

Carolina Counselor

Summer 2023

Official Newsletter of the North Carolina
Counseling Association

Carolina Counselor



Official Newsletter of the NCCA

ANNOUNCEMENTS

Thank you to our 2022-2023 Leadership and Welcome to our 2023-2024 Leadership!

Applications for Counseling Compact privileges are expected to open late 2023 or early 2024

Amendments to the NCBLCMHC Administrative Rules going into effect 2025

Have a Contribution for the Newsletter?

Email your submission to: nccounselingassociationweb @gmail.com

We're on Social Media

Facebook:

NorthCarolinaCounseli ngAssociation

Instagram & Twitter
@nc_counselors

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2022-2023 Executive Officers

President: Sharon Webb

President-Elect: Andrea Barbian

Kerri Legette-

President-Elect-Elect: McCullough

Past President: Dominique Hammonds

Secretary: Ashleigh Glover

Treasurer: Rebecca Blanchard

Member-at-Large Bill Stewart
Government Relations:

Member-at-Large: Lorell Gordon

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Thanks for Reading!

Please submit to the *Carolina Counselor* when you have something to share with professional counselors in North Carolina.



Carolina Counselor Sections

Branch News:

News about the North Carolina branch of the American Counseling Association

Campus Happenings:

News concerning student projects and student work in the department, university, community, and/or professional organizations such as local chapters of CSI and/or state, regional, and national counseling organizations

Diversity and Advocacy:

Discussion of issues related to diversity, multicultural competency, and advocacy; may address the helping professions directly or indirectly

Division News:

Any news related to NCCA division projects

Higher Education in NC:

Comments on the state of higher education in North Carolina and tips for effective teaching/counseling

Legislative News:

State and national news concerning enacted and proposed policy changes related to professional counselors in any setting

Member Spotlight:

NCCA members who deserve the spotlight! Please provide a photo of the nominee, a short summary of the member's accomplishments, and contact information/photo of your nominee

Perspectives From the Field:

Professional and ethical issues in counseling, counseling theory/practice, and/or reflections on work as a student, professional counselor, counselor supervisor, and/or counselor educator

NCCA membership is required to submit articles.

Branch News

A Message From the President

by Sharon Webb

We have had a fantastic year of accomplishments for NCCA, and I would like to share gratitude for my supportive collaborators on the executive committee - Dominique Hammonds, Andrea Barbian, Kerri Legette McCullough, Bill Stewart, Lorell Gordon, Rebecca Blanchard, Ashleigh Glover, and Shon Smith. All leadership positions are volunteer, and this committee faithfully met biweekly for most of this fiscal year, especially during conference planning, with much appreciated help from our Conference Coordinator Mecca Moore.

Following are a few of the highlights we accomplished for NCCA:

Contract with a new management company

Contracted Conference Coordinator position

Emerging Leaders Program

Return to an in-person annual conference

Chair positions filled for all current NCCA Committees

Committee membership interest list for 2023-24

Co-editors for the NCCA Journal

Discrimination Statement

Bylaw revisions (in process)

We continue discussions for how to ensure that NCCA thrives as an organization, and more importantly to ensure that our members find value in membership of any divisions and the organization as a whole. On July 1, I am pleased to pass the presidential gavel on to Andrea Barbian when I will move into more of a supporting role as Immediate Past President.

Dr. Andrea Barbian currently serves as an Associate Professor for the Department of Counselor Education and Family Studies at Liberty University.

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Clinically, she maintains a private practice in Huntersville, NC where she specializes in the treatment of eating disorders, sports performance, and provides clinical supervision. She contributes to the profession through research, writing, and speaking at conferences. Currently, Dr. Barbian serves as the Immediate Past-President of the North Carolina Association for Child and Adolescent Counseling, Immediate Past-President of the North Carolina Association for Counselor Education and Supervision, and Treasurer for the national branch of the Association for Child and Adolescent Counseling.

Personally, she is a wife, mother, volunteer, and lover of sports and outdoors.

I would like to also welcome our incoming 2023-2024 officers: President Elect-Elect- Shanita Brown Secretary- Jason Perry Member-at-Large- Keisha Rogers

And also, welcome to the incoming editors of the NC Counseling Journal-Demetrise Cobb and Shannon Warden.

Warm regards, Sharon Webb

Branch News

NCCA Annual Conference



We are excited to connect with our members and industry partners on February 15-17 in Greensboro, NC, for our 2024 Annual Conference!

