SOUTHERN ASSOCIATION OF COUNSELOR EDUCATION AND SUPERVISION

FROM THE PRESIDENT

Dear SACES Members,

The holiday season is nearly upon us, and I suspect many of us will be taking some time out to renew, refresh, and reflect on the year. Many SACES members have been deeply impacted by Hurricanes Harvey, Irma, and Maria, perhaps engaged in their own recovery efforts,

**Dr. Casey Barrio Minton
2017-2018**

supporting family members, or facilitating efforts to support their local communities. We see you and hope you feel the support of our professional community as you navigate this long recovery. Please let us know how we can help.

As always, I deeply appreciated the SACES community as I navigated the most recent ACES conference. Thank you and congratulations to all SACES members who engaged in conference planning, were recognized as ACES Emerging Leaders, and presented during the conference. I'd also like to extend special congratulations to SACES 2017 Awards and Research Grant recipients. Welcome and congratulations to our new Executive Council Members, Dr. Elizabeth Villares (President-Elect-Elect) and Dr. Janelle Bettis (Secretary-Elect). I am humbled at the talent and commitment of our SACES leaders and members.

Clearly, our year is in full swing. Our committees are fully staffed and active, and many Interest Networks are working to enhance member services and structure. If you missed our general call for Interest Network membership earlier this fall, it's not too late to join! Simply navigate to our Interest Network webpage and contact the IN chair(s) to request to join. Interest Networks are an excellent way to get involved in the SACES community.

www.saces.org

President's Message Continued:

Our leadership team is transitioning out of our "Getting Ready to Get Ready" stage of SACES 2018 Conference planning into full conference planning. Make sure you've marked your calendars to be in Myrtle Beach October 11-13, 2018. Dr. Natoya Haskins (President-Elect) has been hard at work building a board of leaders who will plan our conference. Our leadership team has also entered into contract with a vendor who will offer integrated conference programming, registration, and continuing education experience for our members. This system is rolling out now, and conference proposals are due February 15, 2018. Visit our Conference 2018 webpage for more details. We will use this unified portal for conference proposals, proposal review, scheduling, and registration.

I am honored to serve you in this role. I hope you will be in touch with ideas and suggestions that may help us to better serve you (cbarrio@utk.edu).

Casey Barrio Minton
SACES President, 2017-2018

Visit **www.saces.org/Conference-2018** for more information

SACES 2018 Conference Call for Proposals

The SACES Executive Committee is pleased to announce the call for proposals for the SACES 2018 Conference, October 11-13, in Myrtle Beach, SC. We invite proposals for the conference that address all areas of counseling, counselor education, and supervision. Submissions must be received by February 15, 2018 by 5 pm ET.

Pre-conference sessions and the Emerging Leaders Workshop will occur on Thursday (10/11), with a welcoming reception Thursday evening. The conference educational sessions will run on Friday (10/12) and Saturday (10/13) from 8 am to 5pm.

The conference hotel is the Hilton Myrtle Beach, located at 10000 Beach Club Dr., Myrtle Beach, SC 29572. Information about the conference, travel, and area attractions is available on the 2018 SACES Conference website.

2017 – 2018 SACES LEADERSHIP

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	Noelle St. Germain-Sehr	Argosy University - Dallas

Are you interested in reviewing proposals for the SACES 2018 Conference? If so, you can sign-up as a reviewer by clicking the link to the submission portal and completing the application.
All conference proposals undergo a double-blind review. Each reviewer must be available to evaluate submissions between March 1 and March 15, 2018 and be willing to complete at least 20 proposals. If you have any questions, please contact the Conference Program Chair, Dr. Elizabeth Villares at sacesconference2018@gmail.com

Understanding and Improving Societal Views Toward Disabilities

By Daniel Balva

The Centers for Disease Control and Prevention (2015) reported that more than 53 million adults living in the United States have a disability. In fact, the United States Department of Labor (2017) stated that persons with disabilities form the largest minority in the country, yet persons with disabilities have been marginalized and mistreated for centuries. Our responsibility as professional counselors is to ensure the highest level of care to our clients, and as such, it is vital that we aim to increase our counseling competencies by learning more about persons with disabilities.

