Spring 2013 Volume 8, Issue 3

SACES NEWSLETTER

ASSOCIATION FOR COUNSELOR AND SUPERVISION

SPECIAL POINTS OF INTEREST: **SACES Interest Network Reports** SACES Standing Committee Reports ACES Conference Information

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OUR FROM PRESIDENT

"Without community, there is no liberation." ~ bell hooks

I include the above bell hooks quote to remind us that as the spring semester nears its end to continue to connect to the communities who support and nurture your resilience! We all know that the spring can be a really busy time, so I especially wanted to take a little time to thank each of you for being a SACES member. I also wanted to thank everyone we interacted with at the ACA conference in Cincinnati! Our SACES membership was in full force at ACA presenting, receiving awards, participating in national service, and engaging in mentoring. Kudos to each of you – we are so proud!

As I am nearing the end of my presidential year, I am also feeling very grateful for a wonderful past year. We have had a wonderful conference on resilience and social change with record numbers of proposals and attendees, revitalized our interest network and committee leadership, redesigned our website, began (and have been rapidly increasing!) our social networking presence, supported student and early career mentoring, met monthly as an Executive Board to do the work of the division, taken good care of



Anneliese Singh **SACES President**

our financial reserves, and begun the groundwork for a successful online SACES journal! Throughout all of these activities over the past year, it has been refreshing to work with an energetic board. Thanks Heather Trepal, Jennifer Jordan, Don Locke, and Amanda LaGuardia – each of them care so very much about our SACES members and inspire me! I have also been impressed with our leaders of our committees and interest networks – many of whom have participated in the past Emerging Leaders program. As you can see, SACES continues to thrive!

For as much as we have accomplished in the past year, there are a few more items on my checklist before I wrap up the SACES pres- SACES President idency.

First, I want to ensure that the foundation for our online SACES journal is complete. Second, I am committed to a strong transition to Heather Trepal's leadership and to supporting her presidential theme and goals in my role as past president. Third, I am laying the groundwork for a woman of color mentoring group that I hope will be a success and continue in future years. Please email me at asingh@uga.edu if you are interested in participating as a mentor or mentee.

As always, It is my goal that you feel that you are not only a valuable member of our division, but that you also feel confident knowing that the SACES leadership places your needs at the forefront of our decisionmaking. Be in touch and have a wonderful upcoming summer!

In the spirit of community and liberation~

Anneliese A. Singh

SACES INTEREST NETWORK REPORTS

SACES College Counseling/ Student Affairs Interest Network Gets Started with Advocacy Project Co-Chairs: Laura M. Gonzalez, & Elizabeth Likis-Werle

This year, the newly formed College Counseling/Student Affairs Interest Network got off the ground and had the opportunity to engage in some advocacy efforts. After sponsoring a round table at the SACES conference in Savannah, the network continued to spread the word to interested parties and create a pathway for communication. In the early spring, the co-chairs became aware of a suggestion from the ACA President to the CACREP revisions committee that the Student Affairs specialty within Counseling departments be let go as part of the new 2016 standards for accreditation. This has sparked a healthy dialogue about the role of trained counselors in providing support services to college students both within the counseling center and in other capacities around campus. Several faculty members who believe that counselors can reach the highest number of students in need by providing direct service in Student Affairs offices have responded formally to the ACA letter. The co-chairs of the SACES interest network have also initiated a grass-roots campaign to collect stories from practitioners on college campuses who work in Student Development or Student Affairs capacities but have counseling backgrounds. We are collecting these narratives about the importance of counseling skills in daily work with college students to help inform CACREP's ultimate decision on the matter. The website where we are collecting these stories is: Counselingstudentdev.weebly.com

If you have an experience you would like to share, we welcome your input! The co-chairs have also submitted an ACES proposal on this same topic, so we hope to see some of you in Denver if we are approved to move forward with the presenta-

tion. Our other goal for the year is to continue to gather contacts of individuals who would like to be a part of the interest network and perhaps share syllabi, resources, and strategies with each other down the road. Please contact us if you are interested in the activities of this interest network!

