As the new editorial team and I continue to adjust to our roles with the CSI Exemplar, we want to send our appreciation for the patience, support, encouragement, and enthusiasm members have shown us over the past few months. We feel immensely grateful to work in such an important field and to be surrounded by colleagues who truly care about our profession. Moreover, we remain impressed by the exceptional accomplishments by our members and chapters. With each edition, it is an honor to learn more about the member and chapter efforts to uphold CSI’s mission to “promote scholarship, research, professionalism, leadership, advocacy, and excellence in counseling, and to recognize high attainment in the pursuit of academic and clinical excellence in the profession of counseling.” We see the passion and commitment, and we thank you for the work you do.

As we draw nearer to our 35th anniversary as a society, we look forward to the opportunity to learn more about CSI’s legacy and impact. The Spring 2020 issue will be a special edition; it will not include the standard columns. Rather, in this edition, we hope to highlight the scope of impact by CSI’s members, chapters, and leaders over the past 35 years. CSI possesses archival documents that will be central to this edition. However, we are also accepting proposals that exclusively address the history and future of CSI—how we got here, what we have achieved, and how our legacy guides our future. For the Summer 2020 edition, we will return to our standard column format. The Summer 2020 theme will be Substance Use and Addictions Counseling.

Thank you all for your support. We look forward to our continued service to CSI and the opportunity to showcase your exceptional work.

Dr. Nicole Stargell
Dr. Devon Romero
Annaleise Fisher
Dr. Julia Whisenhunt
Headquarters Updates
Dr. Holly J. Hartwig Moorhead, CSI Chief Executive Officer
Upsilon Nu Chi Chapter

Change is in the autumn air as our Society welcomes new chapters and members, chapters participate in electing new CSI International Executive Council officers, and our members work in many different ways to be part of promoting excellence in counseling through both personal and professional development.

New and Reactivating Chapters
CSI continues to charter new chapters and welcome new members because of the work of committed Chapter Faculty Advisors and chapter leaders. A big thank you to these dedicated leaders!

We extend a warm welcome to the newly chartered Eta Upsilon Mu chapter at Husson University – the 408th CSI chapter, chartered since 1985.

Additionally, we celebrate the reactivations of the following chapters in this 2019-20 year:
- Alpha Tau Sigma at Ashland University
- Chi Chi at Columbus State University
- Sigma Epsilon at Southeastern Oklahoma State University
- Upsilon Beta at the University of Bridgeport

Information about maintaining active chapter status, chartering new chapters, and reactivating chapters can be accessed any time on the CSI website under “Establishing and Maintaining an Active CSI Chapter.”

CSI Initiations
As many chapters lead their new members in taking the CSI Oath of Membership during fall initiations, CSI Headquarters is again making plans to prepare thousands of new membership certificates and pins for these new members. We welcome these counselors into CSI and the benefits of membership. Check out the CSI’s online resources for planning chapter initiations – and while there don’t miss resources available for chapter leader development and using approved chapter social media.

Professional Development Opportunities
As you plan your professional development activities, look for CSI!

CSI thanks the Association for Counselor Education and Supervision for once again inviting CSI’s participation in its October 2019 conference in Seattle, WA. CSI’s Chapter Faculty Advisor Committee facilitated Chapter Faculty Advisor Training, the Chapter Development Committee presented Chapter Leaders Training, and both ACES and CSI leaders collaborated on the ACES/CSI co-sponsored session, Amplifying Servant Leadership through CSI’s Principles and Practices of Leadership Excellence. We’re grateful to all who presented and attended these sessions!

In the new year, CSI appreciates the opportunity to participate in the 2020 Association for Specialists in Group Work Conference, January 30 to February 1. Please join us at the CSI-sponsored pre-conference workshop and two educational sessions focusing on Servant Leadership in Clinical Excellence in the Midst of Crisis, and visit the calendar section of csi-net.org for more information about these sessions and other upcoming events.

CSI-Sponsored Pre-Conference Session:
Becoming a Servant Leader: Collaborating to Nurture Change
Presented by Dr. Christine Suniti Bhat, Dr. Linwood G. Vereen & Mr. Matthew L. Nice

CSI-Sponsored Session:
Clinical Excellence to Promote Community Wellness after the Storm
Presented by Dr. Peggy Ceballos & Dr. Zulmarie Hernández Bello

CSI-Sponsored Session:
Servant Leader Community Responsiveness and Advocacy
Presented Dr. Mark Newmeyer & Dr. Kathy Ybañez-Llorente

CSI is also grateful to the American Counseling Association for welcoming us again to participate in the 2020 ACA Conference & Expo in San Diego, CA. As we’re able to confirm details for spring CSI Days events, details will be posted on the CSI Days web page and updates will be shared in the E-News. Be on the lookout for ways that your chapter may contribute to special events being planned for 2020 CSI Days to celebrate CSI’s 35th anniversary in 2020!

We invite you to take advantage of earning NBCC-approved continuing education credits as well by attending (or viewing recordings of) CSI’s Fall Webinar Series. Topics and dates for the Spring Webinar Series will be posted online soon.

Furthering CSI’s Mission
CSI’s mission to promote excellence in counseling has remained unchanged throughout our history, and all of our member services, policies, leadership service, and initiatives are designed to further our
As CSI prepares to celebrate its 35th anniversary in 2020, we’re looking back into archives to preserve them (Principle #3: Preservation of History, CSI Principles and Practices of Leadership Excellence) and to build upon the history of our Society and our resources (Principle #6: Preservation of Resources, CSI Principles and Practices of Leadership Excellence) as we further CSI’s mission to promote excellence in counseling.

In the spring 1997 issue of the Exemplar (page 13), Dr. Tom Sweeney, CSI’s Founder and Executive Director Emeritus, highlighted a unique form of chapter support that CSI offers: CSI International assistance to chapters in identifying chapter initiation speakers and reimbursing up to half of lodging and travel expenses for speakers. The program is simple, but the impact of the program is great. More than 20 years later, CSI continues to offer this valuable chapter support through the CSI Speakers Assistance Program, and has helped bring distinguished speakers to hundreds of chapter initiations fostering learning and connections that emerge from these opportunities.

Chapter Tip: CSI Speaker Assistance Program

Dr. Holly J. Hartwig Moorhead, CSI Chief Executive Officer
Upsilon Nu Chi Chapter

Every year, the Executive Council includes funding in the Society’s annual budget for the CSI Speaker Assistance Program – and funding has been increased over the years as more chapters utilize this program. CSI approves submitted requests on a first come, first served basis as long as funds are available. To allow

As change comes into our individual and corporate lives in this season, we hope you will connect with CSI (csi-net.org, Facebook, Instagram, and Twitter) and find our shared commitment to excellence remains unchanged in so many different ways that members and chapters are serving and leading. Thank you for being part of our Society.
CSI to appropriately designate budgeted funding, requests for a CSI Speaker in the fall term must be submitted by September 30; requests for a Speaker in the spring or summer term must be submitted by January 31. Although funding cannot be guaranteed for every request due to budget constraints, CSI tries to accommodate as many requests as possible during each fiscal year. To allow as many chapters as possible to participate in this program, a chapter cannot receive financial assistance via the CSI Speaker Assistance Program in two consecutive years.