Have presentation ideas? We invite members to submit presentations for the concurrent sessions. Topics should fit with the theme of next year's conference, "Change, Adapt, or Lose: The Imperative for Advocacy in Counseling." They should be thought-provoking and engaging, helping attendees learn the latest scientific research, best practices, and educational advances in the counseling profession.

Submit a Presentation Proposal

Submit a Student Poster Proposal

Submission Deadline is Friday, September 8, 2023

Branch News

NCCA Emerging Leaders 2023-2024

We had phenomenal applicants who expressed interest in our 2023-24 inaugural emerging leader program, and we hope those we did not select will apply again next year.

We are pleased to announce the following emerging leaders for this first year:

PhD Student - Keeland Lodato MA Student - Jewel Mack New CES Professional - Natalie Ricciutti New Counselor Professional - Andrew Orchowsky

Sharon Webb Kerri Legette McCullough Bill Stewart <u>Carolina Counselor</u> Summer · 2023

Branch News

NCCA Statement on Nondiscrimination and Prevention of Harassment

The North Carolina Counseling Association (NCCA) is aligned with the American Counseling Association (ACA) statement against discrimination and harassment of marginalized communities inclusive of transgender, gender expansive, and LGBTQ+ individuals. As counselors, our Code of Ethics requires us to honor diversity and promote the welfare of our clients. We align with the ACA in supporting safe environments for children to learn in schools as well as discrimination-free communities for them to grow and develop. We encourage members interested in advocacy work to join the Society for Sexual, Affectional, Intersex, and Gender Expansive Identities of North Carolina (SAIGE-NC), the NCCA Ethics committee, or the NCCA Human Rights and Opportunities committee.

ACA's Nondiscrimination Position Statement

Diversity and Advocacy

Dismantling Microaggressions in Supervisory Relationships: Interventions for Building Progressive and Satisfying Supervisory Relationships in Working With Black Supervisees

by Briana Kemp

An abundance of literature discusses the racism and oppression Black Americans face in mental health and educational settings (Sue et al., 2007). Unfortunately, there is a dearth of literature that expands upon the positive interactions Black Americans have had in interracial supervisory and mentoring relationships (Brown & Grothaus, 2019; Fleig-Palmer & Schoorman, 2011). While there is an increase in Black students enrolling in graduate programs, the faculty, staff, and administrators remain predominantly White (Association of American Colleges & Universities, 2019). Engaging in any role in the mental health counseling profession requires accepting and applying multicultural, social justice, and advocacy concepts (Constantine et al., 2008).

My name is BK (Briana Kemp), I recently completed my third year as a doctoral student in the Counselor Education program at North Carolina State University. I am officially ABD, currently in the dissertation phase, and looking forward to executing my research. A lot of my current research centers on exploring the unique experiences of Black women in higher education and advocating for policy and institutional change to better the experiences of Black women. I am currently a Teacher's Assistant for the Master's Clinical Mental Health Counseling program at North Carolina State University and an adjunct for New York University's Applied Psychology program. In my leisure, I enjoy traveling and spending time with loved ones.



Diversity and Advocacy

Dismantling Microaggressions in Supervisory Relationships: Interventions for Building Progressive and Satisfying Supervisory Relationships in Working With Black Supervisees

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Key aspects of multicultural competence should be engrained in the clinical supervision experience; however, many supervisors are remiss in facilitating these discussions and lack the training themselves (Brown & Landrum-Brown, 1995).

Constantine and Sue (2007) examined the perceptions of Black supervisees regarding their experiences with White supervisors in a doctoral counseling program and various themes of racial microaggressions came up. Black trainees shared feelings of being minimized due to their White supervisors being dismissive of various issues and completely neglecting to facilitate any discussion of racial, ethnic, or cultural factors. More recently, Watkins et al. (2019) explored the experiences of supervisors who reflected upon missed opportunities to acknowledge culture during their supervisory relationship with diverse supervisees. The researchers found that supervisors engaged in avoidant behaviors when cultural issues were brought up and missed opportunities to increase their cultural awareness and better understand their supervisee's experience. The accumulation of these microinvalidations and microaggressive behaviors both invalidated the experiences of diverse trainees and interfered with the progression of the supervisory relationship.

When White clinicians have not dissected their subconscious biases toward certain marginalized groups, the automatic approach utilized in sessions is those that are founded in color blindness (Sue et al., 2007). Many mental health clinicians may consider themselves as good, moral, and humane people, and it

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may be difficult to reflect on their potential personal racial biases (Sue et al., 2007). Consequently, their lack of sufficient constructive confrontation related to microaggressions leaves no space for revelation or growth.