SACES Ethics and Professional Development Interest Network Co-Chairs: Kim Lee Hughes & Nathanial Brown

The SACES Ethics and Professional Development Interest Network plans to address professional development and ethical issues affecting the LGBTQIQ community on our college and university campuses. We want to encourage professional development that inspires counselors to take action, explore resilience, and serve as social change agents in their everyday practice as educators and supervisors. The Advocacy Competencies endorsed by the ACA Governing Council guides our mission. We intend to use this network to advocate on behalf of LGBTQIQ students at the micro, macro, and mezzo levels. The SACES Ethics and Professional Development Interest Network will develop a campus climate survey for colleges and universities to determine what counselors on college campuses are doing to address LGBTOIO issues. The survey will be brief, yet comprehensive enough to include questions developed around the ACA Code of Ethics, Advocacy Competencies, and Council for the Advancement of Standards in Higher Education.

The SACES Ethics and Professional Development Interest Network will compose an article for the SACES publication and/or ACES journal to report our findings post survey of interested counselors in higher education. The article will address ethical and professional development themes based on the findings. The SACES Ethics and Professional Development Interest Network will share findings from the campus climate survey with SACES

professionals interested in implementing and/or transforming policy on their campuses for LGBTQIQ students, and act as consultants upon request and availability.

SACES Long Range Planning Interest Network Co-Chairs: Sejal Barden & Shannon Ray

The SACES Long Range Planning (LRP) Committee is looking to investigate different ways to offer support and assist with the vision of the organization. During the SACES conference in Savannah. the LRP Committee discussed the following: (1) ways to enhance member services--specifically regarding product delivery such as trainings, CEU's, and new faculty development initiatives; (2) discussion of assisting the Journal Committee to conduct a needs assessment of what members would like to see; (3) spearheading the development of training modules for members-one idea was a training module for the DSM-5. The LRP Committee also discussed ways that it could provide conference support for the 2014 SACES conference to be held in Birmingham, Alabama. The Committee aims to assist the Executive Committee as needed. Other potential conference ideas encompassed: (a) Graduate student mentoring- coffee break during 2014 conference; (b) Gathering emerging leaders contact info for participants and other interested parties; (c) Pairing of emerging leaders and fellows for mentorship opportunities.

We will be holding an informal meeting during the upcoming American Counseling Association Conference in the lobby area of the Hyatt Hotel at 2:00 pm on Friday, March 22nd. If you are an existing member or would like to become a member, please stop by if you can. If you are interested in working with the LRP Committee, or have any questions/comments, contact us anytime at sejal.barden@ucf.edu and shanray@nova.edu.

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Standing Committee Reports

SACES Graduate Student Representative Committee

The graduate student experience represents diversity. SACES graduate students are made up of students from different states, regions, and nations. Within our ranks there is variety in age, class, gender, culture, ethnicity, identity and beliefs. Despite differences, we share a common commitment to counselor education and professional growth. As graduate representatives, we have sought to encourage unity within diversity by creating a supportive community for SACES graduate students.

The first step in creating this community was to create and augment our online presence. The SACES Facebook page was created to provide a friendly environment for SACES graduate student to interact in an informal manner. The Facebook page was launched before the SACES conference in order to establish relationships in anticipation of the conference. Students were chatting about conference details, each other's presentations, and information about the city of Savannah long before the September event. This continued during the conference as pictures and experiences were shared on the Facebook page. Relationships and connections continued to grow after the conference as students shared their personal and educational experiences, counseling resources, and job postings

SACES graduate students also have a Twitter account and a Linkedin account. The Linkedin account is primarily for sharing professional interests, conference information, and career opportunities.