**Requesting a CSI Speaker**

Chapters may complete and submit the online CSI Speaker Request Form to request assistance with securing a CSI Speaker (identified on the CSI website) and reimbursement of half of the approved speaker’s travel and lodging costs in one of the following ways:

Method A: Chapter reimburses CSI Speaker for all expenses, then submits invoices to CSI Headquarters for reimbursement of up to half of the CSI Speaker’s expenses.

Method B: CSI Speaker submits invoices to both the chapter and CSI Headquarters for reimbursement of one half of the expenses from each.

CSI Headquarters must approve the request before the chapter initiation (i.e., reimbursement requests are not approved for already-completed events). When a CSI Speaker Request is approved, CSI Headquarters will facilitate connections between the requested CSI Speaker and the chapter, including establishing an initial agreement that a chapter will follow-up with the CSI Speaker.

CSI Speakers include CSI Executive Council past presidents and current officers, CSI Scholars, and other CSI leaders who volunteer their service without expecting honoraria or fees. Each CSI Speaker has many commitments months ahead; therefore, chapters should plan at least two months in advance, at minimum, to request a Speaker’s participation in an initiation. As much as possible, an attempt is made to approve Speakers who are geographically close to the chapter making the request. Reimbursement will not be approved if a speaker is contracted for a fee to provide a workshop or similar service, with or without chapter sponsorship.

Note: Chapters are welcome to contact CSI Speakers to invite them to speak at chapter functions without assistance through the CSI Speakers Assistance Program. However, chapters that wish to host a CSI Speaker with assistance through the CSI Speakers Assistance Program must complete the CSI Speaker Request Form.

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**Preparing to Host a CSI Speaker**

The CSI website provides significant information and resources that chapters are encouraged to explore and use when planning initiations. Chapters can also find information about how to host a CSI Speaker online, alongside information specifically developed to help initiation speakers prepare to serve.

After being notified by CSI that a request has been approved, chapters need to communicate in a timely manner to obtain the biographical statement that should be used when publicizing the event, as well as to finalize dates, times, travel plans, and other logistics with the Speaker. Chapters should also discuss with Speakers, and confirm in writing, expectations for reimbursing travel and lodging expenses.

Approximately two weeks prior to the initiation, it is expected that chapters will verify with the Speaker final travel and lodging arrangements, preparations for the event, and any last minute details.

When the Speaker arrives for the chapter event, chapters should provide necessary information to them about the upcoming activities and brief the Speaker on the administrators, faculty, and others who will be attending.

**Saying Thanks**

Graciously hosting a CSI Speaker includes expressing appreciation for the time and effort that has been shared. During the event, chapters may show gratitude by presenting the Speaker with a gift that represents the institution, a CSI-logo item, or another memento that has significance to the event.

Depending on the agreed-upon arrangements, chapters may provide reimbursement to the Speaker before they depart the event or chapters may send reimbursement to the Speaker soon after. In either circumstance, a handwritten note of thanks should be mailed to the Speaker.

CSI Initiations are special ways to celebrate the honor of being invited into CSI membership and to inspire the ongoing pursuit of personal and professional excellence. CSI thanks the CSI Speakers who give of their time and expertise in serving, and we look forward to new chapters taking part in the CSI Speaker Assistance Program. If your chapter has benefitted from the Program over the past decades, let us know about your experience (holly.moorhead@csi-net.org). We would enjoy highlighting how this program has made a difference to your chapter and members.
Chapter Happenings—Promoting Excellence: Professional Development for Counselors-in-Training and Community Counselors
Emily G. McCreary, Sigma Alpha Chi Chapter

The Chi Sigma Iota (2018) mission statement emphasizes, “Promoting excellence in the profession of counseling,” and the University of Texas at San Antonio’s Chi Sigma Iota Chapter, Sigma Alpha Chi, attends to such by creating opportunities for professional development to counselors-in-training and practicing counselors alike. In my interview with Brittany Hudson, president of the Sigma Alpha Chi chapter, she captured this sentiment by stating, “This type of intentional involvement (professional development) is critical for strengthening professional identity and encouraging counselors to step outside of the classroom or office in the spirit of growth and learning” (B. Hudson, personal communication, October 27, 2019). In addition to the knowledge gleaned from professional development, professional development experiences are great opportunities to network and strengthen one’s professional identity. As such, Sigma Alpha Chi is dedicated to promoting and offering professional development opportunities to promote excellence for the counselor and the community at large.

Mrs. Hudson attested to the chapter’s dedication to professional development by stating, “Professional development is the heart of our chapter’s history and continued growth.” For counselors-in-training, Sigma Alpha Chi offers professional development opportunities that assist graduate students in navigating some of the most arduous tasks during a counseling master’s program, prompting events such as preparing your master’s portfolio, applying for licensure, professional writing and APA formatting, NCE bootcamp, and internship site fair. The chapter hosts an internship site fair, which local agencies on the approved internship site list attend. This event provides an opportunity for students to visit potential sites and establish relationships with agencies in the community. Mrs. Hudson articulated, “We have always recognized students as emerging counseling professionals. Our chapter provides opportunities for students to lean into their professional self and engage with the dynamic world of counseling practice.” In addition, the chapter offers NCE scholarships, and an abundance of leadership opportunities through chapter leadership, committees, and task forces, all of which foster professional growth.

Sigma Alpha Chi does not offer professional development solely for the counselors-in-training; they also facilitate frequent opportunities for counselors in the community to receive continuing education related to pressing counseling topics in our community. Mrs. Hudson noted, “We have historically focused our energy on promoting CITs’ professional development. As our chapter mobilizes toward our 2019-20 vision of counselor community engagement, we also want to better engage community counselors.” Further, Mrs. Hudson highlighted the chapter’s ideas and goals with regard to involving more professional members in professional development opportunities, such as sending events to the entire listserve to reach professional members, ensuring to keep the events affordable and accessible (e.g., free to professional members, $5 for non-members), and inviting professional members to present on topics relevant to the chapter and community. Examples of clinically-focused professional development training offered to active Chi Sigma Iota members in the San Antonio, Texas community include but are not limited to, counseling with refugee populations, safe zone training, and advocacy for children and adolescents. In addition, the Sigma Alpha Chi Chapter will host a statewide summit and chapter networking event in May of 2020 focused on collaborative planning for counselor community engagement with keynote speaker Dr. Courtland Lee, in alignment with the 2019-20 chapter presidential theme (see Hudson & Duffey, 2019).

Because professional development is at the forefront of the chapter’s mission, the chapter continues emphasizing professional growth to counselors in the community in addition to current counselors-in-training, to further excellence in the field of counseling and the San Antonio, Texas community. The chapter consistently accentuates making professional development available for both counselors-in-training and counselors in the community in order to provide resources that can better services offered within our communities. As a chapter, we have a dedication to the systemic growth of our community and tailor professional development opportunities to such.
Congratulations to CSI members who presented at ACES 2019. Make sure to attend CSI training sessions at ACA and regional ACES conferences in 2020!

We thank ACA for welcoming CSI Days to be part of the 2020 ACA Conference & Expo!