The first goal is for supervisors to be cognizant of the detrimental impacts of microaggressive acts and truly examine personal biases. For supervisors who identify as White, it is important to truly understand the experiences of their Black supervisees. Engaging in conversations that deepen the recognition of how harmful contemporary racism can be, is useful in gaining cultural awareness (Constantine et al., 2008). Supervisors displaying validation and empathy are key elements in building strong supervisory bonds (Holder et al., 2015; Zimmerman et al., 2015). When racial microaggressions or microinvalidations occur by the supervisor or other parties, an appropriate reaction consists of validating the supervisees' experience, displaying empathy, and engaging in collaborative discussions of opportunities for growth.

Day-Vines (2007) defines broaching as the intentional efforts of counselors to welcome discussion of racial, ethnic, and cultural (REC) factors. Research regarding the importance of broaching has suggested that there is a correlation between feelings of distrust and resistance from clients when working with clinicians who are perceived as lacking sensitivity and awareness of one's personal identity and experiences (Sue et al., 2009). It is important for supervisors to welcome REC discussions and display genuine curiosity about understanding their Black supervisee's worldviews and experiences. Consequently, when

Diversity and Advocacy

Dismantling Microaggressions in Supervisory Relationships: Interventions for Building Progressive and Satisfying Supervisory Relationships in Working With Black Supervisees

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counselors better understand the nuances of microaggressions and microinvalidations, they can become more comfortable facilitating REC discussions, and work towards eliminating these negative interactions.

Ultimately, it is imperative for supervisors to be skilled in being culturally sensitive and aware of multicultural techniques in working with diverse supervisees, specifically actively dismantling systems of oppression for their Black supervisees. Initiating REC discussions and utilizing broaching techniques, along with actively validating the experiences of Black supervisees can collaboratively build healthy supervisory relationships. These techniques can assist in combatting many of the negative experiences Black supervisees have experienced, creating more satisfying and progressive supervisory relationships.

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Division News

Association for Child and Adolescent Counseling-North Carolina (ACAC-NC) News and Updates by Andrea Barbian

It has been my pleasure to serve as the President of ACAC-NC for the past two years. As I transition into the role of Immediate Past President, I will also be stepping into the role of Treasurer for the national branch of ACAC. Coming out of COVID, we struggled to gain our footing. We are moving in the right direction and growing as a division. Our children and adolescents were greatly impacted socially, mentally, and emotionally by the pandemic. We continue to strive to support and advocate for children, adolescents, and the clinicians who serve them. Please consider becoming more involved with ACAC-NC this coming year!

I am very excited for the upcoming months as Dr. Amy Grybush, LCMHCA, NCC will be moving from President-Elect into the role of President. Dr.



Grybush is an Assistant Professor in the Department of Counseling at Wake Forest University. She is a Licensed Clinical Mental Health Counselor Associate, a Licensed NC Professional Educator (School Counselor), a National Certified Counselor, and is trained in Child-Centered Play Therapy.

Dr. Grybush has worked in a variety of clinical settings, including opioid drug treatment center, college counseling center, community setting, private group practice, and Hospice settings. She has experience working with clients aged four and up and with a variety of clinical concerns including disordered eating, grief and loss,

Division News

Association for Child and Adolescent Counseling-North Carolina (ACAC-NC) News and Updates Page 2 of 3

trauma, mood disorders, substance abuse, and sexuality and identity concerns. She continues to counsel a small caseload of clients in a multi-disciplinary group practice in Charlotte. Her research experience and areas of interest focus primarily around trauma-informed approaches among marginalized populations, with a special interest in interventions in Title I elementary schools.

On a personal note, she enjoys spending time with family (including the dogs!), and doing almost anything outside - including gardening, running, hiking, and camping. She has one grown son, an (almost!) 8-year-old granddaughter, and three young adult stepchildren with her husband, Lee.

Finally, we are thrilled to welcome the following new board members for 2023-2024!

President-Elect: Alyse Bone, MS, CRC, LCMHC, RPT, RYT-200

Alyse is a Licensed Clinical Mental Health Counselor, Certified Rehabilitation Counselor, Registered Play Therapist, and Yoga Instructor who provides individual and family therapy to children, adolescents, and their parents who are experiencing emotional and behavioral concerns. She also conducts psychological evaluations and psycho-educational testing for children and adults. Ms. Bone's previous experience includes providing intensive in-home counseling services to children and families, psycho-educational testing within charter schools, forensic evaluations for high conflict divorce cases, couples therapy, parent education, and group therapy for children. She currently works in Charlotte, NC at Dandelion Family Counseling and is an adjunct professor at the University of North Carolina at Chapel Hill teaching in the graduate program of Clinical Rehabilitation Mental Health Counseling.

