



TLPCA Newsletter

Unite. Train. Advocate.

May 2021

President's Welcome



To all of my colleagues!

It has been an absolute privilege to serve as TLPCA president, and I am humbled by the opportunity! I don't need to remind you about the unprecedented circumstances that enveloped our world throughout the past year, but I do want to

continue to offer my sincerest gratitude for every member of our mental health community! Frequently, mental health takes a back stage, and this has been especially true throughout the pandemic. When people were isolated, afraid, and hopeless, you were there for them just as you have been all along. So again, thank you!

The TLPCA has experienced significant growth in both active membership and its ability to advocate on behalf of our profession, and I wanted to take some time to highlight a few achievements. Through lobbying efforts, we have been instrumental in securing the ability for post-master's and student clinicians to utilize telehealth. This shift has been essential as we navigate our current health climate. Additionally, we sponsored the Counseling Compact bill, which will allow for greater licensure portability between states. Our goal remains to consistently advocate for our profession by protecting and expanding our current scope of practice and status of licensure. I remain dedicated to seeing LPC-MHSP's gain the ability to bill the Medicare system and

believe we are currently moving in that direction! I also hope you are taking advantage of our new online training modules and that you gain valuable information from each session. We welcome new trainings and would love the opportunity to share your expertise with the rest of the field. I greatly appreciate all those who have shared such great content so far! I, like many of you, am looking forward to getting back to in-person trainings but continue to see the huge benefit these virtual sessions offer to our clinicians living in rural areas. Another area in which we have seen growth is in our student membership. For all of you students out there, we welcome you to the profession. The TLPCA will continue to support your growth in the field from first semester to retirement. I personally look forward to having you as part of our leadership team in the future!

Our organization has a bright future with Dr. Megan Herscher at the helm. Her passion for our profession is immense, and she is fully dedicated to supporting the three aims of TLPCA (Unite. Train. Advocate). As past-president, I look forward to serving with Dr. Herscher as she works to continue our goals. Again, I want to say thank you for allowing me to serve as your president. I believe the most important job of a clinician is the installation of hope. Collectively, our mission is to bring hope into a seemingly-broken world, and I am honored to be a part of that mission with you!

Love you all!

Derrick L. Edwards Ph.D., LPC-MHSP

TLPCA Appreciates Your Membership!

Membership Counts...

Total Members: 593

Professionals: 335

Students: 246

Retirees: 12

You're in good company!

President-Elect's Welcome

I am so much looking forward to continuing my work with TLPCA by transitioning from President-Elect to President in July of this year. I wish to begin my tenure as President of the Tennessee Professional Counselors Association by thanking my predecessors for their exemplary leadership, and by thanking you, our members, for your ongoing commitment to TLPCA. I am humbled by your confidence in me and enthusiastic about leading this organization in meeting the evolving needs of our profession, responding to ongoing changes in legislation and licensure standards, and helping our clients and one another respond to the challenges of historically unprecedented times.

As Mental Health Counselors, we are a stabilizing force in an unstable and uncertain world. We are helping our children cope with uncertainty, contributing to our front-line workers' ability to persevere, and assisting our families to cope with grief, loss and financial hardship. Our contributions to those we help are grounded, in part, in the ongoing professional development the Association has supported and the professional identity that TLCPA has fostered in its members. Never underestimate your value in helping those in need.

Under normal circumstances, I would take this opportunity to outline specific, future initiatives, but these are not, as each of you knows well, normal times. Instead, I ask you to work with me to help support TLPCA's mission to *Unite, Train and Advocate* by:

- Continuing to support one another in ways that reflect our shared professional values.
- Providing effective clinical care to those in need, continuing to help improve their lives.
- Learning about and representing all populations.

Through fellowship, we do our best work, strengthening our ability to provide effective clinical care to those in need. I am overwhelmed with pride in and solidarity with my fellow counselors.

Thank you for allowing me to serve along with you as we pursue helping those in need. I humbly look forward to my role as President of TLPCA in the '21/ '22 year.

Sincerely,

Dr. Megan Herscher, LPC-MHSP, ACS, NCC



Calling All Counselors!

We need your help with the following for future editions of the TLPCA newsletter!

Honors: Would you like to honor the contributions of a fellow counselor?