Origins of Disability Perceptions and the Disability Rights Movement

Societal views across the globe have often been influenced by the teachings of religious practices and community leaders, and as research has shown, such teachings frequently attached negative stigmas to disabilities. Although we have come a long way since the origin of these views, numerous cultures and countries around the world continue to perceive disabilities as frightening, shameful, and even harmful. For this reason, counselors must be cognizant that persons with disabilities continue to be marginalized in many places across the globe.

It is important to recognize that the Disability Rights Movement, which encouraged disability rights advocacy and equality for persons with disabilities took place within the past few decades, making the focus on disability rights quite recent. Moreover, it wasn't until 1990 that the United States approved the passage of the Americans with Disabilities Act, prohibiting the discrimination of persons with disabilities within the realm of employment, education, transportation, and both public and private entities available to members of the public. Such legislative advancements have been vital in providing accessibility and equality to a population that has been underserved for too long. However, just because our country and others have enacted laws and regulations to provide necessary accessibility accommodations for persons with disabilities, it does not mean that we as a society have made the necessary changes in attitudes, views, and treatment towards such individuals.

Daniel Balva MS, CRC, NCC

Views and Beliefs Towards Disabilities and the Importance of Positive Interactions

Aiden and McCarthey (2014) highlighted a poll administered by Opinium Research to people in the United Kingdom regarding persons with disabilities. Results showed that almost forty percent of those surveyed believed that people with disabilities are less productive than those without disabilities. The other eighty percent surveyed were under the impression that individuals with disabilities are in constant need of care and help from others (Aiden & McCarthey, 2014). In trying to understand the reason as to why so many people in the poll had such negative views of persons with disabilities, Aiden and McCarthey (2014) speculated that it is because forty-three percent of the individuals polled said that they do not know anyone with a disability.

Aiden and McCarthy (2014) also found that two thirds (67%) of the public in Britain felt uncomfortable conversing with persons with disabilities. Often times, this has to do with the fact that individuals do not know how to act or what to say to persons with disabilities. First and foremost, it is important to note that each disability is different and that in-group differences most certainly exist. Like working with clients belonging to any other specific population, we must meet them

where they are and not assume that every client with a disability shares the same worldview, presenting problems, and perceptions towards disabilities.

Numerous articles have been written with specific etiquette-based recommendations of what to do and what not to do when interacting with persons with disabilities. Basic guidelines, as provided by Disability Rights Montana (2012) include treating persons with disabilities just as you would treat any other individual, communicating directly with the individual—not with anyone else who may be accompanying the individual, and asking before offering assistance if you believe the individual might need help (without assuming that this is the case). Above all, "Don't put unnecessary pressure on yourself to know and do everything 'right.' Be patient with yourself in learning the specific needs of each person" (Disability Rights Montana, 2012, p. 2).

Remember that our clients are the experts of themselves. Utilize their expertise and learn from them—just as we would do with any other client. Through continuous contact, we can change societal attitudes towards persons with disabilities. In fact, Patrick (1987) stated that "interactions within a meaningful context" are fundamental in forming positive attitudes towards persons with disabilities (p. 317). Anthony (1969), Hamilton and Anderson (1983), and Yuker et al. (1966) also described how firsthand exchanges in informal settings lead to a greater level of acceptance towards disabilities. Cameron and Rutland (2006) found the same to be true for improving attitudes held by children regarding disabilities. This is why we, as counselors must work to help promote positive conversations and interactions between individuals with and without disabilities. Doing so will allow us to break through the glass ceiling of misconceptions held by persons without disabilities.

Conclusion
The fight for persons with disabilities to achieve equality has been slow, to say the least, but fortunately, in recent years, measures have been taken to provide a greater level of accessibility and equality than in prior years. However, as so many leaders from the Disability Right's Movement have said, and as research has shown, the greatest barriers for persons with disabilities are attitudes and misperceptions held by individuals without disabilities (Sedghi, 2010). It is vital that we, as counselors, strive to better understand the past and present marginalization of persons with disabilities, while advocating for our clients and the disability community as a whole. It is in this capacity that we can work towards improving societal attitudes towards disabilities.

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SACES Ethics and Professional Development Interest Network

Join the SACES Ethics and Professional Development Interest Network!