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Association for Child and Adolescent Counseling-North Carolina (ACAC-NC) News and Updates Page 3 of 3

Communications Trustee: Mary Johnson

Mary is a graduate student pursuing a degree in clinical mental health counseling at Wake Forest University. Prior to enrolling at Wake Forest, Mary ran her own marketing company, Brave New Word, for five years, building a team of writers and marketing professionals around the country and a roster of clients that included organizations in the healthcare, technology, retail, and nonprofit sectors. Prior to her entrepreneurial endeavor, Mary was a reporter and editor for 12 years, working for publications across the country. She worked for The Economist, Columbia Law School Magazine, and the Hartford Business Journal; and she served as the founding editor of Bizwomen, a national news website for women in business. Mary graduated with honors from both the University of Florida and Columbia University's Graduate School of Journalism.

Special Projects Trustee: Jenna Taylor, M.A., LPCA, NCC

Jenna is a third-year doctoral counseling student specializing in Play Therapy at the University of North Texas. She graduated with her master's degree in counseling and Play Therapy from the University of North Carolina Charlotte in 2020. At UNT, Jenna is an Assistant Director at the Center for Play Therapy. Her clinical and research interests include play therapy and filial therapy, specifically for children with disabilities and their families. She is currently working on her dissertation, a meta-analysis in Child-Centered Play Therapy. Jenna serves as the current Membership Trustee for the North Carolina Association for Child and Adolescent Counseling and Past-President for the Rho Kappa chapter of Chi Sigma Iota. Jenna plans to return to North Carolina upon her graduation in May 2024.

Division News

NC-Association for Counselor Education & Supervision (NCACES) News and Updates

by Andrea Barbian

It has been my pleasure to serve as the President of NCACES for the past year. Together our division has accomplished many exciting things and are continuing to grow. Drs. Helen Lupton-Smith and Regina Gavin-Williams have maintained the NC Counselor Education Faculty Consortium, which represents counselor education programs throughout the state. The consortium serves to advocate for our professions, educators, and students. Additionally, we hosted two lunch-and-learn webinars this spring. The first was a roundtable discussion with counselor educators in various stages of their professional journey. It was exciting and invigorating to engage with colleagues and hear about the work that is being done. Finally, our most recent webinar focused on CVs, interviews, and professional networking.

As we transition into the 2023-2024 year, our board will include:

President- Dr. Regina Gavin-Williams, NCC, LCMHC

Assistant Professor, Counselor Education, NC Central University

President-Elect- Dr. LaVera Brown, NCC, LCMHCS, CTI, CFMHE

Associate Professor, Counselor Education, Liberty University

Treasurer- Dr. Shannon Warden

Assistant Professor, Counselor Education, Liberty University

Member at Large- Dr. Angela Banks-Johnson, ACS, NCC, LCMHC, BC-TMH

Associate Professor, Counselor Education, Liberty University

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NC-Association for Counselor Education & Supervision (NCACES) News and Updates Page 2 of 2

Student Member at Large- Kelsey Hargrove, LCMHC, RYT Doctoral Student, NC State University

Finally, we are thrilled to introduce our new board members for 2023-2024!

President-Elect-Elect: Dr. Helen Lupton-Smith, LCMHCA

Dr. Lupton-Smith is an Associate Professor in the Counselor Education program at North Carolina Central University. She received her Ph.D. in Counselor Education from North Carolina State University. Before coming to North Carolina Central University, Dr. Lupton-Smith was the Clinical Coordinator/Assistant Teaching Professor in the Counselor Education program at NC State University. At NCCU, Dr. Lupton-Smith has served as one of the founding faculty and now Clinic Faculty Liaison to the Counselor Education program's community counseling clinic. She is passionate about teaching, supervision, clinic development/impact, and university/community partnerships and her research interests are in all of those areas. Dr. Lupton-Smith served as Member at Large and then Secretary for the North Carolina Association of Counselor Education and Supervision (NCACES) before moving into the President Elect Elect role.

Secretary: Keeland K. LoDato, MA, LCMHCA, NCC

Keeland is a Licensed Clinical Mental Health Counselor Associate and doctoral student in the Counselor Education and Supervision Program at the University of South Carolina. In clinical practice, Keeland primarily works with children, adolescents, and young adults. She is working toward becoming a Registered Play Therapist. Her research interests include play therapy, telemental health, wellness, and school-based therapy.