CSI Days events during the 2020 ACA Conference & Expo

Wednesday, April 15th
CSI Executive Council Meeting
11:00am-12:30pm

Wednesday, April 15th
CSI Leadership Fellows and Interns Orientation
2:00pm-3:00pm

Thursday, April 16th
CSI Chapter Faculty Advisors Training
11:00am-12:30pm

Thursday, April 16th
CSI Delegate Business Meeting & Awards Ceremony
1:00pm-3:00pm

Thursday, April 16th
CSIE Committee Meetings
3:00pm-4:00pm

Thursday, April 16th
CSI Chapter Leader Training
4:30pm-6:00pm

Special Column: Professional Advocacy Agent
Dr. Amanda DeDiego
Interviewed by Derron Hilts, Leadership & Professional Advocacy Committee Member, Sigma Upsilon Chapter, Syracuse University

It was a privilege to interview Dr. Amanda DeDiego, NCC, an Assistant Professor in the School of Counseling, Leadership, Advocacy, and Design at the University of Wyoming. Having served in multiple leadership positions in the Wyoming Counseling Association (WCA), including Secretary and President, and currently Treasurer, Dr. DeDiego continues to demonstrate her commitment to service and advocacy in the counseling profession.

Dr. DeDiego’s advocacy began with the simple desire to serve others by striving to ensure her community’s needs were being met. She stated, “I’d like to say that I beautifully chose the moment to get involved in [legislative] advocacy, but it was really just that people needed help, and that led me to get more involved…I think that can be contributed to my counselor identity, in that my actions are in the best interest of my community.” Dr. DeDiego recognizes common barriers often experienced by professional counselors and their clients, suggesting that her involvement in legislative advocacy has been crucial to invoke systemic change towards client welfare. As a practitioner and educator, she saw her clients and students’ struggles and felt responsible to find systemic ways to address these needs for others who confront the same challenges.

Through her involvement in WCA, Dr. DeDiego and her colleagues have collaborated with other professional organizations in Wyoming to coordinate events and advocate for public policy that enacts positive change for historically disenfranchised children and families. Most recently, her collaborative efforts led to the passing of House Bill 0211: Mental Health and Substance Use Coverage Parity, which provides treatment coverage equal to medical/surgical coverage. Dr. DeDiego emphasized that a united approach with other helping professions

Dr. Amanda DeDiego

We thank ACA for welcoming CSI Days to be part of the 2020 ACA Conference & Expo!
has been pivotal to legislative successes. “I want to emphasize the collaboration. I think it’s so important to avoid focusing on what separates us, and instead recognize our common interests of fighting on behalf of our communities…legislators also don’t have much patience for in-fighting, it simply undermines the message and prevents positive change.” At the 2019 WCA conference, Dr. DeDiego and colleagues coordinated a panel of legislators and lobbyists to empower counselors to be advocates.

As a counselor educator, Dr. DeDiego infuses pedagogical strategies to strengthen emerging counselors’ understanding of legislative advocacy. “I invite our lobbyists to join my classes and talk to my students about where in the process counselors can advocate. After all, you can’t be part of the process if you don’t understand the process.” Dr. DeDiego acknowledges the internal struggles that can often inhibit professional counselors from advocating for the counseling profession. “I think we underestimate what we can do, and I think we trick ourselves into thinking we don’t have a voice, or that we don’t have power. If you had asked me three years ago if I thought I would be doing any of these things, I would have told you that I wasn’t qualified and that I wouldn’t be able to make an impact because it all just seems so “big” and difficult, and it is; however, what I have learned is a genuine message is more powerful than any beautifully crafted essay.” Dr. DeDiego stated that legislators already know the data and the facts, but what they remember are the narratives shared by counselors working with students, fellow practitioners, and clients. Dr. DeDiego implores professional counselors to recognize the richness in their clinical and educational stories and to not be afraid to let others [legislators] know what they are doing in their counseling practice.

The Kappa Sigma Upsilon chapter has entered the 2019-20 academic year with the approach of growth inward leading to growth outward as professionals and as a chapter. The chapter leadership team has embodied servant leadership with a lead from behind style to offer existing members opportunities for active involvement and personal leadership within Chi Sigma Iota (CSI). This philosophy has allowed for the necessary space for our professional development committee to create and host the first CSI Ohio Conference coming April 2020 at Kent State University. This opportunity affords the professional development committee and other interested members of CSI leadership experience related to various stages of planning for a professional conference. The CSI Ohio Conference is being designed as an opportunity of growth for years to come, including and beyond the Kappa Sigma Upsilon chapter to other CSI chapters in Ohio.

The purpose of the CSI Ohio Conference is to connect students with counseling professionals from across the state, and to offer continuing education at a minimal cost to professionals. The theme of the conference will be Professional Collaboration Amongst All Levels of Counselors. We are honored to have CSI past-president, Dr. Nicole Hill, as our keynote speaker. She is a prime example of one who fosters professional collaboration. In the spirit of professional growth and collaboration, Kappa Sigma Upsilon sought guidance from the CSI Executive Counsel about presentation topics, which tailors the conference to the needs of its members. The professional development committee is being creative and collaborative with other chapter committees, further embodying the lead from behind approach. For example, the financial planning committee will facilitate fundraising for the costs of the conference, and the community outreach committee will create advertisements and develop relationships to benefit the conference. This collaboration within the chapter fosters the message of leadership not being done in isolation, but within the community. This project offers a unique opportunity for our members to step forward, with the support of the leadership committee right behind their efforts. The CSI Ohio Conference is a true example of many students and professionals working toward a common goal.

Leadership is not only about standing in front of a room with people of shared interests moving from goal to goal. It can also be about facilitating and offering space for recognition of other members in the chapter to step forward to share their skills and gifts. As leaders, we value the importance of open communication and keeping everyone on the
same page. We created a website for committees to regularly update chapter leadership with the steps taken to meet committee goals. The chapter leadership views this as a way to follow through with our lead from behind approach while still stepping in to support the committees with their goals. This is a form of accountability to each other, CSI, and themselves.

The intention to lead from behind is meant to help strengthen the existing Kappa Sigma Upsilon membership, thus creating a foundation to support and commit to the upcoming chapter membership expansion goals developed through our collaborative strategic planning session. The Kappa Sigma Upsilon executive leadership committee seeks to enrich and serve our existing community, so we have the structure and support for our chapter as we grow. If we cannot include and involve existing CSI members then we are continuing to build on an unstable foundation. Without a strong foundation, it will be difficult to support the future growth of the chapter.

CSI Webinars
Recorded webinars on a variety of professional topics are available at csi-net.org. Recently added webinars include:

Neurobiological Implications of Discrimination and Stress on Marginalized Adolescents and Young Adults
Dr. Caitlyn McKinzie Bennett & Dr. Michelle D. Mitchell

The Use of Expressive Arts to Facilitate the Counseling Process
Dr. Julia Whisenhunt & Dr. Peggy Ceballos

Counseling in the Digital Age: Ethical Implications
Dr. Michelle E. Wade

Writing in APA Style: Common Errors and How to Avoid Them
Dr. James S. Korcuska

Congratulations to the newly elected Chi Sigma Iota Executive Council!

Cheryl Fulton, Ph.D., LPC, MBA, is Associate Professor at Texas State University in the Professional Counseling Program where she serves as Admissions Coordinator. She served as a Chapter Faculty Advisor for five years, is currently serving her third year as Chair of the CSI Leadership and Professional Advocacy Committee, and serves on the editorial board of Counseling and Values. Previously, Dr. Fulton served as chapter Chair of the Advocacy and Service Committee and Co-Chair of the Community Engagement Committee. She received the Upsilon Nu Chapter (2011) and National (2012) CSI Outstanding Service to Chapter Awards for her community engagement work. Her research on mindfulness in counseling earned the 2018 Biggs-Pine ASERVIC Journal Award and the 2015 Association of Counselor Educators and Supervisors Outstanding Counselor Educator Article of the Year. Dr. Fulton also received the 2018 College Achievement and 2017 College Distinction Awards for Scholarly/Creative Activities at Texas State.