The September SACES conference in Savannah provided multiple opportunities for SACES graduate students to engage, network, and grow professionally. Students enjoyed meeting together for a night on the town at Jazz'd restaurant. Many people met for the first time in person on that night and many friendships were formed. The graduate student committee met on Friday and students shared their ideas, concerns, and issues. The most common feedback from students was that they wanted to feel part of a supportive professional community and they wanted to communicate with each other and the larger SACES community about projects that they are engaged in. The conference also hosted a special CACREP lunch for international students, an Emerging Leaders program, and a Career Connection program that connected students with representatives from universities hiring counselor educators. Many graduate students volunteered and presented at the conference. There were many conference session topics relevant to graduate students on topics such as student internships, supervision, doctoral student stress, distance education, developing a professional identity, how to make the most of your doctorate program, developing leadership and advocacy skills, and post-graduation planning.

In the past eight months, we believe that we have made important strides toward a more connected and supportive graduate community. The combination of a strong online presence and multiple conference activities has been instrumental in developing a sense of community as SACES graduate students connect with each other. We hope that in future graduate students can build on this momentum.

SACES Media Committee

The launching of SACES into the social media world has taken off and progress has been steady. Our most successful presence is on LinkedIn with 220 members! 179 of those members joined us since our media efforts went into full

effect last September. The vision is for our LinkedIn group to be a place for professional discussion – of ideas, dilemmas and content questions. The group is moderated which requires an investment of time but is invaluable for ensuring a relatively safe place to gather with a sense of professionalism.

http://tinyurl.com/cermaoo

Our Facebook page was created as a fun place to connect, share photos and arrange meet-ups, especially in relation to conferences and other CES events. With 51 "Likes", we expect to see an uptick in activity on the page surrounding the upcoming ACA conference.

https://www.facebook.com/SACES2
There is an associated Facebook group just for our graduate students which currently has 74 members and a little more activity than the main page so our grad students are leading the charge.

https://www.facebook.com/groups/ SACESgrad/

Finally, the Twitter feed for SACES regularly puts out headlines and resource links related to teaching and supervising with 36 followers. It also makes a great venue for sharing conference sessions. There is an added level of connection when members watch their Twitter feed while at a conference to see what colleagues are hearing and gleaning from sessions. This represents one of our greatest opportunities for growth as Twitter has become a premier venue for the exchange of ideas.

@SACES2

Only five months into this launch, SACES can be proud of our strong start in the social media world. The key now is participation! Whatever platform you are on – join us, and more importantly, contribute to the conversation. That is what builds community: the exchange of ideas, encouragement and feedback. Share these sites with your colleagues so that we can increase the diversity of those conversations. If you would like to help out with Twitter posts of the latest news in our field, please contact the Media Chair at: andrea dyben@pba.edu

INTEREST NETWORK REPORTS, CONT'D

Technology/Social Interest Network Co-Chairs: KristiAnna Santos & Panos Markopoulos

It's officially Spring and we're hoping everyone is feeling relaxed, rejuvenated, and READY to take on 2013. In October, Panos and I were asked to lead the Technology/Social Networking Interest Network. We had our first official meeting at the SACES Conference in Savannah and were provided valuable information on how to take on social networking and technology! One of the ways we are contributing is by partnering with the SACES Media/Social Networking Committee Chairperson, Andrea Dyben. Andrea has done an outstanding job in the media realm- updating the SACES LinkedIN page, Facebook page, and Twitter feed. We are assisting Andrea in communicating information to SACES members through Twitter. If you are not already following us on Twitter, please start following us @SACES2. Additionally, we're hoping to increase the use of the hashtag #counseloreducation. This might assist in promoting awareness of our field. We are open to any suggestions on how to improve technology and social networking in counselor education. If you are interested in being a part of this interest network, please contact KristiAnna Santos at tianna.santos@gmail.com or Panos Markopoulos at

p_markopoulos@me.com. We welcome your ideas and suggestions!