Division News

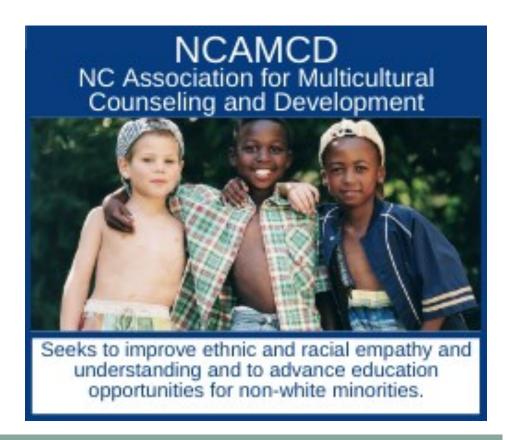
Let's rejuvenate NCAMCD!

by Sarah Moore

Unfortunately, North Carolina Association for Multicultural Counseling and Development (NCAMCD) has not been active for the last several years. As a past-President, I would like to convene a group of interested volunteers to activate the division again.

If you are interested in supporting NCAMCD, please email me at <u>sarahmoorephd@gmail.com</u>. We will plan for an initial organizational meeting in July.

Thanks, Sarah Moore



sarahmoorephd@gmail.com

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Division News

NCAOCA President Awarded Addictions/Offender Counselor Educator Excellence Award by IAAOC

Dr. Stephanie Robinson, current President of NCAOCA, was award the 2023 Addictions/Offender Counselor Educator Excellence Award by the International Association of Addictions and Offender Counselors (IAAOC), a division of ACA.

AWARDS

Each year, IAAOC is please to present numerous awards to recognize excellence among our members. Below are the most recent recipients:

2023 Award Recipients

Educator of Excellence Award: Dr. Stephanie Robinson

Outstanding Addictions/Offender Graduate Student Award: Afroze Shaikh

Research Grant Recipient: Dr. Taherra Blount "Maintaining Sobriety During COVID-19: The Coping and Experiences of African American Women in Sustained Recovery from Substance Use"

Congratulations

Division News

NCAOCA President, Awarded Addictions/Offender Counselor Educator Excellence Award by IAAOC Page 2 of 2

This award is presented annually at the ACA conference to Counselor Educators who have demonstrated an outstanding commitment to enhancing addictions and offender issues through the education of professional counselors.



Dr. Robinson is an Assistant Professor at the University of North Carolina at Pembroke (UNCP). She serves as the Graduate Certificate in Addiction Counseling Coordinator, CACREP Liaison, and the Wilmington Initiative Coordinator. Dr. Robinson has been a member of IAAOC since 2013 and a member of NCCA and NCAOCA since 2018. Dr. Robinson has served in a leadership position as President-Elect or President for NCAOCA since 2019. Dr. Robinson also serves on the North Carolina Addiction Specialists Professional Practice Board (NCASPPB).

Congratulations Dr. Robinson!

Division News

SAIGE-NC Statement Regarding Legislative Violence in North Carolina

The Society for Sexual, Affectional, Intersex, and Gender Expansive Identities of North Carolina (SAIGENC), a division of the North Carolina Counseling Association, vehemently opposes eight bills that discriminate against the trans populations. Five bills, SB 639 (4/6/2023), SB 560 (4/4/2023), SB 641 (4/5/2023), HB 43 (2/1/2023), SB 49 (filed 1/31/2023), restrict or ban genderaffirming care for trans youth. These bills directly affect licensed clinical mental health counselors providing ethical, life saving care to our clients. They put into place enormous barriers for youth and families to accessing life-saving care. Three bills, SB 631, SB 636, and HB 574 (4/6/2023) directly attack trans youth and will prevent them from participating in sports, which will negatively impact their mental health.

Summary of Bills

Gender Affirming Care Bans/Restrictions:

- SB 560 restricts gender-affirming care for minors, introducing unnecessary requirements for youth, families, and healthcare providers by:
 - Banning telehealth visits for gender-affirming counseling and treatment
 - Mandating new policies pertaining to:
 - Consent: both parents and patient must sign consent form 30 days before tx and before every subsequent session
 - Waiting period for transition-related intervention: 6 months with monthly appointments
 - Mandated counseling: required until age 18
 - Provider: 2 physicians from separate practices, one must be pediatric psychiatrist, must document need for therapy every 6 months
 - Banning providers of gender-affirming care from receiving public funds

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SAIGE-NC Statement Regarding Legislative Violence in North Carolina