In Memoriam: Have we recently lost an invaluable member of the profession?

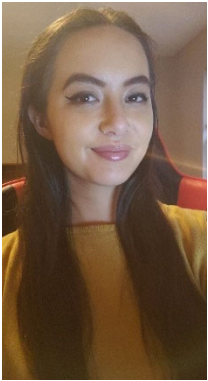
Partnerships: Is there an important partnership that you would like to highlight?

Causes: What significant issues are in need of your colleagues' attention?

Please send potential contributions to **Natalie Trice** (newsletter@tlpca.net) for consideration.

TLPCA Student Representative Reflections

Hello all,



Cheyenne Looper

My name is Cheyanne Looper, and I am currently a first-year, second-semester graduate student in Austin Peay State University's CACREP-accredited M.S. Counseling program. These two semesters have been the two hardest semesters of my life!! While it has definitely been an uphill journey, it has been an incredibly rewarding one. I feel like I have not only grown as a counselor-in-training but also as a person. One of my favorite things about Austin Peay's

program is how it challenges you to truly reflect on where you have been, where you are, and where you are going. This is so much easier said than done for a couple of reasons. First, it's never a good feeling to reflect on your past and present and unveil all of your personal biases and influences that could get in the way of you being a "good" counselor. This is a difficult process to do by yourself; it feels unnatural and just generally unpleasant. Now, imagine having a highly-educated and well-versed professor and seven of your peers watching you go through it! Acknowledging our own points of blindness/ privilege is definitely a process, but I really do believe it's something that every competent counselor must do on a regular basis, so does the program. With this being said, Austin Peay provides the necessary support to not just grow, but to grow in a nurturing and safe place.

This brings me to my second point, which is the vulnerability that this program requires. I have always been one to keep my problems to myself, particularly my health issues. Unfortunately, this was very difficult to hide when talking about potential problems/ roadblocks that could get in the way of me providing adequate and effective counseling. It was a difficult decision to which to come, but my gut was telling me that I needed to do it. Long story short, I decided truly to open up about my health issues with brutal honesty. I was so nervous, but everybody accepted me with open arms and had nothing but love and support for me. I am so thankful that they were willing to listen to me and hold that space for me. I still feel secure in my decision, even months later. And,

although it's been months, I still very much feel that space being held for me.

I say all of this to convey that Austin Peay has such a wonderful program—a difficult program, but nonetheless, wonderful. This journey has changed my life for the better, and I am not even halfway there yet! I hope you all find the same fulfillment and gratification that I have found with this endeavor and continue to find on a regular basis.

The Ph.D. and Me

Amy Sewell Shelton, LPC-MHSP
Doctoral Candidate at Trevecca Nazarene University

One of the disappointing aspects of a Ph.D. program is that you learn new ways to gather and judge information and new ways to think. For instance, you learn how to do a literature review that involves understanding the validity, reliability, and significance of results. In consequence, a Ph.D. program forces you to let go of long-held beliefs when research does not support them. Disappointing. The process of learning unsettles preconceived notions and paradigms, forces reflection and revision, and even requires a bit of an identity shift. As my program chair, Dr. Susan Lahey, told my cohort during orientation, you need to be open to allowing the program to change you. She was right.

If anyone enters a Ph.D. program with the illusion that they are simply going to polish a skill, they will be in for a rude awakening. Ph.D. programs focus on research-based knowledge, which means immersing oneself in ever-growing scholarship and findings. That means not just wading through the field but helping sow part of it.

When I entered the program at Trevecca Nazarene University, I was twenty years away from my master's program and working in a college as a Vice-President of Student Affairs. While I was in the program, my college was acquired, I lost my job of twenty years, and my ex-husband committed suicide. What saved me from the trauma of these life-altering events was the new self I was forming around my studies. The comradery of supportive fellow students, my close friends, and the help of caring faculty made my transitions easier; however, what helped most was the growing certainty in myself that I was on the right path and building an identity more resonant with my core values and my innate abilities. But even with those life events driving me towards myself, I did not recognize the change for quite some time.