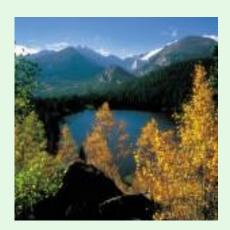
Clinical Mental Health Counseling Interest Network Co-Chairs: Joffrey Suprina & Suzan Thompson

The Clinical Mental Health Counseling SACES Interest Network Co-Chairs, Joffrey Suprina and Suzan Thompson have been operating for 13 months. In that time, they have established a focus of integrating complementary and alternative practices into counseling. They have recruited several new members and had monthly phone conference meetings. The

goal of the committee is to eventually develop guidelines for ethical integration of complementary and alternative practices into counseling education, supervision and practice. They presented "Complimentary and Alternative Medicine (CAM) and Counselor Supervision" at the 2012 SACES conference which was well received. They proposed a learning institute on integration of CAM into counseling for the 2013 ACA conference but were not accepted. They have submitted a proposal to present at the ACES conference. They continue to meet and develop guidelines for infusion of CAM at all levels of counseling. We welcome anyone who has interest in this field to join our efforts by contacting Joffrey Suprina at

jsuprina@argosy.edu.





2013 ACES CONFERENCE

October 17-20, 2013

Denver, Colorado

Hyatt Regency at the Colorado Convention Center





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Advocacy for Lesbian, Gay, Bisexual, and Transgender Youth in School Settings



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Sexual orientation and gender identity often cause concern for the lesbian, gay, bisexual, and transgender (LGBT) youth. According to Kosciw, Greytak, Bartkiewicz, Boesen, & Palmer (2012), more than 80% of LGBT students reported prior school-based harassment, while a majority reported feeling unsafe at school due to their orientation. Currently, LGBT youth face numerous overt (e.g. verbal harassment, bullying, abuse, teasing, name-calling) and covert concerns (e.g. distancing, decreased academic performance, substance abuse), which leads to detrimental short and long-term mental health effects (e.g. psychological problems, depression, suicidal behaviors).

To facilitate a safer school environment, advocating for LGBT youth becomes a necessary component of a school counselor's role. Often times, understanding how to advocate, becomes the first question a counselor may ask. Therefore, the purpose of this newsletter is to identify and discuss components of LGBT advocacy, which can be applied within in the school setting.

In general children in schools are impacted by several different factors (e.g. school policy and resources, faculty, students, school environment). Exploring and understanding which of these factors impact LGBT youth, becomes the first step in advocating. Identifying concerns within each area allows school counselors to collectively understand contributing problems while beginning to work toward school-based and/or systemic change. Furthermore, conducting a needs-based assessment ensures a thorough identification of problematic issues identified by students and staff mem-

bers.

Additionally, actively advocating involves working with various stakeholders (e.g. community members, board members, administrators, school personnel, parents) to ensure that community involvement is included in the process. Due to difficulties associated with keeping balance within stakeholders, numerous counselors found it easier not to advocate. According to Bemak and Chi-Ying Chung (2008), this phenomenon is referred to as "nice counselor syndrome." Refraining from advocating can be further addressed by considering the detrimental impact of "nice counselor syndrome" and seeking assistance to balance the associated relationships.

By understanding how to advocate for LGBT youth, it is our hope that counselors could help and support this community more effectively. Additionally, further information can be found from the Gay, Lesbian & Straight Education Network (GLSEN) at http:// www.glsen.org/cgibin/iowa/all/home/ index.html. In addition, counselors can find useful information, including essential issues that LGBT youth face as well as counselors' competencies when working with LGBT youth through Association for Lesbian, Gay, Bisexual & Transgender Issues in Counseling at http://www.algbtic.org/. These organi-

zations, along with their official web-

sites, could help counselors further

advocate for LGBT youth.

Lastly, familiarization with school and community-based resources and gaystraight alliances (GSAs) helps school counselors provide information and resources to students. Developing supportive relationships within the community helps increase the knowledge, understanding, and awareness for students, parents, school personnel, and community members (Watson, Varjas, Meyers, & Graybill, 2010). Also, forming a GSA alliance or similar club contributes to creating a welcoming school climate; however 47.5% of students reported that their school did not have a GSA (Kosciw, et al, 2012). Forming GSAs or similar support systems further promotes advocacy while beginning to develop and establish a proactive rather

than reactive approach. More information regarding GSA can be found at http://gsanetwork.org/.

