huff** via email at destinyhuff@hrgcounseling.com.

HARTWELL, GA. **Katherine Reusing**, PhD, LMFT, LPC, CPCS at Karmft88@hotmail.com. CPCS expiration date 09/30/2020. CPCS number 1611.

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