Within the first year of Trevecca's program, students were asked to find a subject that interested them, to identify a measure, and to report on its validity and reliability. I have always been an avid runner, and I believed that the benefits I received for my physical and mental health through exercise could be useful for other LPCs and even their patients. So, I decided that the salutogenic qualities of exercise would be a pillar in my dissertation, and I selected the International Physical Activities Questionnaire (IPAQ) as the instrument I would use to measure physical activity. With this in mind, I wrote my paper for the course on the effect of physical exercise on physical and mental health and reviewed the IPAQ, which seemed to have great reliability and validity across different national, ethnic, racial, and socio-economic groups.

I was excited to write my dissertation and prove (or rather suggest) to the world that physical exercise was a great self-care practice. Counselors already think so since over 70% are reported to exercise. Excitedly, I looked at the results of my surveys. No significant relationship existed between the energy expended in exercise and the mental health of counselors. None. My world came crashing down. Darn knowledge!

I went back to the study of the instrument and noticed that it really had not been as valid or reliable as I had thought. As one test of the validity of the measure, researchers had given several groups accelerometers to measure their physical activity for a week and then had given those groups the IPAQ to self-report on the vigor, duration, and frequency of their physical activity over the same period. A comparison of the results showed important limitations in the IPAQ. Ok. I had missed that. I had missed that because in my first year, I had not read very carefully and because, yes, I wanted the instrument to be good.

Luckily, in my dissertation, I had also asked questions about whether counselors who reported positive physical activity, regardless of vigor, duration, or frequency, also experienced a better sense of well-being. The answer was "yes." The result, of course, had nothing to do with exercise *per se*. I was not completely wrong, but I had been thinking about physical activity incorrectly, based in large part on my own experience and my own bias. In his essay "On Magic in Medicine," Dr. Lewis Thomas notes that when he examined the research behind the recommendation that people should exercise, taking a long drive in the country was included. So, I was disappointed, of course, that my initial idea had been dismantled. Clearly, I now knew too much.

At precisely the moment when I tried to puzzle out why what I wanted to be the case was not the case, it hit me. I was a different person from the person who had begun the program. I thought more clearly; I was more canny and more inclined to get to the bottom of a subject rather than skim along the top. I had matured and grown in ways that felt right and even familiar and comfortable, but also in ways that I would not have anticipated at the beginning of my program. Don't worry. I still believe in exercise. I am sure it works. I am just not sure how.

Will I ever devote my life to research? No. I am satisfied to practice my profession and know that my patients are better because of what I have learned, what I have discovered about myself, and what those experiences have done to shape me. I am grateful that researchers are out there helping make me a better practitioner and, as a result, helping my patients. I just hope that one of them will help figure out why exercise seems to make me, and others, feel better. Then, I would find knowledge a little less disappointing.

Regional Spotlight: Upper East Tennessee



We serve the Northeast region of Tennessee, including the Bristol, Johnson City, Kingsport, and Greeneville areas. Currently, we are working to

expand our membership and have been reaching out to the mental health community in a broader way. We plan on holding quarterly training, led by experts in our area. We have a lot of great mental health providers here, and it is important to shine a light on their many talents and knowledge in evidence-based practice and understanding of the field of counseling. We are working on bridging the gap between community mental health and private practice to allow for increased networking opportunities. We will continue to engage with educators in our region and strive to expand our relationship with students and mental health programs while encouraging student membership in the TLPCA.

– Hunter Cook & Kendra Cook,
Upper East Representatives

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June 10 & 11, 2021

The 2021 Counseling and Therapy Summit will be held virtually on Thursday, June 10, and Friday, June 11, 2021.

The TLPCA annual conference offers mental health professionals the opportunity to earn continuing education credits designed to meet requirements for professional licensure and/or certifications. Summit attendees will be able to earn up to 12 hours of CEs by attending both days of the conference.

Registration Rates

<https://tlpca.net/annual-conference/2021-summit-registration-payment/>

- **Members**
 - Full conference: \$150
 - Pre-conference: \$45
 - Friday-only: \$100
- **Student & Retired Members**
 - Full conference: \$50
 - Pre-conference: \$25
 - Friday-only: \$35
- **Non-Members**
 - Full conference: \$180
 - Pre-conference: \$60
 - Friday-only: \$130

Keynote



Irina Diyankova, Ph.D., Licensed Psychologist and HSP, certified IFS therapist, is a psychologist in private practice in Knoxville, TN. She specializes in the treatment of complex and developmental trauma in adults and adolescents. In her integrative approach, she combines neuroscience, IFS, and yoga. Dr. Diyankova earned a master's degree in clinical psychology from Moscow State University in Russia in 1994 and a Ph.D. in counseling psychology from Iowa State University in 2008. She trained extensively in the field of trauma treatment. She also completed all three levels of IFS trainings and served as a program assistant several times. She has also conducted continuing education workshops on trauma treatment, neuroscience, IFS, and yoga on her own, as well as for PESI and Vyne Education.