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Counselors play important roles in supporting LGBT youth in school settings. Hence, it is essential and necessary for counselors to gain awareness and knowledge to ensure LGBT youth a safer school environment and to promote their well-being in general. By understanding how to advocate for LGBT youth, it is our hope that counselors could help and support this community more effectively.

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Bibliosupervision in the Early Stages of Clinical Supervision

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For counselors-in -training and new professionals entering the field, supervision can play an important role in developing clinical skills and enhancing



professional development. The supervisory relationship provides an environment for this growth to occur (Bernard & Goodyear, 2009). Therefore, the working alliance between supervisors and supervisees must be taken into account (Graham & Pehrsson, 2008). The Grahman Model of Bibliosupervision is a creative intervention that can enhance the supervisory working alliance (Graham & Pehrsson, 2008). Bibliosupervision is the use of bibliotherapy in supervision sessions. By incorporating the use of books, storytelling, and narratives, supervisees can identify and analyze themes that are important to their clinical and professional development (Graham & Pehrsson, 2008). Bibliosupervision takes into account the developmental level of the supervisees as described by the Integrated Developmental Model. The IDM is a supervision model that assesses the professional growth of supervises by examining their awareness, motivation, and autonomy through four stages (Bernard & Goodyear, 2009). Supervisees in the level 1 stage of IDM tend to have limited counseling experience with high motivation and anxiety. In addition, these supervisees need structure, have limited self -awareness, and are worried about evaluation. Bibliosupervision is a creative intervention that can address the needs of supervisees in the level 1 stage of IDM.

In the Graham Model of Bibliosupervision, fictional children's literature is used to support the development of the supervisees (Graham & Pehrsson, 2008). Supervisors choose literature that speaks to current issued faced by the supervisee. The literature can be read to supervisees in session, or the supervisees can read it on their own before or during the session. The story or characters in the literature are then used to facilitate a discussion with the supervisees. Through guided questions in the session, supervisees are asked to identify the plot/importance of the story, thoughts/feelings of the characters, themes or patterns in the story, any take away points, and how the story is relevant to their counseling work (Graham & Pehrsson, 2009). For instance, a supervisee states she "feels lost" and does not have confidence in her work as a counselor. In her next supervision session, the supervisor brings the book Stellaluna (Cannon, 1993). The book is about Stellaluna, a fruit bat, which loses her mother and does not feel connected to her new environment. In the end. Stellaluna finds her away and is able to help others who are in need. After reading the book, the supervisor facilitates a discussion on the themes/patterns in the story. The supervisor ends the session by asking the supervisee to identify take away points relating to her work as a counselor. Bibliosupervision provides a safe environment for supervisees in the level 1 stage to address challenges. At first, the focus in supervision is not directly on the supervisees but on the characters or situation in the story (Graham & Pehrsson, 2009). The supervisees then work with their supervisors to "empathize with characters and discuss the emergent emotions,

cognitions, concerns, and related issues" (Graham & Pehrsson, 2008, p. 430). Through this supervisory relationship, Graham and Pehrsson (2008) discussed how "trust emerges, defenses are reduced, and growth is enhanced" (p. 431). This process addresses many of the needs experienced by level 1 supervisees in terms of their awareness, motivation, and autonomy. By externalizing some of their challenges through the literature presented, these supervisees are able to focus on skill acquisition, have a structure environment, receive feedback with indirect confrontation, and develop self-other awareness. Graham and Pehrsson (2009) identified a list of books with counselor education themes, including Lost in the Woods (Sam & Stoick, 2004), Sneetches (Seuss, 2000), and The Giving Tree (Silverstein, 1964).