*The **SACES Ethics and Professional Development Interest Network (EPD IN)** responds to the call to action by developing presentations and publications that will educate the counseling profession and larger community on ethical practice and professional development to improve practice, supervision, and education in the counseling profession. The network supports initial presentation and publication activities of SACES members, especially student members and new professionals who serve and represent marginalized communities. The Advocacy Competencies endorsed by the ACA Governing Council guides our mission.*

2018 EPD IN Objectives:

- Utilize the Ethics and Professional Development Facebook Group to engage individuals interested in the network. The page will be used to share ideas and resources related to Ethics and Professional Development.
- A community service project that can be executed at the 2018 SACES conference.
- Network and encourage EPD IN members to provide ethics and professional development presentations, publications, and service activities in preparation for the upcoming conference. Contact the Chairman Nathaniel O. Brown natebrow@uga.edu or 770-873-5971 at The University of Georgia for more information and to sign-up!

International Students and Faculty Interest Network

Welcome to ISFIN! The International Students and Faculty Interest Network. The function of the group is to help ACES serve our international members and provide a culturally appropriate plan embracing the richness and strength of our international faculty and student members while supporting them in their professional careers.

ISFIN is a designated and supportive space within ACES for the international students and faculty in the U.S. who are interested in sharing their knowledge and experiences, collaboration, and helping each other to navigate the barriers away from their homeland as well as help them navigate the culture of counselor education and supervision and the higher education system in the U.S.

We have developed several channels of the ISFIN as a platform to foster communication and provide support to our members. Channels of ISFIN include a *confidential listserv* and a *mentorship program* for ACES members. We are looking forward to having more ACES members to join us. ***All members are welcome! You do not have to be international student or faculty to join.*** The ISFIN Listserv is a designated and supportive space for international students and faculty in the U.S. who are interested in helping each other navigate the barriers away from their homeland as well as help them navigate the culture of CES and higher education system in the U.S. Non-international students and faculty are welcome as long as they support and respect the intention of the listserv. ISIFIN should not be used to conduct research. To join the ISFIN Listserv, please send your full name & email address to the LISTSERV@LISTSERV.KENT.EDU and indicate that you want to join ACESISFIN listserv.

The purpose of the ISIFIN mentorship program is to create a safe space for mentees to share their unique issues/concerns and to provide an opportunity for mentees to seek support and guidance**.**

Future Mentees: If you are an international student or a junior faculty and looking for a mentor from a senior international student or faculty, please take a moment to fill out the mentee survey.

Future Mentors: We have already had several international students and junior faculty sign up for our mentoring program, and we need your help to support them! If you are currently an ACES member and would be willing to share a bit of your time to support our international students and/or international junior faculty, please take a moment to fill out the same mentor survey.

Also, please feel free to advocate for this valuable mentoring program to other faculty and international counselor education students who are ACES members. If you have any questions or concerns, please contact us at ACES ISFIN Facilitators isfinfacilitators@gmail.com.

You are very welcome to reach out to the regional facilitators (Mijin Chung, Ph.D and Yi-Wen Su, M.A.) to find out more information regarding ISFIN! We are looking forward to having you!

Mijin Chung, Ph.D., LPC, CPCS mijinni@gmail.com; Yi-Wen Su, Doctoral Candidate at University of Florida, ACES Graduate Student Representative, 2016-17. sv7yasu@ufl.edu

Preparing Counselors for Integration of Religion and Spirituality into Counseling Practice
By Connie Elkins

Integrating Religion and Spirituality (R/S) into counseling has not always been embraced by the counselor education community, but, over time, it has become understood that a more holistic approach to treatment includes an understanding and respect for individual belief systems. Spiritual and religious practices often provide clients with a sense of meaning and purpose, particularly during times of crises or trauma. Consideration of individual religious and spiritual needs in the counseling process can positively affect a client's sense of well-being, and counselors are encouraged to facilitate wellness as opposed to focusing solely on illness (Flasch, 2016).

It is important to remember that religious and spiritual perspectives are part of client diversity and should be addressed and not ignored. Reasons for incorporating Religion and Spirituality into the therapeutic process include:
- Many clients are likely to hold religious or spiritual commitments
- Clients sometimes experience moderate or greater distress related to religious or spiritual concerns
- Clients may want to discuss these topics as part of treatment.