Pre-Conference Sessions

“What Can the IFS Model Offer to the Treatment of Complex Trauma?” – Irina Diyankova

In this 3 hour-long workshop, the basics of the IFS (Internal Family Systems) model will be discussed. Through experiential exercises, participants will have an opportunity to apply some of those concepts to themselves. In the second part of the workshop, we will focus on conceptualizing and treating trauma from an IFS perspective.

Objectives:

- define and examine major concepts of IFS, including multiplicity of mind, parts, Self
- describe internal relationships among parts in the trauma survivor's system, including alliances, hierarchies, and polarizations
- explain how IFS approaches trauma
- explore one's own professional parts



“Distance Counseling and Supervision: Ethical, Legal, and Practical Considerations for Counselors”

– Jennifer Nivin Williamson & Daniel G. Williamson

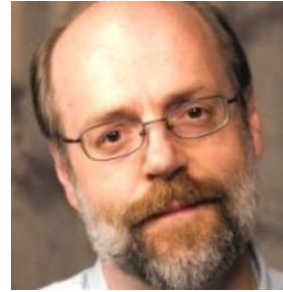
This pre-conference workshop explores the emerging field of tele-behavioral health and supervision presented by editors/ authors from the new ACA book titled *Distance Counseling and Supervision: A Guide for Mental Health Clinicians*. The session will explore ethical, legal, and risk management considerations, practical and technological issues, regulations and licensure, generational issues, screening, contracts, and supervisory considerations.

Prior to the Covid-19 pandemic, many counselors were reluctant to engage in counseling sessions via technology; however, the last year has thrust the profession rapidly into a new age. In an effort to support and serve clients and supervisees, counselors from all backgrounds, ages, and demographics have utilized technology. Licensure boards and insurance companies have made accommodations that have not been previously enjoyed. Counselors are moving from a position of emergency action into a position of seeking best practice. This pre-conference workshop will provide an overview of the practice of technology-assisted counseling and supervision. The presenters will discuss their areas of expertise and the lessons they have learned along the way. The session will explore ethical, legal, and risk management considerations, practical and technological issues, regulations and licensure, generational issues, screening, contracts, and supervisory considerations.

Objectives:

- This session will explore the opportunities in tele-behavioral health and supervision.

- This session will identify key ethical, legal, practical, and risk management considerations.
- This session will explore the possibilities for the future of distance counseling and supervision.



“Recovery and Meaning Making in Serious Mental Illness: An Introduction to Metacognition Reflection and Insight Therapy” –

Paul Lysaker

Psychosis is a mental health condition defined by difficulties making sense of one’s own thoughts and emotions, feeling connected to others and having a sense of belonging to one’s community. One phenomenon that may contribute to these problems is metacognitive deficits, which interfere with persons forming cohesive ideas about themselves and others and their place in the larger world. This presentation will describe recent research that has sought to define and measure metacognitive deficits in psychosis and to develop counseling methods, which may address these kinds of deficits and promote recovery from psychosis.

Objectives:

- Participants will be able to describe how metacognition allows persons to form a cohesive sense of self.
- Participants will be able to describe at least two ways deficits in metacognition may making living with psychosis difficult.
- Participants will be able to name at least two different ways in which improvement in metacognitive capacity might help adults diagnosed with serious mental illness move towards recovery.



**“Ethics,
Multiculturalism, and
Social Justice” –**

Perry C. Francis

In the last 10 years, we have seen an explosion in the awareness of social justice issues within the field of mental health. Access to services, multicultural issues, values debates, denial of services, and socio-economic issues have all been raised in ethical and legal debates, legislation, and standards of practice. Using the Multicultural and Social Justice Counseling Competencies (MSJCC) as a foundation, we will explore how the 2014 ACA Code of Ethics and the 2020 AMHCA Code of Ethics address social justice, advocacy, and standards of practice.