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A Mindfulness Approach to Addressing Multiculturalism in Supervision

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Counseling supervisors have an ethical responsibility to address diversity and multiculturalism within the context of supervision (ACA, 2006). Whether or not a supervisor is active in discussing and addressing multicultural factors in supervision can significantly impact the supervisory relationship and supervisee training. For example, failure to address multicultural issues may result in negative experiences on the part of the supervisee, including self-doubt, powerlessness, and anxiety, all of which can affect overall learning (Jernigan et al., 2010; Wong, Wong, & Ishiyama, 2013). On the other hand, supervisees report higher levels of satisfaction with supervision and a stronger working alliance when multicultural issues are addressed (Inman, 2006). One way in which the supervisor may work to create a safe and supportive supervision environment in which difficult multicultural dialogues can occur, is through the utilization of a mindfulnessbased perspective. The purpose of this article is to provide a basic framework for the use of a mindfulness perspective in supervision, with the hopes that it will foster an environment where diversity variables can be safely discussed, and ultimately promote multicultural awareness and competence within the supervisory relationship.

Mindfulness is "the awareness that emerges through paying attention on purpose, in the present moment, and nonjudgementally to the unfolding of experience moment by moment (Kabat-Zinn, 1990)." Previously, mindfulness-based intervention research has focused primarily on treatment outcomes of psychological disorders and the working alliance between counselor and client. Given the significant findings demonstrating the efficacy of these interventions in psychotherapy relationships, several studies are beginning to examine the impact of utilizing mindfulness-based interventions in counselor training and supervision. For example, Daniels & Larson (2011) and Wyatt (2012) found that incorporating mindfulness-based practices in supervision often results in stronger working alliances and an increase in supervisee self-efficacy. Further, infusion of mindfulness-based practices in supervision has been associated with increased levels of

supervisee attention and empathy (Greason & Cashwell, 2009). In addition, there is a growing body of research suggesting that the use of mindfulnessbased training is positively associated with improved psychological flexibility, self-regulation of behavior, and subjective well-being, as well as reduced emotional reactivity (Keng, Smoski, & Robbins, 2011). All of these may serve both supervisor and supervisee well in fostering a safe and supportive supervision environment in which difficult multicultural dialogues can occur. Therefore, mindfulness-based practices may be helpful in promoting multicultural competency within the supervisory relation-

How can mindfulness be utilized in the supervisory relationship to promote multicultural awareness? When the supervisor wants to cultivate difficult dialogue about diversity issues in the supervisory or therapy relationship, Young (1998) suggests the following systematic approach of combining mindful listening to self with mindful listening with others:

Sit comfortably. Supervisees put all materials away and can choose to close their eyes or look at the floor while maintaining a relaxed position or posture.

Noticing. As the supervisor, ask your supervisee to notice their thoughts and feelings which include physical sensations in their body and any emotions they may be experiencing in the present moment.

Breathing. Allow 2-5 minutes where the supervisee is engaged in noticing their breathing. Instruct them to pay attention to how the air enters their body and where the air collects such as in the chest or belly. Focusing. Have the supervisee focus their attention on a difficult question related to diversity in general or inherent in the supervisory relationship. Instruct the supervisee to watch their thoughts show up as if they were watching a movie without getting immersed in the experience.

Waiting. Remind the supervisee to hold the question in the present moment and not analyze or search for an answer. This will allow thoughts to emerge naturally and without judgment.

Emotional inquiry. Pose the following questions, if appropriate, to the supervisee: What is going on here? Why am I so angry (or defensive)? Why did I feel so uncom-

fortable?

Cognitive inquiry. Again, pose the following questions, if appropriate, to the supervisee: What troubles me about this topic? What do I know about this topic? What more do I need to know to understand this issue?

Writing. Instruct the supervisee to write down anything they noticed and to describe, in detail, their experience. Discussion. The supervisor and supervisee can now engage in a collaborative discussion to understand what each other was experiencing during this exercise.

It is essential to consider the influence of issues of multiculturalism and diversity within the supervisory relationship and teach supervisees to incorporate multiculturalism in client sessions (Ancis & Marshall, 2010). However, in order to do so effectively, it is imperative that supervisors incorporate interventions and strategies that cultivate a safe and supportive supervision environment in which diversity issues can be addressed. In doing so, the supervisory alliance can be strengthened and cultural differences affirmed.