Tanisha Sapp, Ed.D., LPC, CST, is the Chair of CSI’s Professional Member Committee. She began as a member of the former Alpha Upsilon Alpha Chapter at Argosy University Atlanta. Within CSI, Dr. Sapp served as a CSI Outstanding Doctoral Student awards reviewer, Counselors’ Bookshelf reviewer, Professional Member Committee member, Chapter President, Past President, Membership Committee Chair, and as a CSI Leadership Fellow. Outside of CSI, Dr. Sapp has served as the Director of a group practice, Co-Chair of the Henry County Walk to End Alzheimer’s Committee, Co-Chair of the McDonough Jerk Festival, and Training Coordinator for the State of Georgia Office of Regulatory Services. Dr. Sapp is an Adjunct Professor in the counseling department at Messiah College and Liberty University. She also provides professional development training and clinical supervision. Her areas of interest include: counselor identity, ethics and social media, social justice, and professional advocacy in leadership.

Hannah E. Lowe, MEd, LPC
Natalie M. Ricciutti, MS. Ed., LPC
Kimberlee Barrella, MEd, LPC

Cheryl Fulton, Ph.D., LPC, MBA, President-Elect-Elect
Tanisha Sapp, Ed.D., LPC, CST, Secretary-Elect
Recently, I was afforded the opportunity to teach a graduate course entitled **Orientation to Professional Counselor Identity and Function.** This class was full of budding counselors-in-training, eager to learn what makes counseling unique from other helping professions. Although they all believed there would be value added to their lives by enrolling in a professional clinical mental health counseling program, there also appeared to be a strong desire to clearly understand what it actually meant to identify oneself as a professional counselor. Students entered the class with a wide array of vocational backgrounds and an equally broad range of aspirational interests after completing their degrees. With a diversity of professional experiences, helping affiliations and academic training of my own, teaching this course caused me to pause and reflect more closely on my own professional counselor identity.

Granrello and Young believed that, “Selecting an identity as a professional counselor is a fork in the road ... You have selected the values, organizations, and traditions of the counseling profession. It means that you take personal responsibility for making the profession better, that you act in accordance with its ethical standards, and that you are proud of the profession” (2019, p. 2). While my service over the last 11 years as a counselor educator suggested that I had, in fact, been leaning in this direction, I now felt like I needed to not only become more conscious of how I got here, but also more intentional about how I would continue developing a solid professional counseling identity while honoring the uniqueness of my own vocational journey.

Teaching a class that is centered around professional counselor identity encouraged me to reflectively read and re-read material that speaks to what is now being defined as a professional counselor. It was also a reminder to myself that the profession of counseling has evolved since the time in which I first entered it as a student in 1995; and it will continue to evolve. As such, there is a need for all counselors and counselors-in-training to make sure that they are abreast with the current progressions in the field in order to determine how their own views about counseling compare and contrast with present day thinking.

It is important to have an understanding of the definition of counseling that is currently being embraced by prominent professional counseling organizations in order to “try it on” and see how it resonates with the work that you feel drawn to do. For example, Chi Sigma Iota (2018) noted that counseling is: “a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals.” With this definition in mind, as CITs, counselors, and counselor educators obtain more understanding of the current direction that the profession is moving, we will be able to assess whether or not our aspirations as mental health professionals align with the values and orientation being proposed to promote a unified counselor identity. This assessment will support parity with other mental health professions (Granrello & Young, 2019), increase consumer confidence and clarity of what to expect when engaging a professional counselor for services, and promote licensure portability across states. There are numerous ways that one can grow in this understanding, not only by taking a graduate-level orientation course, but also through intentionally reading current literature, such as those by Granrello & Young (2019), Nassar & Niles (2017), or Spurgeon (2012), listening to podcasts addressing these issues, such as those by Shook, (2017; 2019); speaking with other professional counselors and counselor educators in the field, and attending professional meetings and webinars.

Along with obtaining a solid grasp of the flow in which the profession is moving, I found it helpful to hear a voice such as Bob (2015, Sep 11), who presents some of the challenges and struggles of CITs who currently are enrolled in CACREP counseling programs while seeking to develop their own professional counseling identities. To solidify a professional identity that builds confidence increases one’s level of contribution within the field, they must make time and space to have conversations that will aid in determining whether or not one can practice as a professional counselor in a manner that is authentic. I have watched students analyze the ACA Codes of Ethics (2014) or grapple with whether or not they perceive that while many will engage in practicum and internship experiences that are preparing them to face within ourselves when being asked to treat clients or collaborate with other practitioners whose values are different from our own, we will ultimately do a disservice to ourselves, our clients, and the counseling profession. This also speaks to the realization that students will be at various stages of this process as they move through their professional counseling programs, and note that while many will engage in practicum and internship experiences that are preparing them to become professional counselors, it may be those very clinical experiences that will ignite the areas within them that need to be addressed in order to decide how they will proceed in the development of their professional counselor identity. Recognizing this, CITs are encouraged to make sure that they are seeking out and transparently engaging in the professional relationships necessary throughout direction altogether, and some finding ways to carry multiple identities at the same time. Yet, in hindsight, what appeared to be critical for all of these students was being encouraged to actively and unashamedly engage in the struggle, and ultimately, feel the freedom to move in the direction that gave them peace and united them with their passions.

Availing oneself to hear how other professional counselors made the decision to become professional counselors, both those whom you perceive as sharing similar as well as somewhat contrasting values from your own in particular areas, can be very powerful in helping one make an informed decision that will ultimately promote an integrated personal and professional self (Cureton, Davis & Giegerich, 2019). As professional counselors, we desire to provide this same gift of freedom to our clients; and as such, it is important that we acknowledge that by not grappling with how all of our values inform our work, and the challenges or resistance we may face within ourselves when being asked to treat clients or collaborate with other practitioners whose values are different from our own, we will ultimately do a disservice to ourselves, our clients, and the counseling profession. This also speaks to the realization that students will be at various stages of this process as they move through their professional counseling programs, and note that while many will engage in practicum and internship experiences that are preparing them to become professional counselors, it may be those very clinical experiences that will ignite the areas
Counselors’ Corner—Vicarious Trauma and Secondary Traumatic Stress: A Competency-Based Ethical Perspective

Tuesday A. Brown, Chi Epsilon Chapter

Trauma stems from the experience of life events considered negative and which are overwhelming to an individual’s ability to adequately utilize coping skills and resources as well as cope in a healthy way to a stressor (Van der Kolk, 1996). Childhood sexual assault, physical or sexual assault, natural disasters, domestic violence, and school and work-related violence have been among the most prevalent traumas reported in the field of mental health (James & Gilliland, 2001). Not surprisingly, one of the most concerning and significant public health concerns in the United States is the experience of traumatic events and experiences, often resulting in a diagnosis of Post-traumatic Stress Disorder (PTSD). PTSD is one of the main on-going negative outcomes of surviving adverse events in life and most often results in both physical and psychological consequences (Beck & Sloan, 2012; Solomon & Johnson, 2002; Lupien, McEwen, Gunnar & Heim, 2009). Acute stress disorder and complex PTSD are among the other trauma-related disorders most seen in clinical settings (Kessler, 2000). It is critical that the practicing clinician, in order to treat clients impacted by trauma in an ethical manner, must undergo training in a standardized trauma-based curriculum. Current research findings indicate only one in five North American doctoral programs in the area of psychology offer a trauma course or practicum specializing in working with traumatized clients (Cook, et al, 2017).