Objectives:

- List the major components to the MSJCC and apply them to the 2014 ACA Code of Ethics & 2020 AMHCA Code of Ethics.
- Analyze legal and ethical arguments within MSJCC and apply them to case studies and standards of practice.
- Apply the 2014 ACA Code of Ethics, the 2020 AMHCA Code of Ethics, and MSJCC to advocacy efforts in legislative forums, agency policies, and standards of care.
- Describe the concept of a “moral injury” and its application to competent practice.
- Create an ethical remediation plan for supervisees struggling with moral and values conflicts.



**“Working with Suicidal
Clients: New Trends,
Evidenced-Based
Assessments, and
Malpractice
Avoidance” –**

Jason McGlothlin

Working with suicidal clients has been found to be one of the most difficult and anxiety-producing aspects of counseling. It has also been shown to produce the highest number of cases of malpractice and litigation within the mental health field. Given all of this, along with the intricacies of the pandemic, this presentation contextualizes suicide assessment and treatment prior to the pandemic, during the pandemic, and post-pandemic. The presenter will describe new trends in suicidology, ways to protect clinicians against malpractice, and ways in which the pandemic has altered assessing and treating suicidality. Furthermore, an evidenced-based, comprehensive model for suicide assessment will be presented based on a study of nearly 100,000 suicidal individuals. Attendees will also have the opportunity to consider ways to adopt new suicide assessments and treatments in their own current and future practice.

Objectives:

- Attendees will be able to use ethical practices when working with suicidal clients during and after the pandemic.
- Attendees will contextualize their own suicide assessment practices and adopt new skills to avoid malpractice.
- Attendees will discuss ways to alter their own practice to incorporate cutting-edge suicide assessment and treatment techniques.

TLPCA Membership Benefits



Katlyn Wyatt

As a previous student member and a current professional member of TLPCA, I can certainly speak to the many benefits that membership offers. First and foremost, being a member of TLPCA provides connections and professional networking opportunities. As a member, you have access to board members and other students and professionals throughout

the state of Tennessee. Whether you are a novice or an experienced professional, this field may at times feel isolating or leave you with unanswered questions. Having access to board members and licensed professionals and access to the TLPCA newsletter that speaks to current issues and provides helpful clinical information has proven invaluable for growing, learning, and adapting in this field.

Membership also allows you to use your voice by advocating for legislative causes, both at the federal and state levels, while concurrently helping you monitor legislative issues in the field. Being a member also gives you access to our annual conference at a reduced fee while providing accessibility to webinars for professional development and continuing education. Furthermore, membership is an essential part of your developing professional identity within the community. It, thus, helps you stand out to employers as you transition from a student to a professional in the field of counseling.

Overall, as one can see, there are several benefits for TLPCA membership, about some of which I have spoken. I would also like to say this, being a part of a professional association shows dedication: dedication towards your clients, the profession, and your development as a professional. So, when you are ready, we are here—come and join us, hopefully, today!

AMHCA Affiliation



Michael Pilcher

During my tenure as both the TLPCA 2019-2020 President and 2020-2021 Past President, it has been and continues to be my distinct honor to serve clinical mental health counselors (CMHCs) and stakeholders. Most importantly, it has been my privilege to advocate for those that entrust their behavioral healthcare needs to us. Furthermore, I am grateful for an Executive Board rallying behind my

decision to focus on one important mission while serving—licensure portability. While reciprocity and endorsement are not far behind regarding my public service passion, it has become abundantly clear that our field lacks the essential mobility of our license.

Due to this concern, several great counseling organizations have made it possible for CMHCs to make substantial strides in the past few years. Namely, the American Mental Health Counselors Association (AMHCA)—in conjunction with the American Association of State Counseling Boards, the National Board for Certified Counselors, and the Association of Counselor Education and Supervision—remains a driving force to educate the public and our professional membership on the rationale and purpose for rule changes and legislative processes that influence portability.

“Follow” TLPCA on Social Media!

Facebook	@TNLPCA
Instagram	@TLPCA
Twitter	@TLPCA3

Social Justice

From the desk of the Social Justice Committee Co-Chairs, Shannon Black and Dr. Michelle Stevens...