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- Threatens revocation of licensure if operating outside of parameters of bill or if distress is experienced
- SB 639 bans life-saving treatment for trans youth (until 18) by making it unlawful for healthcare and mental healthcare professionals to provide genderaffirming care by:
 - Prohibiting mental health counselors from "engag[ing] in any of the following practices upon a minor, or caus[ing] them to be performed for the purpose of attempting to alter the appearance of or affirm the minor's perception of [their] gender or sex, if that is inconsistent with the minor's sex" (UNC Chapel Hill, 2023)
 - Prohibiting counselors from engaging in "conduct that aids or abets" access to genderaffirming care (this can include offering genderaffirming referrals) by:
 - Threatening licensure revocation and \$1,000 in fines
 - Prohibiting mental health provider access to state funds
 - Protecting any guidance given in alignment with provider conscience or religious belief
 - Forcing outing by any government official who observes gender nonconformity
 - Barring minor access to mental health care without parental consent
- HB 43 bans access to transition-related care until age 18 by making it unlawful for healthcare and mental healthcare professionals to: "facilitate the minor's desire to present or appear in a manner that is inconsistent with the minor's assigned sex at birth (UNC Chapel Hill, 2023).

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SAIGE-NC Statement Regarding Legislative Violence in North Carolina

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• SB 641 gives medical providers license to discriminate in providing health care/counseling if not in alignment with religious beliefs or conflicts with conscience

Forced Outing and LGBTQ+ Exclusion Bills:

- S.B. 49 impacts:
 - Bans "material discussing gender ideology, sexual activity, and sexuality in the classroom for children in kindergarten through fourth grade. The bill would also require schools to tell the parents when a child wants to change [their] pronouns." (Baltzegar, 2023, para 3).
 - Teachers face potential disciplinary action if the refuse to comply with forced outing component of bill that could non-consensually expose youth to potentially unsupportive and abusive parents

Trans Sports Bans:

- SB 631, SB 636, and HB 574 (4/6/2023), are trans sports bans which would effectively:
 - Ban trans students from participating on the team consistent with their gender
 - Essentialize sex assigned at birth
 - Subject trans youth to invasive bodily assessment re: assigned sex at birth
 - Ban competition with teams from other schools who do not ban trans students from participation
 - This legislation is a direct attack on the rights of trans youth and will prevent many trans kids from participating in athletics at the middle school and high school level.

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SAIGE-NC Statement Regarding Legislative Violence in North Carolina

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• Participation in athletics correlated with enhanced can mental health outcomes for trans youth, and bans negatively impact trans youth mental health (Goldberg, 2021).

The consequences of these violent bills, should they be enacted, are immensely destructive to trans youth survival, LGBTGEQ+ thriving, and parental/caregiver rights to pursue life-saving care for their children. Without access to gender-affirming care, trans and nonbinary youth are expected to face increases in depression, anxiety, generalized distress, and suicidal ideation, attempts, and completions. In effect, legislators are working to eliminate trans existence by directly attacking trans, nonbinary, and gender expansive youth in ways that threaten their survival through adolescence and into adulthood. We cannot allow this to happen. We have a call to action to stand in solidarity against this legislative violence every step of the way. Your advocacy or activism might look different from your neighbor's, and this is good.

We all have unique skill sets, and they are all needed in this work. For example, as mental health professionals serving LGBTGEQ+ clients, we may also be subject-matter experts, and our voices and expertise are needed in this fight. When anti-trans bills started appearing across the United States, the American Counseling Association (ACA) released a statement endorsing the SAIGE Division's Position Statement Regarding Anti-Trans Legislation. The statement took a stand against "bills that target transgender people to allow, and in some cases mandate, discrimination" which includes criminalizing healthcare procedures for the trans populations. The Licensed Clinical Mental Health Counselors Act establishes adherence to the ACA Code of Ethics as a licensing requirement in North Carolina. The ACA Code of Ethics requires counselor to

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SAIGE-NC Statement Regarding Legislative Violence in North Carolina

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avoid harm and imposing values while also advocating for the needs of our clients. We believe that the proposed laws would violate those statutes which puts counselors in an untenable position.

SAIGE-NC stands with ACA, SAIGE, and our LGBTQIA+ communities to oppose bills that would harm and discriminate.

With warmth and in solidarity, The SAIGE-NC Board

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Perspectives from the Field

No Gym Needed for This Muscle Group by Nicole Arnn

Gym membership has important benefits. Regular workouts can improve physical, mental, and emotional health. Gyms provide us with a variety of ways to improve cardiovascular function and to strengthen muscles. Unfortunately, our workout sessions usually neglect an important group of muscles. So let's take a few moments to consider the benefits of strengthening the pelvic floor muscles.