A study by Beck and Sloan (2012), includes a national statistic finding that about 82.2% of people in the United States are surviving a lifetime of collective exposure to at least one traumatic event. Based on this information and ongoing findings on trauma and its effects, it can be inferred that counselors in most mental health settings will work with survivors of trauma. Given the vulnerability of this population of clients, it is ethically imperative that counselors providing trauma counseling partake in training which includes the foundations of knowledge on trauma and trauma-competent clinical skills (Layne et al, 2014). Working with survivors of trauma can lead to issues such as burnout, compassion fatigue, and issues of countertransference (Salston & Figley, 2003) as well as vicarious traumatization and secondary traumatic stress. Adams and Rigg (2008) find that trauma-informed counselors experience less of a chance of experiencing vicarious traumatization, dissociative symptoms, and disrupted self-concept than those who are not trained in trauma-competent practices.

The American Counseling Association requires counselors to receive supervision and specialized training in any area of counseling that is practiced (ACA, 2014). Formal trauma training for counselors specializing in trauma counseling and those who wish to provide trauma-specific counseling to clients ensures...
that the services provided are conducted in an ethical and informed manner for this vulnerable client population. There is a considerable risk of practicing outside of professional competency if counselors do not have formal trauma training and supervision (Ratts, Toperek, & Lewis, 2010). Counselors practicing without this formal trauma training are at risk of not only experiencing the aforementioned concerns (burnout, vicarious traumatization, etc.), but may be at risk of harming their clients through re-traumatization.

The Green Cross Academy of Traumatology (2010), includes a statement on self-care and duty to perform: "There must be a recognition that the duty to perform as a helper cannot be fulfilled if there is not, at the same time, a duty to self-care." The Green Cross Academy’s Ethical Principles of Self-Care in Practice (2010) suggests it is unethical to overlook self-care as a practicing clinician because "sufficient self-care prevents harming those we serve." In addition, Turkus (2013) speaks to the high importance of the therapist-client connection as "a holding environment" for both parties to sit together in the present as trauma is processed.

Trauma-competent skills within counseling include such practices as self-care for the counselor, remaining present through body awareness, "staying in their chair," and learning to empathize without "absorbing clients' pain" (Rothschild, 2006). Body awareness for the clinician includes "being in your body and listening" as we hear our client's story. We notice how our body reacts to our client and their story and sit with this as we remain centered and calm through breath and presence. Counselors practice "staying in their chair" as we hear clients' stories of survival, remembering that we are in the present moment, our client is safe in the present, and past events are no longer happening. Hearing clients as we serve them while not becoming "hypnotized by the client's story" is crucial to avoid absorbing client's pain. The PRoQOL Scale, Version 5 (Professional Quality of Life Measure), is a self-assessment tool for clinicians which is used to monitor compassion satisfaction, burnout, and compassion fatigue (Stamm, 2009) and is recommended to clinicians to monitor these symptoms.

Re-traumatization for the client and vicarious traumatization for the clinician are risks during trauma therapy and treatment. Factors that may increase these risks include the client's possible inability to give informed consent, processing traumatic memory, and the therapist's low level of training and education (Mailloux, 2014). It is essential for a trauma counselor to be informed in self-awareness, knowing the caseload they can take on, knowing their triggers and own trauma, and utilizing personal/professional boundaries. Knowing not only self-care strategies but being ethical in their daily living, advocating for trauma-informed students, engaging in supervision, and practicing cultural competence are all protective measures essential to treat trauma (Mailloux, 2014).

In April of 2013, a national consensus conference, hosted by Advancing the Science of Education, Training and Practice in Trauma, was held on trauma competencies titled The New Haven Trauma Competencies (Cook & Newman, 2014). Held at the Yale School of Medicine in New Haven, Connecticut, this conference included 60 leading experts in the field of traumatic stress. These experts had the common goal of "identifying empirically informed knowledge, skills, and attitudes that clinicians must have from a competency perspective when working with both traumatized children and adults" (Cook & Newman, 2014). Meant for both the student and the independent practitioner, these competencies are meant as "aspirational guidelines" for the ethical practice of trauma counseling. Also recommended for ethical practice is the TIP 57 within SAMHSA's Quick Guide for Clinicians. This guide offers trauma informed approaches, supports ethical, trauma-informed practice and offers approaches for clinicians to ensure self-care and success in practice with clients as well as trauma-specific treatment strategies (SAMHSA, 2018).

In the following years, the trauma competency literature has expanded the essentials of attitudes, knowledge, and skills of trauma-competent clinicians in mental health counseling. It is suggested that these core essentials inform trauma counseling in a way that is both ethical and trauma-competent (Paige, et al, 2017). A model of trauma competency designed by Paige (2018) further encourages the education and support counselors in training, supervisors, educators, researchers, and clinicians can implement to ensure ethical trauma-informed practice. This model (PAKS®), includes areas not limited to: Therapeutic Presence (P) (person-centered, calm, focused), Attitude/Attitudinal Conditions (A) (respect for client as the expert on their own life, acceptance of the survivor's unique trauma experience, confidence in the survivor's recovery), Trauma-focused Clinical Skills (S) (Develop therapeutic partnership, establish mutually agreed upon treatment goals, create a trauma-informed consent to treat), and Trauma Knowledge (K) (Understand evidence-based trauma mental health, trauma symptoms vary and are adaptations for survival, understand clinical assessment and diagnosis of PTSD) (Paige, 2018).

Ethical practice in trauma-informed and trauma-competent clinical practice is essential for the safety of clients and critical for the protection of the clinician. Utilizing protective factors for the prevention of vicarious traumatization and secondary traumatic stress while serving clients ensures clinicians are more apt to adopt practices of vicarious resiliency. Self-care practices for the clinician are an ethical requirement to promote overall health which ensures the clinician is able to remain present and competent for clients. Areas of importance within the practice of presence, attitude, skills, and knowledge are the core foundation of practicing a trauma-informed approach.

Tuesday A. Brown, MA, NCC
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This type of service delivery aims to meet more of the patient’s needs in the same setting and is a worldwide phenomenon that is changing the way healthcare is delivered. Integrated care is important as many patients seek treatment for mental health concerns from their primary care providers (PCPs). In fact, up to 70% of mental health services are provided solely in primary care by PCPs (Faghri, Boisvert, & Faghri, 2010). Further, many individuals do not follow-up on referrals to specialty mental health (Ogbeide, Landoll, Nielsen, & Kanzler, 2018).

The role of behavioral health professionals in primary care has begun to be addressed in counselor training. The most recent version of the Council for the Accreditation of Counseling and Related Educational Programs (CACREP) entry-level program standards mandate that all accredited programs, regardless of specialty, orient counseling students to “the multiple professional roles and functions of counselors across specialty areas, and their relationships with human service and integrated behavioral health care systems, including interagency and interorganizational collaboration and consultation” (CACREP, 2016, Standard F.1.b.). As patient needs and training mandates increase, there is a need for counselor training programs to respond with models and practices for counselor training in behavioral health in primary care settings.