Helping clients work through religious or spiritual problems that may be exacerbating other presenting concerns provide clients with the necessary support needed for positive outcomes (Post, Cornish, Wade, & Tucker, 2013).

Adams, Puig, Baggs, and Wolf (2015) identified barriers to integrating R/S into counselor education, falling into two main categories: 1). Lack of information (educators may not be knowledgeable about R/S topics, the role of religion and spirituality in clients' lives, or how to best educate counselors-in-training); and 2). Lack of personal interest or relevance (faculty may lack

interest in religion and spirituality or may view R/S as simply part of the overarching cultural issue).

Counselor educators and supervisors are responsible for addressing the integration of R/S into training and

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practice. Counselors are expected to attempt an understanding of the diverse cultural backgrounds of their clients along with exploration of their own cultural identities and how these affect the counseling process (American Counseling Association, 2014). Counseling educators are required to "actively infuse multicultural/diversity competency in their training and supervision practices. They actively train students to gain awareness, knowledge, and skills in the competencies of multicultural practice" (American Counseling Association, 2014, 15). What has been perceived as a potentially taboo subject is now part of counseling professional standards and ethical codes.

In preparing counselors for R/S integration Shaw, Bayne, and Lorelle (2012) recommend a Constructivist perspective in classroom practice, with principles of "rejecting universal truths, becoming aware of power within social discourse, and embracing difference and plurality" (272). Putting these principles into practice includes: avoiding rigid labels; emphasizing multiple perceptions; embracing differences; embracing reflexivity (i.e. holding own views open to critique); and discussion of ideas instead of right answers (Shaw, Bayne, Lorelle, 2012).

In recognizing the need to promote inquiry into R/S domains the Association for Spiritual, Ethical, and Religious Values in Counseling (ASERVIC) developed a list of competencies for training counselors to work effectively with clients who express R/S concerns (Adams et al 2014). The 14 outlined Competencies are categorized by: Culture and Worldview; Counselor Self-Awareness; Human and Spiritual Development; Communication; Assessment; and Diagnosis and Treatment. The American Counseling Association (ACA) recognizes these competencies as consistent with ACA Code of Ethics when these competencies are used in conjunction with evidence-based approaches that align with best practices in counseling (American Counseling Association, 2005).

Cashwell and Young (2011) suggest a repertoire of skills for counselors with clients' religious, spiritual, and cultural differences. These skills, considered minimal benchmarks for counselor competency, include:

1. Willingness to engage in self exploration and to confront whatever personal history or unresolved issue may arise that has the potential to interfere with effectiveness or put a counselor at risk for incompetent practice;
2. Acquiring basic information about world religions and spiritual perspectives and continually add to this knowledge;
3. Developing the skills of broaching to initiate frank conversations with clients;
4. Being open to multiple perspectives, especially when clients' religious or spiritual expression directly contradicts their own; and
5. Demonstrating the ability to tailor both secular and spiritually based interventions to serve clients' welfare and growth.

When clients express a need or desire to incorporate their faith and belief systems into the therapeutic process the integration of Religion and Spirituality can be beneficial- if delivered with both confidence and competence. Cultivating skilled counselors through proficient and enthusiastic guidance has the potential to positively impact counselor effectiveness and client growth. It is the responsibility of counselor educators to begin that cultivation.

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Graduate Student Committee

Hello All!

SACES 2017-2018 Graduate Student Committee is continuing to move throughout the year as productive as possible to meet the needs of student members in SACES. During the most recent ACES conference in Chicago, IL the SACES Graduate Student Committee, along with other regional ACES graduate divisions hosted a graduate student lounge. Our student lounge was focused on the theme of research. Graduate students within our region and other regions throughout the country engaged in discussions regarding research—discussing concerns and successes and our experiences with conducting research at various stages of our development as graduate students. One of our goals of the lounge was to connect graduate students with similar research interests to help them collaborate on research projects. As a result, we collected contact information for students and plan to help facilitate research partnerships among these students.