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STUDENT VIEWS

Lynn Bohecker Idaho State

After reading
Promoting
Systemic
Change
Through the
ACA Advocacy
Competencies
(Toporek, Lew-



is, & Crethar, 2009), I was brought back to the days of my internship at a rape crisis center many years before this article was published. One day I received a call and a tiny voice on the end said "Can you help me?" A young woman, about 22, was calling from the basement of a home where she was hiding. Mwanza (pseudonym) was undocumented and here in the US originally from Nigeria.

At Mwanza's birth, her father promised her in marriage to the local tribal chief in return for a higher political/military position in the community. After Mwanza graduated from the University, her father made an appointment and drove her to the home of the chief so she could meet him. Her father dropped her off and waited in the car. The chief was 40 years her senior and already had three wives. Mwanza told the chief she did not want to marry him. The chief took her into his bedroom, tied her to the bed and repeatedly raped her.

When he was done, he told her she could go. When Mwanza got back into the car and told her father what had happened, he said the chief had a right to her because he was her future husband and to get used to it. It is also the custom in her community that girls get circumcised, also known as female genital mutilation, before marriage.

Mwanza became depressed and at

tempted to end her life. Her mother was supportive but powerless to change the system. Her mother gave her money and arranged for a coyote to take her out of the country. Mwanza eventually found her mother's brother in the US who reluctantly took her in and hid her. Mwanza's uncle knew that Mwanza's life, as well as anyone helping her ,was in jeopardy as that is the understood consequence for defying her father. Mwanza's uncle explained that the Nigerian community in the US is an extension of Nigeria. Because of her father's political and military position, Nigerian-Americans would report Mwanza's location to her father.

Mwanza came in for counseling. My agency supervisor told me to see her for 6 sessions which was the agency policy for any crisis client coming in after a sexual assault. She felt helpless, hopeless and wanted to die. She could not see a way to ever be safe or to have a normal life. I wanted to advocate on behalf of my client for any resources that might be able to help her. My agency supervisor told me that doing anything but counseling for 6 sessions is a violation of agency policy and grounds for termination. My clinical supervisor, contracted by the agency, told me I was too attached to my client and doing anything in a counseling session beyond encouraging and empowering the client to help herself was a boundary and ethical violation.

I did it anyway. I covertly researched, went through many organizations and legal firms and eventually found an attorney who would work pro bono to see what options there might be for Mwanza to obtain legal status in the US. I continued to counsel Mwanza, at the agency for a few more sessions and then at other locations, to support her through many grueling interviews and examinations. The work culminated over a year

later with me accompanying Mwanza and the attorney to a US immigration hearing where Mwanza was eventually granted political asylum.

I have carried my advocacy for Mwanza as a secret. I thought I had gone too far, done something wrong to advocate on behalf of my client. Yet, through reading the Toporek, et al. (2009) article, I saw that what I had done is now mandated by the American Counseling Association.

While it is encouraging that counselors are now expected to advocate for their clients, the potential for blurred ethical boundaries between advocacy and the creation of client dependence remains an issue. Thus it is incumbent upon counselors and their supervisors to carefully examine each situation and context to insure the ethical practice of advocacy.

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Older people and alcohol: The hidden epidemic.

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Alcoholism among older individuals is underestimated, under-identified, under-

diagnosed, and under-

treated (Stelle & Scott, 2007). Reasons include that its symptoms are similar to dementia and depression (Nemes, Rao, Zeiler, Munly, Holtz, & Hoffman, 2004) and simultaneous use or abuse of medications and other substances creates diagnostic challenges (Bauman, 2008). It has been estimated that almost half (49%) of adults from ages 60 - 64 drank within the last month (Bauman, 2008) and 35% of those over 65 drank within the past month (McPhillips, 2002). One-third of older adults over 65 drink alcohol, 10% abuse it (Boyle & Davis, 2006), and 10 to 15% met the criteria for problem drinking (Bauman, 2008).