Pelvic floor muscles (PFM) help with a variety of functions. These functions include having bowel movements, urinating, and sexual functioning (Cleveland Clinic, 2022). The PFM not only helps keep one's core strong, but they can help decrease the chances of developing sexual dysfunction issues (Cleveland Clinic, 2022). Also, strong PFM can offer a variety of sexual benefits.

One sexual benefit of having a strong PFM is the extent and intensity of orgasm. There are certain PFM that contribute to the orgasmic experience and satisfaction. These muscles are the pubococcygeus and the iliococcygeus muscles. The orgasm occurs when these muscles reach their maximum tension and then relax, thus creating a spasm in the pelvic floor (Huang & Chang,

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2022). A lot of research has shown that having strong PFM contributes to better sexual functioning and orgasm satisfaction (Sartori et al., 2021; Martinez et al., 2014; Rosenbaum, 2007).

Another benefit of strong PFM is the decreased chance of developing sexual dysfunction disorders. There are two ways weak PFM affect individuals with male genitalia. First, individuals may develop erectile dysfunction if the ischiocavernosus and bulbocavernosus muscles are weak (Lavoisier et al., 2014). The ischiocavernosus muscle is important because it helps maintain the blood pressure to keep penile rigidity (Lavoisier et al., 2014). Second, the ischiocavernosus and bulbocavernosus muscles aid in the control of ejaculation, which can help with premature ejaculation (Pischedda et al., 2013). A benefit of strong PFM in individuals with female genitalia is the decreased chance of developing genito-pelvic pain/penetration disorder. Unfortunately however, having overactive PFM can also lead to painful sex issues, such as dyspareunia and vaginismus (Eserdağ, 2022). Not only are these issues physically painful, but they can cause mental and emotional distress (Eserdağ, 2022). Sometimes, this will cause the individual to remember how painful intercourse is. Thus, this results in continuous and painful tightening up of the PFM even more than they already are.

Fortunately, sex therapists can provide help when treatment of painful PFM is needed. Of course, in any case when treating sexual dysfunction, the individual's mental health and relationship functioning needs to be addressed to rule out underlying psychological factors. Generally, sex therapists treat sexual dysfunctions when caused by emotional or mental distress. But, sex therapists can also contribute to helping clients find relief with physical self care. For

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instance, sex therapists may instruct clients on how to implement Kegel exercises (Alappattu & Bishop, 2011). Kegel exercises are used to strengthen the pelvic floor muscles. Sex therapists may also instruct clients who have genito-pelvic pain/penetration disorder in the use of vaginal dilators. Researchers found that vaginal dilators are effective in treating vaginismus (Gari et al., 2023). While sex therapists do provide effective treatments in many cases, clients have the best chance for positive outcomes if they collaborate together with both sex therapists and pelvic floor therapists (Eserdağ, 2022; Bukhari, 2022).

Pelvic floor therapists can perform manual therapy, use biofeedback, and use electrical stimulation to treat pelvic floor dysfunctions (Gasnick, 2023). Sex therapists can offer a few physical interventions but can also help clients find relief from the emotional and mental distress contributing to or resulting from particular sexual dysfunctions. Generally, best outcomes result from collaboration between sex therapists and pelvic floor therapists when treating a spectrum of sexual dysfunctions.

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Perspectives from the Field

The Healing Power of Touch in Counseling: A Play Therapy Case Study

by Madison Cooke and Jonathan Ricks

What comes to mind when you think about touch between the counselor and a child? Some helpers immediately think about caution and potential for trouble. Others recognize the importance of touch, but need ideas for utilizing this connective action in a safe way. All these reactions are valid and valuable. In many play therapy trainings, Dr. Viola Brody's work with touch is presented with evidence of power for healing. The Association for Play Therapy (APT; 2022) published a Paper on Touch at www.a4pt.org to provide information to counselors on methods of engaging in therapeutic touch in safe ways.

APT suggests play therapist discuss touch with parents and caregivers during the informed consent process. Sharing the prevalence of touch in child counseling, whether planned or incidental, is helpful to parents' understanding. It is recommended that play therapists document occurrences of touch between the therapist and child. All interventions, including touch, should be a part of the therapists' theoretical orientation and it should have a purpose. Counselors are encouraged to seek supervision and consultation around the use of touch to ensure ethical, legal, and therapeutic practices are utilized (APT, 2022).