In addition, we sought to learn more about student research needs. Students voiced needs related to establishing and maintaining research mentoring relationships with faculty, receiving more guidance throughout the research process, and learning more about grant writing and funding opportunities for graduate student researchers. During the second hour of our lounge, we were grateful to have Korcuska and LaGuardia from the journal of *Counselor Education and Supervision* present to answer questions related to graduate student publication, moving from dissertation to publication, and positioning ourselves for careers in academia. Overall, we hope our SACES lounge

Janelle Bettis, Ed. D. (Left)
Argosy University, North Virginia

Missy Butts, Doctoral Student (Right)
University of North Carolina at Charlotte

provided graduate students with a meaningful experience and demystified the research process. As we continue to move forward through the year, we are continuing to create a SACES Graduate Student ListSERV to use as an outlet to connect graduate students within the southern region and to disseminate information about opportunities for involvement within the organization. Please email Janellebettis@gmail.com or cbutts4@uncc.edu to be added.

In addition, our graduate student survey will be embedded in the SACES website and will provide graduate students the opportunity to voice their needs and concerns as student members of the organization. Be looking for an announcement in the coming weeks! Lastly, we hope to use the results from the survey to plan a webinar during Spring 2018 that addresses graduate students' topics of interest.

Missy and Janelle

Using Mindfulness Practices to Bracket Personal Values

By Lauren McLean, Ph.D., LPC

According to the American Counseling Association (ACA) Code of Ethics, "counselors are to be aware of – and avoid imposing – their own values, attitudes, beliefs, and behaviors" on clients as well as to "seek training in areas in which they are at risk of imposing their values onto clients, especially when the counselor's values are inconsistent with the client's goals or are discriminatory in nature" (ACA, 2014, p. 5). As counselors, we are expected to set aside our personal beliefs and values when working with a diverse range of clients in order to avoid those values interfering with the counseling process. This technique is known as bracketing (Corey, Schneider-Cory, Corey, & Callanan, 2015). If counselors fail to bracket their values it can lead to potentially harmful and unethical consequences for the clients including value imposition, discrimination, and damage to the therapeutic relationship (Corey, et al., 2015). However, many burgeoning counselors, and even experts in the field, can struggle with successfully accomplishing bracketing when they encounter clients whose values differ vastly from their own. The difficulty with bracketing may occur because values are the beliefs and attitudes that provide us with direction in our everyday lives (Corey, et al., 2015). Values are at the spiritual core of who we are and to value is to be human (Myers & Sweeney, 2005). Therefore, it should come as no surprise that when a client enters our counseling room who challenges our values, either directly or indirectly, we may experience a strong emotional reaction to that challenge. It is incumbent upon counselors to remain ethical and therapeutic during those times and mindfulness may assist with continuing to practice within ethical guidelines.

Mindfulness Principles

Researchers in the field have discussed the benefits of mindfulness practices for a variety of issues including depression, anxiety, addiction, PTSD, and stress (Grecucci, Pappaiani, Siugzdaite, Theuninck, & Job, 2015; Kelly & Garland, 2016; Ramasubramanian, 2017; Strauss, Luke, Hayward,

& Jones, 2014). There are many ways to be mindful but the basic core principles are centered around not changing the person, but rather, to help the person become aware of the present moment, no matter what is happening, and no matter what thought or emotion is coming up for them. The key goal of mindfulness

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is to simply notice the thoughts, bodily sensations, and emotions without judgment (Shapiro & Carlson, 2017). In addition, it is to be aware that the thoughts, emotions, and sensations are there and, instead of struggling to get away from the experience, the person practices being able to be with the experience. We regularly use mindfulness techniques with our clients but in the business of taking care of others we may not be using mindfulness to also benefit ourselves.

Using Mindfulness to Bracket

Mindfulness techniques are varied and, as humans, our thoughts are many. While in a counseling session with a client a counselor may become aware of an overpowering thought or emotion associated with the client's beliefs. The goal is for that counselor to simply take note of the thought and emotion and let it pass. Some individuals who practice mindfulness like to simply label these thoughts and emotions as "thinking (I am having a thought)" or "feeling (I am having a feeling)" and then release them. Some like to use visualizations of watching their thoughts float downstream on a river, float away on a cloud, exit through a door, or exit stage left. Once a counselor has released a thought or emotion the counselor will merely bring themselves back to the present moment by focusing on their breath, the client's words and body language, or the sensations of the room.