The Program for the Integrated Training of Counselors in Behavioral Health (PITCH) is housed within the University of Texas at San Antonio’s (UTSA) Department of Counseling. PITCH is generously supported by a 4-year, $807,000 Federal Health Resources and Services Administration Behavioral Health Workforce Education and Training grant which provides specialized training and internship placements for student counselors. Through this grant, students gain competence working with clients in rural, vulnerable, and/or medically underserved communities in integrated behavioral healthcare settings. The PITCH leadership team includes: Dr. Heather Trepal (Professor, UTSA Department of Counseling), Dr. Jessica Lloyd-Hazlett (Assistant Professor, UTSA Department of Counseling), Dr. Stacy Ogbeide...
(Associate Professor/Clinical, UT Health San Antonio), and Dr. Mercedes Ingram (Community Initiatives and Population Health, University Health System).

San Antonio, Texas is the 7th largest city in the United States. Much of the local population in San Antonio is an underserved mental health community. In Bexar County, there is a chronic need for, and shortage of, counseling, mental health, and substance abuse treatment services for vulnerable (i.e., less privileged and less affluent) populations, including the urban poor, first generation immigrants, those whose sole language is Spanish, and marginalized groups. Although our county has a psychiatric facility for children, adolescents, and adults, the demand for mental health providers and psychiatric beds exceeds the supply (Pliska, Adams, Taylor, & Velligan, 2016). Additionally, data show that primary care has become the de facto mental health system for much of the United States (Katon & Unützer, 2013).

In response to this identified need, in 2017 UTSA Counseling Program faculty applied for and received this Behavioral Health Workforce Education and Training Grant. In fact, the Health Resources and Services Administration (HRSA) funded 136 grants to expand the Behavioral Health Workforce around the nation and 19 counseling programs were included in these grants (HRSA, 2018). Through the PITCH initiative, UTSA Counseling faculty established a nationally-distinct graduate certificate in Integrated Behavioral Healthcare.

UTSA’s Clinical Mental Health Counseling students who are selected to participate in PITCH and the connected certificate program take a series of four courses. The team developed two specialized didactic course offerings in primary care behavioral health (PCBH) integration. The first course introduces students to the primary care setting (e.g., family medicine, pediatrics, geriatrics), the PCBH model of care, behavioral health consultation, common mental and chronic health conditions encountered in primary care, and offers a basic understanding of brief, cognitive behavioral interventions used in primary care (Robinson & Reiter, 2016). In the second course, students begin applying foundational knowledge of PCBH as well as practicing functional and contextual assessment and cognitive-behavioral intervention skills for the primary care setting.

PITCH students also complete two semester-long clinical rotations in primary care. Students are required to clock 300 hours each semester, 120 of which must be direct clinical engagement. Direct clinical engagement time includes patient visits, consultation with the primary care team, and facilitating psychoeducational groups tailored to unique clinical populations.

UTSA faculty members sought consultation for the program’s development with Dr. Stacy Ogbeide, Associate Professor/Clinical at UT Health San Antonio.

Dr. Ogbeide is a Board Certified Clinical Health Psychologist and Primary Care Behavioral Health Consultant. Dr. Ogbeide teaches two courses for UTSA’s PITCH participants, and consults with the program’s training sites in integrated care concerns and best practices. The collaboration between the professions of counseling and psychology to offer this unique training for our UTSA students is unconventional. Most mental health professions remain siloed in their training approaches. The PITCH training partnership involves each profession learning about and informing the other.

The PITCH team also sought out and developed new clinical placements with over 10 primary care clinics throughout San Antonio. Partners include: Department of Obstetrics and Gynecology/Women’s Health (UT Health), Primary Care Center - Medical Drive (UT Health), Dept. of General Medicine (UT Health), Dept. of Family & Community Medicine (UT Health), Wesley Health and Wellness Center-Methodist Health Ministries, Community Health Centers of South-Central Texas, Daughters of Charity Services of San Antonio’s La Mision Health Care Clinic, and the Center for Healthcare Services - NW Clinic.

As part of the PITCH program, UTSA Counseling Program provides quarterly inter-professional trainings to health professionals throughout San Antonio. Examples include: site supervisor booster trainings offered each semester; a day-long interprofessional training offered in June 2018 for over 80 attendees with the collaboration of UT Health San Antonio, Methodist Healthcare Ministries, and South-Central Area Health Education Center; and two webinars offered in the summer of 2019 focused on public policy and funding employment in integrated healthcare settings.

Over the past 24 months, PITCH has already had an impact on patients, our UTSA students, and the local professional integrated care community. Patients have received over 14,400 hours of behavioral health consultation at PITCH-affiliated primary care clinics. PITCH has graduated two cohorts for a total of 24 students trained in this model with the third cohort scheduled to graduate in May 2020. The local integrated care community has received additional free trainings and workshops related to this interdisciplinary specialization. Further, our graduate certificate in Integrated Behavioral Healthcare is among the first of its kind to be offered in Clinical Mental Health Counseling programs in the country.

The UTSA Department of Counseling’s PITCH program maintains sustainable service partnerships with local community partners for the purposes of creating high quality student training experiences and collaborating on issues of mutual concern. The PITCH program offers cutting-edge training for UTSA’s Clinical Mental Health Counseling program students. The innovative Certificate in Integrative Behavioral Healthcare has the potential to offer our graduates increased rates of employment and specialization within the
counseling profession. Finally, and perhaps most significantly, having more behavioral health professionals, such as counselors, trained in integrated care increases the availability and quality of these important services to patients. The underserved mental health community in Bexar County most certainly benefits from this innovative student training program.

The PITCH team welcomes the opportunity to network with other counselor training programs interested in integrated primary care behavioral healthcare.

In the 21st century, we are living in a world where computer efficiency fits in the palm of our hands and access to individuals is limitless. New counselors-in-training (CITs) are predominantly in the Gen Z or Millennial generations; they are digital natives, meaning they have always lived in a world with the internet. Even digital immigrants, those of Gen X or older, have learned to adapt to technology as an everyday essential. From social media to smartphone applications to google searches, there are very few areas in our lives that are not impacted by the shift in society to rely heavily on technology. As counselor educators and supervisors, we do our students/supervisees, (therefore, their clients) a disservice by not addressing the multitude of considerations, both professionally and personally, that now exist in this digital world. We teach our students best practices within the profession, as well as how to consider ethical ramifications of choices made. However, with regards to the utilization of technology, the lessons and conversations are lacking within the classroom. This article will serve as a catalyst for counselor educators to add to their classroom dialogues.

Students are taught best practices within their counseling programs. And when it comes to best practice for a counselor’s virtual presence, it is considered best practice to have a clear separation between personal and professional virtual presences. Nonetheless, conversations with students/supervisees need to go beyond that one consideration. We teach our students how to address potential interactions with clients outside of the counseling session, but our interactions expand into digital interactions on a daily basis. Instead of helping students and supervisees navigate how to co-exist with their clients in physical communities, we have to begin talking about how to co-exist in a digital community. When counselor educators begin to address this concept, it helps students begin to develop discernment about what to share on social media. While each CIT will develop their own personal approach to social media; CITs may not consider the ramifications of their personal virtual presence without the initiation of the conversation and concepts by counselor educators.