Signs of Substance Use

Psychological signs included confusion, anxiety, and social withdrawal. Verbal signs included defensiveness, slurred speech, and expressions of loneliness (Watts, 2007). Physical signs included sexual dysfunction, incontinence, malnutrition (Stoddard & Thompson, 1996), impaired coordination, poor hygiene, fatigue, hypertension, abusiveness (Watts, 2007), skin trauma, insomnia, and gastroenterological problems (Boyle & Davis, 2006). Boyle and Davis (2006) also noted that falls result in broken bones, are a contributor to serious health/mobility problems and found a correlation between falls and alcohol use. Financial difficulties (Moos, Brennan, & Moos, 1991) retirement, and physical health problems (almost twice as likely when people started drinking after age 60) (Findlayson, Hurt, Davis, & Morse, 1988) are risk factors leading to signs of alcohol abuse.

Treatment

A counselor who does not address substance use issues may cause increased denial and enabling (Stevens & Smith, 2009). The topic of substance use may be avoided due to the topic being uncomfortable, embarrassing, or private (Sorocco & Ferrell, 2006), cultural differences between the counselor and client (Snyder & Anderson, 2009), and caregivers having limited knowledge about the aging process. The Center for Substance Abuse Treatment (Blow, 1998) recommended that everyone over 60 be screened for alcohol and prescription drug abuse as part of regular health care services and when physical or mental health symptoms, life transitions, or changes occur. Conigliaro, Kraemer, and McNeil (2000) suggest the introduction of alcohol-related questions and requesting accurate answers. A description of the types of alcoholic beverages typically consumed by

older persons should be given because older people may not consider drinking to reduce physical pain as potentially problematic. Counselors are advised to inquire about "medicinal use" of alcohol. Pertinent questions could disclose alcohol use which might otherwise be undetected. Airaa, Hartikainenc, and Sulkava's (2008) found that older individuals responded affirmatively to a direct question about alcohol consumption for "medicinal purposes." Mersey (2003) also noted that questions must be asked at the individual's cognitive level of functioning to obtain reliable responses. Blow and Barry (2002) recommend brief alcohol interventions to empower the client to choose between drinking in moderation or abstinence. However, if interventions are unsuccessful, formal treatment must be addressed. Educating clients about alcoholism's signs and symptoms are important goals. Honest assessments and direct feedback about the individual's strengths and motivation to change needs to occur. A contract with measurable goals can be mutually determined to empower clients to engage in behavior modification strategies, bereavement support groups, effective pain management, and journaling alcohol intake with reasons for using. Abstinence is the goal for those with severe problems and some individuals may benefit from 12-step program attendance (McPhillips, 2002). Collaborating with other providers, particularly physicians can lead to medically-focused substance use/abuse assessments. Physicians can test for a number of physiological issues including elevated liver enzymes and loss of body mass.

Family Considerations

Family members should inquire if physicians of their older family members are conducting screenings for alcohol/drug use. Alcohol consumption for medicinal purposes was equally common in males and females, but older women found it easier to discuss their alcohol consumption. Banta and Montgomery (2007) found that screenings led to more substance use disorder diagnoses, which occurred more often among first-time patients. Screenings should be conducted if abuse is suspected so that appropriate referrals can be made. If information is requested by a relative or friend, counselors should advocate they expand on the concerns they have about the older person. It is important to explain that receiving information is not guaranteed. Research indicates that older people abuse alcohol and is unnoticed and undiagnosed. The older population continues to grow and clinicians must be prepared to address geriatric needs and issues with older persons, their relatives and their health care

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Message from the SACES Newsletter Editors

Are you trying to find a way to get more involved in SACES? What about mentoring a student by helping them to get published? Think about submitting an article for the SACES newsletter. We would love your involvement!

Here are some simple tips to help you create an article for our newsletter:

- It needs to be focused on topics related to counselor education and supervision or an editorial.
- You can share information about endorsed SACES, state ACES and ACA activities.
- 3. If you are a student, have one of your faculty members review your work prior to submitting.
- 4. Take a look at previous editions of the newsletter located at the SACES website to get a feel for the writing style.
- 5. Keep it at around 500 words.
- 6. Attach a picture of you.

Thank you for supporting the SACES newsletter.

Email submissions should be sent to

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