Mindfulness is not about getting rid of thoughts and emotions completely. Mindfulness is about solely becoming aware of them. Once the counseling session is over a counselor can return to those thoughts and emotions, if they choose, in order to continue to reflect on them. Through practice, mindfulness can teach a counselor to set thoughts, emotions, and sensations aside in order to attend to them later rather than becoming distracted by them during a session. When a counselor returns to those value reactions at a later time they can potentially decide the best course of action to take with a clearer mind, whether that is reflection through journaling, consultation with a colleague or supervisor, or continuing education.

Conclusion

The practice of mindfulness can take time and patience to master; however, a counselor may find that this practice benefits both professional and personal wellbeing. Utilizing mindfulness techniques while in counseling sessions with clients can lead to a better focus on the here and now as well as confidence in being able to bracket values so as not to interfere with the counseling session and infringe on the ethical standards of our profession.

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The Use of Deliberate Practice in Group Supervision

By Camelia Shaheed & Sheri Bauman

The specialty of supervision practice and education has gained increasing consideration as more theoretical and empirical research has focused on supervisor competencies and evidence-based practices (Watkins, 2012). Supervision's fundamental role in continuous professional development, and how it cascades into positive client outcomes, and agency vision and function can be easily observed in counseling as well as other professions (Chow, Miller, Seidel, Kane, Thornton, & Andrews, 2015). Yet, the counseling profession has not systematically analyzed two different, but complimentary, aspects of supervision: (a) the *development* of superior supervisors and (b) the resource-driven shift from individual or triadic (two supervisees with one supervisor) supervision to group supervision (Fleming, Glass, Fujisaki, & Toner, 2010). In combination, the two aspects pose a significant challenge to agencies specifically and to the counseling profession generally.

Even inexperienced clinicians can articulate the goals of general supervision: to enhance work quality; and to promote supervisee understanding of self and clients, and ensure quality service delivery. Clearly, the primary factors that undergird the goals are the reciprocal interactions and feedback mechanisms between supervisors and supervisees. Since the tension between the desire for individual supervision and fiscal and/or time restrictions is unlikely to recede in the near future, context is needed to optimize group supervision. Equally as important is that programmatic planning can include discussions about how group supervision can be used for other purposes than only group therapy trainees. Cartwright and Zander's (1968) tripartite assumptions illuminate the essential nature of groups and help dismantle the myth that individual supervision is superior to group supervision: groups strongly influence individuals; offer benefits and pose challenges; and, when deliberately used with

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precision, their positive outcomes can be heightened and their challenges can be minimized.

How, then, can counseling develop "expert" supervisors in group supervision? To better understand how expert status is achieved, it is perhaps easier to look to professions that rely on the incremental acquisition of expertise. The 100-meter sprint is a simple example. The sprint is partitioned into the four-point stance, leaning forward, the push-off, and acceleration. Continuous and incremental practice, assessment, and modification are applied to the four actions to improve performance. That detailed process is referred to as deliberate practice. Ericsson, Krampe, and Tesch-Römer (1993) defined deliberate practice as "activities … designed to improve specific aspects of an individual's performance through repetition and successive refinement." The use of deliberate practice in counseling has been limited, but expert pianists have been found to extend and maintain new levels of expertise through its use (Chow et al., 2015).

By means of group supervision, therefore, supervisors can deliberately and continuously target skills that are just in front of each supervisee's baseline performance level. In counseling, a portion of a recorded session is selected.

The supervisor re-enacts the scene as the therapist and the supervisee as the client. Both switch roles. Practice continues until the supervisee masters one or more therapeutic responses. Keeping all this in mind, the following recommendations may facilitate the introduction of deliberate practice into group supervision:

1. Introduce deliberate practice group supervision as a supplement to, not as a replacement of, individual/triadic supervision.

2. Plant the seeds of deliberate practice by exploring parallels between the specific skills clients gain from group therapy and benefits clinicians can gain from clinical group supervision.

3. Openly discuss the emotional and time investment in deliberate practice.

4. Use a supervisee "hero" or "ally" who can discuss the initial anxiety that sometimes accompanies a more public and detailed format of supervision.

5. Reassure and facilitate supervisee understanding of the process of feedback in deliberate practice through ground rules and responsibilities tailored to each supervisee's developmental stage.