Whether desired or not, professional counselors are seen by the public as representatives of mental health, and that perception permeates all aspects of our daily interactions. In a profession where personal values are not to be imposed onto clients, it is imperative to be mindful that clients may still find ways to “know” a counselor’s personal values. Counselor educators and
supervisors have a responsibility to help CITs understand the ramifications of perception and how digital presence influences that perception. For example, understanding that liking a page or an article may change how a client (or the public) perceives the CIT. Intro and skills courses are great opportunities to begin discussing a CIT’s level of comfort and professionalism in addressing difficult client-initiated conversations. Some potential role-playing activities include how to handle when a client brings up that the CIT recently endorsed a political candidate the client staunchly opposes; or the client mentions running across the CIT’s dating profile and being surprised about what they read; or a client mentioning an unflattering tagged photo of the CIT discovered during an image search. Counselor educators need to help CITs understand the necessity of considering and establishing privacy settings for their protection, as well as the perception of counseling as a profession.

The counselor’s personal virtual presence is not the only conversations counselor educators should be initiating. Counselor educators should also regularly address the professional virtual presence of a CIT. Most current CITs will have to learn to advertise their services beyond Psychology Today’s “find a therapist” search, utilizing social media advertisements such as Facebook and Instagram, as well as preparing how to navigate professional ratings on apps like Yelp or ratemytherapist.com. Counselor educators need to challenge their students to consider what information to post on their professional social media sites. For example, in a foundations course, discussing the pros and cons of sharing physical addresses, professional headshots, or using one’s personal cell phone as the contact number.

This new way of advertising also brings with it conversations regarding confidentiality and informed consent. When I was taught about confidentiality and peer consultation, I was taught to be mindful of where I was and who I was with because I never knew who might be connected to whom. Social media shrinks the world through connections and increases access to information about individuals. Counselor educators and supervisors need to address the specific concepts where confidentiality can be breached if one is not careful. For example, a private practice’s social media page reveals the address of the practice. A client who is seeking counseling due to Intimate Partner Violence checks in to the site, or just follows the page. Their partner sees this action and investigates the practice, showing up one day to confront the counselor and/or client. Or a CIT who works for an agency that works predominantly with sexual and/or gender minorities and a client, who has not revealed their orientation or identity to family, likes the page and is therefore unintentionally outed. With regards to seeking referrals, CITs are taught to consult colleagues. However, these referral requests tend to be client based rather than counselor based. Listservs and such are great resources for CITs to make referrals, but a client-based referral, too much identifying information can be shared. Whereas, a counselor-orientated referral protects client confidentiality. It is very different to ask for a counselor who specializes in adolescent depression in Plano, TX than to ask for a referral for a 15 year old African American male who has self-harming behavior and major depression who is moving from Chicago to live with his grandparents in Plano, TX after the death of his mother. Counselor educators need to prepare students to address potential risks (and benefits) to social media interaction.

During intro and ethics courses, as well as during practicum and internship, students are asked to consider informed consent. Social media needs to be a major topic of informed consent conversations. Whether one engages or does not engage professionally through social media, informed consent documentations and conversations should address social media interactions, or lack thereof. Clients need to be made aware of the lack of interaction or how interaction on social media will be conducted and what the expectations are regarding access to social media profiles. For example, a client allows a CIT access to their Instagram feed, in order to understand what is important to the client. The client expects the CIT to access it whenever it is convenient; however, the CIT only intends to access during the session. Counselor educators need to begin helping students address these expectations and considerations with future clients.

Social media is not the only conversation about the new digital age. In an ever-evolving digital culture, counselor educators and supervisors need to also begin discussing the utilization of technology from an intervention standpoint. In techniques, intro, and theories courses, students are introduced to a plethora of tools and techniques to utilize to help their clients benefit from counseling. Students and supervisees are taught to be culturally integrative and sensitive, to communicate in a manner that respects the diversity and cultures their clients represent. Again, Gen Z and Millennial clients are digital natives and have potentially always had technology and the internet at their fingertips. Additionally,
Telemental health is rising in access and utilization; professional counselors may be licensed in multiple states and therefore counselor educators need to discuss the ethics and legality of working with technology. Even if CITs have no desire to practice telemental health, counselor educators and supervisors need to address the likelihood clients will have a smartphone, and therefore access to potentially beneficial smartphone applications. While these applications cannot replace the counselor-client connection, they can help assist a client outside of the counseling room. For example, utilizing smartphone applications such as MyFitnessPal or eMoods which can track activity and mood shifts respectively. Or helping connect clients to resources outside of crisis helplines in time of stress, such as Calm Harm or notOk or Worry Knot, that addresses self-harm behavior, suicidal ideation, and anxiety. Counselor educators and supervisors need to challenge CITs in skills and practicums/internships to consider the pros and cons of utilizing these applications, as well as the potential costs to the client. Beyond utilization of these applications, CITs critical thinking skills about how they evaluate the types of interventions (applications) they choose for their clients. Counselor educators need to start teaching CITs about the American Psychiatric Association’s (APA) App Evaluation Model (n.d.). This model can help reduce clients finding of non-beneficial applications while increasing compliance with treatment. APA’s method of evaluation is a five-step, tiered process: 1) review general information about the application, 2) assess risk and privacy/security concerns, 3) evaluate research regarding the application, 4) test out the ease of use of the application, and 5) look at interoperability of the application. If any of the early aspects of the evaluation are questionable, such as lack of general information or high risk of privacy concerns, then the evaluation of the app can be stopped. With this tool in their counseling toolbox, CITs can begin to meet clients where they are and help clients utilize tools at their fingertips.

In 2014, the American Counseling Association (ACA) released a new Code of Ethics that introduced a new section, Section H: Distance Counseling, Technology, and Social Media, in an attempt to begin acknowledging this new digital age. This began a dialogue from an ethical perspective, and perhaps even a legal one. However, five years later, it is time to address distance counseling, technology, and social media from a practical standpoint. As counselor educators and supervisors, we need to prepare our students and supervisees for the careers and world they will actually be engaged in. Dr. Michelle E. Wade, LCPC (MD), LPC (VA), NCC, ACS, BC-TMH

Chapter Resources—Strengthening and Integrating your CSI Chapter: Ideas to Build a One-Community Model
Samantha Simon Lohorn & Erik Messinger, Nu Sigma Chi Chapter

The Nu Sigma Chi Chapter of CSI at North Carolina State University has more than 50 active members including current students, alumni, and faculty. Over the past few years, the counselor education program at NC State has undergone some significant changes, including the implementation of an online counselor education program in addition to the already established master’s and doctoral programs. As the program grew, so did the CSI chapter, now including members throughout the state and surrounding areas. Chapter leaders were then tasked with bringing all students together. To accomplish this goal, Nu Sigma Chi chapter leaders adopted a one-community model that was first introduced through a collaboration project for master’s students, known as SC3. SC3 is a training program enhancement within the master’s-level program that introduced the theme of School-College-Community Collaboration and emphasized the importance of collaborating with other helping professionals to provide better counseling services. The goal of this initiative was to provide an opportunity to learn about the settings, service philosophies, work responsibilities, challenges, and strengths of colleagues in other specialty counseling areas (Baker et al., 2009). With a continued decrease in meeting attendance, specific and strategic planning went into the development of an intentional, integrative, one-community approach, which aided the entirety of the Counselor Education community. The ultimate goal was to create a one-community model, integrating the influx of online and on-campus cohorts, as emphasized in the CSI Days Chapter Leader Training. This was achieved by creating a co-presidency with goals to: (a) implement a wellness initiative, (b) incorporate professional development opportunities, and (c) encourage networking within the counseling profession and community.