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The following describes a case of utilizing touch as part of the seminal Developmental Play Therapy. We use a case from the book The Boy Who Was Raised as a Dog and Other Stories from a Child Psychiatrist's Notebook by Dr. Bruce Perry and Maia Szalavitz (2017). Leon is a 16-year-old male that Dr. Perry met after having been convicted for a violent crime for which he showed no remorse. Leon was emotionally neglected while he was a child and this could have been the reason for his violent and manipulative behavior (Perry & Szalavitz, 2017). The neglect he experienced during his early childhood stunted brain development in the areas that account for modulating stress and linking pleasure and comfort with human connection (Perry & Szalavitz, 2017). We explore how the tenants of Developmental Play Therapy may have been helpful to Leon as a child.

Developmental play therapy has been shown to be useful when working with children of younger ages, however, it can be used with older children as well (Crenshaw & Stewart, 2016). In Leon's case, the use of developmental play therapy when first exhibiting challenging behavior and lack of emotions towards others could have been a preventative measure to his more extreme

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behaviors as a teenager. Developmental play therapy is based on the premise that touch can be a therapeutic and healing factor for children (APT, 2022; Brody, 1992). Children who are emotionally or physically abused seek to touch or be touched through physical violence as this is what they know (Brody, 1992). Because Leon was neglected as a young infant, he grew up learning that he, himself, was the only one that could meet his needs and often acted out through violence. Developmental play therapy could have provided Leon the experience of touch from a safe and caring adult and provided him that sense of connection and sense of self. Touch is also an essential component in helping to form a secure attachment between the child and caregiver (Crenshaw & Stewart, 2016). Growing up, Leon was disconnected from his parents and did not care for their rules or praise. The use of touch in developmental play therapy can help him learn to attune to others and especially his parents.

A major goal of developmental play therapy is for the child to develop a core sense of self which can happen within the relationship through touch (Center for Play Therapy [CPT], n. d.). Viola Brady describes touch to be a source of communication that unites the person touching and the one being touched (CPT, n. d.). At a young age, Leon learned to believe and later fulfill that he was 'bad' and did not deserve the affection he saw others receive due to his behaviors. In developmental play therapy, this modality could help rewrite this script to show him that he was deserving of affection and attention. The therapeutic factor of touch could have helped Leon to heal from the earlier neglect that he had faced. Another goal for Leon would be to connect with others on a physical and emotional level. Because he was not able to become comfortable with touch as a baby, Leon could direct the sessions with touch being used if needed.

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The play therapist takes on an interactive role in this modality (CPT, n. d.). Rather than being an observer in sessions, the therapist is in the process and within the relationship with the child. The play therapist offers appropriate touch for the child and can initiate when necessary to engage the child in this experience. With this, Leon would have the option of leading sessions and when needed, the therapist can initiate since this is something unfamiliar to him. Another focus for the play therapist is to experience for themselves, through training and supervision, what it is like to touch and be touched. This allows them to feel what they are wanting the child to feel. The emphasis is on the child-therapist relationship before any skills and techniques are used (CPT, n. d.). Because Leon had a problem with attachment with his parents and other adults, we believe that this emphasis may have helped him learn that adults can be safe and that his needs can be met.

This model allows parents and caregivers to be participants in sessions when needed (APT, 2022). In the case of Leon, we believe a mix of individual and family therapy would be beneficial for the child to understand how to connect with his parents as well as his peers. We believe the parents could also explore the use of touch just like that of a play therapist in training to understand the basis of using touch in repairing relationships and attachments. In any therapy model, cultural considerations for each child treated need to be considered. The therapist should evaluate how touch is perceived within the child's cultural orientation, family cultural factors related to touch, and the benefits of touch (APT, 2022).

In conclusion, touch is a powerful connector of humans (Brody, 1992). Building a therapeutic relationship is the first step in various play therapy theories and

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frameworks. It is critical for counselors to consider the effects (both potentially positive and negative) of utilizing touch, as well as the potential consequences of avoiding touch in therapy.

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Carolina Counselor Editor



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Carolina Counselor Assistant Editor



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Wrapping up the School Year

"Dedicated to the growth and development of the counseling profession and those who are served."

The fundamental purposes of the North Carolina Counseling Association shall be:

- To provide a united organization though which all persons engaged or interested in any phase of the counseling profession can exchange ideas, seek solutions to common problems, and stimulate their professional growth.
- To promote professional standards and advocacy for the counseling profession.
- To promote high standards of professional conduct among counselors.
- To promote the acceptance and value of individual differences and the wellbeing of all individuals.
- To conduct professional, educational, and scientific meetings and conferences for counselors.
- To encourage scientific research and creative activity in the field of counseling.
- To become an effective voice for professional counseling by disseminating information on, and promoting, legislation affecting counseling.
- To encourage and support the divisions and chapters.

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