6. Develop clear and achievable agendas in advance that clearly specify the purpose and goals of live or recorded presentations so supervisees can prepare as presenters and as participants.

7. Consider the logistics of where, when, and length of group supervision to promote transparency and openness.

8. Be prepared to be the first to model the process. Implement the feedback.

9. Maintain the focus on the process and skills, not the supervisees. How can rehearsing or mimicking act as the "training wheels" of skill acquisition?

10. Be sensitive to competitiveness between supervisees.

11. Explore differences in supervisee styles and skills across different client populations. Assume a neutral "learn from everything" position and focus purely on process and desired outcomes.

12. Reward supervisees for their contributions.

13. Use individual and triadic supervision, allies, and peer mentors to support supervisees, especially those who struggle with the detailed analysis.

14. Use qualitative (client/supports reports) and quantitative data (outcomes), your observations, and any other information to assess deliberate practice effectiveness.

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The Need for Case Conceptualization in Counselor Education
By Allison L. Spargo, PhD, LPC, NCC, CPCS

A case conceptualization (sometimes called a *case formulation*) is the clinician's collective understanding of the client's problems as viewed through a particular theoretical orientation (John & Segal, 2015). Practitioners include information about the client's biopsychosocial framework and their own theoretical stance as they begin to inform their interventions. Through case conceptualization, practitioners are able to explore the internal and external factors that both cause and perpetuate the client problems. There is literature related to case conceptualization from a cognitive behavioral perspective (Kuyken, Padesky, & Dudley, 2008), and dissertations have described a myriad of factors related to case conceptualization including note writing (Kuehl, 2007), counselor competency and self-efficacy (Ladd, 2016), and the effectiveness of counselor training case conceptualization (Kelsey, 2014). Regardless of the method, it appears thematic that teaching case conceptualization is a theory-based endeavor. How, then, does one instruct counselors-in-training, early in their coursework, about case conceptualization when they have yet to work with clients and may not be fully aware of their theoretical stance?

One typical way of assisting counselors-in-training to hone their case conceptualization skills is to ask them to conceptualize a clinical issue from one or multiple theoretical perspectives. This is helpful as it allows students to learn how each theory acts as a road map for the counselor and client to follow to create lasting, meaningful, and purposeful change. But, what about those students who tout themselves as eclectic or integrative with regard to theory? Where is their roadmap taking them?

In 2012, Bonow, Maragakis, and Follette suggested that there could be a universal model to case conceptualization for Functional Analytic Psychotherapy (FAP). Although there are differences in both client population and clinical perspective between FAP and clinical mental health counseling, could a universal model of case conceptualization exist? Imagine a model that would allow students to conceptualize a case no matter their theory. Imagine a model that would allow eclectic and integrative practitioners to still have a clear, describable plan for clinical work. Imagine a model that values the

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client's voice in both the explicit and implicit form. If a structure existed that connected client values, while allowing students to use their own historical learning which invariably guides what they think is "good and effective" (Bonow, Maragakis, & Follette, 2012), a mutually beneficial model could be achieved.

A mutually beneficial model of case conceptualization could be taught in counselor education programs, allowing trainees to learn to listen effectively to the client's explicit and implicit goals, successfully consider internal and external factors, personal and social factors, and allow the trainee's perspective to merge comfortably with the client goals. Counselors-in-training and counselor educators seeking to create clear, consistent, and creative case formulation are urged to find a case conceptualization model that is easy to teach, use, and adhere to so that client welfare is addressed to the highest standard.

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SACES Multicultural Interest Network

Please join us to promote developing multiculturally skilled supervisors, counselors, and counselor educators. We would love to have you as a member of this growing and diverse group of professionals.

PURPOSE: The Multicultural Interest Network serves diverse supervisors, counselor educators and students to meet their professional goals.