According to Foster and the Wellness Cube Model (2010), CSI is a contextual variable to wellness, providing experience outside of the classroom that can aid student wellness. To integrate this initiative, the chapter intentionally implemented a wellness social event once a month for the academic year. This was organized by on-campus and online masters students serving as co-chairs of the Nu Sigma Chi Social Committee. Social events consisted of pumpkin painting, roller skating, and end of semester celebrations. To add to this, the social committee ordered food
for every chapter meeting to increase attendance.

CSI is the cornerstone for professional development, yet many chapters struggle to make events accessible for all members. In the past, the chapter attempted to engage in professional development, but attendance wavered. To incorporate all students, the chapter partnered with faculty to bring online webinars to the community. These webinars served as a way to connect online and on-campus students in one virtual place while exposing students to topics such as crisis, licensure, insurance, and online counseling. These webinars also function as a bridge between students and established professionals in the counseling field.

Networking is a large part of this profession but can be challenging and intimidating to students. By incorporating a one-community model, the chapter facilitated networking between online masters students, on-campus masters students, and doctoral students through various events, initiatives, and meetings. Faculty and alumni were present at these events, which students do not often gain exposure to. Networking allows for students to feel a sense of community, with the intention of lowering the ever-growing amounts of imposter syndrome that are present.

The one-community model is supported by evidence of increased online student attendance and participation, and the successful co-president collaboration between an online master’s student and a doctoral student. While this model continues to grow and expand, it is our hope that other chapters can use the one-community model to encourage and incorporate their own chapter growth, participation, and development.

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Excellence in the Field—Diversifying the Profession: How Identity Negotiation Gets in the Way

Dr. Nancy E. Thacker, Iota Delta Sigma Chapter

As a counselor-in-training, a dear mentor once said to me: “It seems like you wear a mask. What does it take to let yourself be seen?”

I did not know then that this moment would lead me to examining how marginalized counseling professionals (CPs) negotiate their personal identities in efforts to form professional identity. It was a significant moment in my journey to integrate my diverse, personal attributes with professional skills (Gibson et al., 2010). I, a bisexual/queer, White, Appalachian, cisgender woman, was becoming a professional counselor. Some of my identities hold significant privilege, while others are marginalized within our professional environments. I was unsure how to bring complete authenticity into my role without risking either personal validation or professional success.

As an emerging counselor educator, I remained similarly uncertain, but I discovered I was not alone. I learned our field continually seeks to diversify (ACA, 2014; CACREP, 2015; Kaplan & Gladding, 2011), and professional identity is our mechanism to embody inclusion and unite with diverse CPs (Woo et al., 2014). Adversity can move CPs to negotiate, or suppress, aspects of personal self to secure validation, mentorship, and opportunities necessary to form a professional identity. When this occurs, their abilities to genuinely integrate diverse personal attributes with professional skills are inhibited, and collective diversification is consequently hindered (Haskins et al., 2013; Woo et al., 2014).

I recognized my story could speak to this presenting problem. But revolution comes from collective voice and action. I sought stories from eight marginalized counselor educators who identified as racial/ethnic minorities, women, and LGBTQ+ to understand the means and contexts in which identity negotiation occurs.

A narrative thematic analysis allowed me to co-construct a composite retelling of lived experience with my participants. In sum, we discovered personal attributes were not the active agents in experiences of negotiation. Rather, participants negotiated aspects of their race, gender, and sexual orientation depending on the context they inhabited. Negotiation and its impact on identity were ongoing as
Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united.

We are intersectional and face marginalization simultaneously because the compositions of our identities are influenced by histories of oppression and experiences of marginalization permeated across spaces. However, authentic expression occurred when contexts were inclusive (e.g., with balance of power or nurturing mentors). Thus, implications involve addressing context, or shifting our professional climate, to decrease negotiation, increase authentic expression, and diversify the profession. I share our story and call-to-action to this end with my words in plain text, participants’ words in italics, and major themes bolded. This is us—surviving, evolving, ready for revolution.

We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united. Our stories vary—the people within them, contexts around them, and voices in plain text, participants’ words in italics, and major themes bolded. We are unique, distinct, yet united.
Our sacrifice is worth it because, in the end, we keep going. Counselor education involves a journey that is beautiful, yet tragic and emotional. And we choose it every day. We continue to grow, albeit in unique ways, our personal and professional identities evolving in a feedback loop. Our dedication to growth leads us toward authentic integration. We know that, when our voices are not only heard, but our message is internalized within the core of our professional values and actions, our field will thrive. We will thrive. And so will those who we serve. We are here, and we are ready.

To the structures and people in power that perpetuate a discourse unconducive to intersectional beings and action, that continue to marginalize our identities and experiences, move out of the way so that we can do what actually needs to be done. It is time to redirect the confluence, so our waters can flow freely, fully, authentically. Negotiation will be ongoing; we cannot stop the need to navigate once we enter the water. But, we can shift the ongoing; we cannot stop the need to navigate once we enter the water. But, we can shift the

We need power—to integrate our identities, engage in validating relationships, and express our authentic, intersectional selves across contexts. We need power to join together as a community, with members of all backgrounds, to shift our professional culture. If the profession hopes to increase diversity, it needs to take a step back and be more reflective, because we never really learned intersectionality. Take hold of the intersections of identities, expressions, and lived experiences that exist within it and nurture them. Do not question, do not seek to mold, do not hush. Embrace, empower, evolve.

*This research was supported by grant funding provided by Chi Sigma Iota Counseling Academic and Professional Honor Society International and the Southern Association for Counselor Education and Counseling

**Thank you to Dr. Casey Barrio Minton and Kertesha Riley for assistance with this inquiry.

Dr. Nancy E. Thacker, NCC

publication and presentations; continuously engaging in reflexive work, holding each other accountable to it; promoting reflexivity within our students; and increasing diverse representation in leadership.

But, we need more than a seat at the table; we need room to embody inclusion. We need power—to integrate our identities, engage in validating relationships, and express our authentic, intersectional selves across contexts. We need power to join together as a community, with members of all backgrounds, to shift our professional culture. If the profession hopes to increase diversity, it needs to take a step back and be more reflective, because we never really learned intersectionality. Take hold of the intersections of identities, expressions, and lived experiences that exist within it and nurture them. Do not question, do not seek to mold, do not hush. Embrace, empower, evolve.

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Dr. Nancy E. Thacker, NCC

References

McCreary Reference:


Washington References:


Brown References:


Call for Submissions

The CSI Exemplar Editorial Team is accepting submissions for consideration for the Spring 2020 newsletter. This edition will celebrate our 35th anniversary. All submissions must pertain to the history of CSI and the influence of our society, leadership, and members on the counseling profession. Please submit proposals by January 21, 2020 to exemplar@csi-net.org in the form of an APA-style abstract.

Through high-quality research, scholarship, and professional dialogue, JCLA will promote the development of leaders to serve in diverse counseling settings, bring awareness to professional and client advocacy initiatives, and provide a forum for discussing professional issues. JCLA welcomes empirical, theoretical, and conceptual manuscripts focused on leadership, professional and client advocacy, and professional identity for counselors, counseling students, and counselor educators.

Because evidence-based practice is at the heart of the counseling profession, JCLA will occasionally publish exemplary scholarship related to evidence-based practice in counseling practice, supervision, and education. JCLA is published twice a year with a circulation in excess of 15,000. The editorial board accepts research and practice manuscripts on a rolling basis. To learn more about the journal aims, and scopes and author guidelines, please visit tandfonline.com. Our manuscript submission portal is located at http://mc.manuscriptcentral.com/ucla. You may also address inquiries to jcla@csi-net.org.

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