ANTICIPATED ACTIVITIES (not yet approved by SACES):
- Needs Assessment - Completed
- Webinars to share information and knowledge
- Meeting at SACES to network and connect
- Share knowledge and resources through LINKEDIN & Website
- Development of Mentor/Mentee relationships

TO JOIN – Please contact either Dilani Perera at perera@uhcl.edu or Michael Jones at msjones@messiah.edu

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Multicultural Competence and Courage

By Anjanette Todd, PhD

With the ethnic and racial diversity in our nation continuing to flourish, it is important for counselor educators to continue to emphasize to students, both entering and in counselor education preparation programs, the importance of multicultural and social justice competent counseling. The practice of multicultural and social justice counseling is an ethical requirement in our work as counselors (American Counseling Association, 2014, American School Counseling Association, 2016). One way for students to begin this journey is to choose to commit to a deep understanding of the Multicultural and Social Justice Counseling Competencies (MSJCC, 2015) while within their counseling education preparation courses and program. Thus, providing a strong foundation for students to build upon as they enter into their professional practice. However, this alone will not create a multicultural and social justice competent counselor. Courage is a necessary component in order to support these outcomes. Courage encompasses more than just being brave. Courage is being open to the unknown. Courage is moving in the direction of your desired outcome even though the risk of failing is as possible as the chance of success.

Counselor education students need courage in order to critically examine and acknowledge their attitudes, beliefs, and biases regarding diverse cultures and/or groups that are different from their own; courage to be uncomfortable when challenging long-held beliefs and attitudes regarding the marginalized and oppressed clients they will serve; courage to develop the cross-cultural communication skills necessary to show respect and build trust with privileged and marginalized clients; courage to acknowledge that culture matters.

Choosing to be courageous will provide a space for counseling education students to reflect on those attitudes, beliefs and biases in order to inform their personal level of self-awareness regarding their own racial identity development.

Courage is also the catalyst for the next step that is needed in order to infuse multicultural and social justice counseling into practice, and that is a call to action. We all must do more in order to keep moving in the positive direction of multiculturalism.

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A challenge in obtaining multicultural competence is that it is on-going. It is not something you can ever really say you have achieved; rather, it is something that one continually develops over a lifetime. Therefore, as counselor educators it is up to us to challenge students to: step out of their comfort zone, to get comfortable with being uncomfortable, to ask questions when they do not understand, to get to know people who have different backgrounds and beliefs than them, and to enter the conversation.

As counselors, we must model the behaviors we expect of others. In order to do this, we need to be "at the table" facilitating the discourse that is needed to help keep moving our profession forward. If we continually strive to develop the attitudes, beliefs, knowledge, skills and actions essential in infusing multiculturalism and social justice into counseling, we will strengthen the foundation needed to be courageous.

C.O.U.R.A.G.E.

Challenge yourself
  Intentionally choose opportunities to foster growth
Out of your comfort zone
  Attend events, clubs, or services culturally different from your own
Uncomfortable
  Recognize and work toward accepting that being uncomfortable is a component of courage
Reflect on your attitudes, belief and biases
  Take time to develop your cultural self-awareness
Ask questions
  Ask questions to help clarify and gain information
Get to know people from diverse backgrounds and beliefs
  Ask a student, who you have not had much interaction with, to be your partner for a class
  project/presentation
Enter the conversation
  Begin where you are

SACES Technology Interest Network

  The SACES Technology Interest Network mission is to educate and provide valuable technology related information and resources that counselor educators, mental health practitioners, and counselors-in-training can utilize in academia and mental health, by strengthening counselors' technology awareness. In addition, it provides an engaging learning/social environment forum that members are encouraged to utilize and interact with other members as it relates to technology topics that are being posted on a weekly basis on the SACES website. For more information, visit and subscribe to the *Technology in Counseling* forum.

Don't forget to stay connected with SACES, by joining the following social media groups:

SACES Facebook (for professionals)
SACES Facebook for graduate students
SACES Twitter
SACES YouTube

If you have any questions, do not hesitate to contact our committee members, Maria Haiyasoso, Erin Marden, or Panagiotis Markopoulos (network chair), at sacessocialmedia@gmail.com

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A message from the Editors

We would like to thank the previous newsletter editors, Drs. Lacretia Dye and Elizabeth Villares for their mentorship and guidance as we enter this new role. In addition, we would like to thank Mary Cullen Servodidio, Graduate Assistant for the SACES Newsletter and master's student at Western Kentucky University in the Department of Counseling and Student Affairs for all her hard work in assisting the SACES newsletter editors! Thank you, Mary Cullen!