The Social Justice Committee would like to offer an opportunity to continue to increase our collective cultural competency by sharing information aimed at raising our awareness, knowledge, and application of skills. We would like to share ethical, empathy-driven, and relevant information related to working with our clients. Some of these concepts may be very familiar to some of us while some may be new or unfamiliar. Nonetheless, we hope that the information will help to connect us with each other and our clients alike.

The ALGBTIC Competencies for Counseling LGBQIQA Individuals helps to guide our work with our clients by ensuring that our LBBQIQA clients feel safe, supported, and heard/ seen. This safety can be reflected in paperwork, language used, and being aware of outdated and offensive terms. An example of ensuring safety and inclusion includes making sure that all clinical-related paperwork and intake processes are inclusive and affirmative of LGBQQ individuals (e.g., including “partnered” in relationship status questions and allowing the individual to write in their gender as opposed to checking male or female).

Additionally, counselors may ensure their client software platform (i.e., Simple Practice, etc.) and/ or their intake paperwork offers places for clients to provide clarification of their gender, relationship status, preferred name, orientation, and pronouns, taking into account the fact that a minor or other vulnerable individual may not feel safe disclosing their authentic information on forms due to parental/ guardian disapproval.

Speaking of inclusive language... there are terms that some of us are still learning. Selected terms include:

- AFAB: “assigned female at birth”
- AMAB: “assigned male at birth”
- ACE: “asexual”
- “Gray/ Gray-gender”: a person without a strong gender affiliation, partially outside the gender binary

There are also terms that are harmful and should be retired. These terms include:

- “Transgendered” : Drop the “-ed” please.
- “Queer” : ...unless the person identifies as being part of the queer community and prefers that terminology.
- “Lifestyle”: Golfing is a lifestyle. Who you love or how you identify is not.

Actions you can take today to ally with the LBGQTQI community:

The Tennessee Equality Project (TEP) works hard to keep watch for legislative bills that will harm our LGBTQI clients, lobbies the legislative bodies, registers voters, and provides educational opportunities around the state.

1) Make potential LGBTQI clients aware of your affirming position by signing your business up for TEP’s “Tennessee Open For Business” program, which recognizes companies that do not discriminate against their employees or customers on the basis of sexual orientation or gender identity:

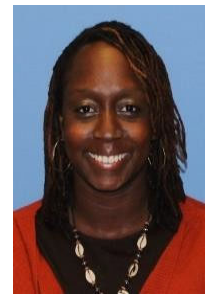
https://www.tnep.org/tennessee_open_for_business

2) Join TEP’s Action Alert Email List, <https://www.tnep.org/join>, to stay informed about opportunities to advocate for your LGBTQI clients.

Learning Along with You,



Shannon



Michelle

&



Legislative Corner

TLPCA had a very productive legislative session, thanks in part to our lobbyist, Jenny Ford!

Jenny Ford

TLPCA and Jenny were instrumental in helping change the telehealth legislation to include graduate students and post-graduate, pre-licensed mental health professionals under supervision as approved providers of telehealth services.

On April 20, 2021, Governor Bill Lee signed the bill making it Public Chapter 179:

<https://publications.tnsosfiles.com/acts/112/public/pc0179.pdf>

TLPCA also sponsored the Interstate Compact for License Portability Act to provide more opportunities for portability for counselors:

<https://www.capitol.tn.gov/Bills/112/Fiscal/FM1042.pdf>

SB 1027 passed the Senate on April 14, 2021 and will be submitted to the House next year. If passed, Tennessee will be a part of the states that develop the rules and regulations related to the Compact.

TLPCA continues to advocate for our profession and those we serve. Without your membership, we would not be able to continue our efforts to move our profession forward!

Legislative Spotlight: Interstate Counseling Compact

TLPCA is leading the charge in Tennessee for the authorization of the Interstate Counseling Compact!

The Interstate Counseling Compact is a potential agreement among states, granting licensed professional counselors who reside in a compact member state to practice in other member states without multiple licenses.

Professional counselors who meet uniform licensure requirements would be able to quickly acquire the “privilege to practice,” which is the equivalent to having a license to practice in another state.

The Compact also calls for the creation of a shared interstate data system, allowing for near-instant verification of licensure. Thus, the privilege to practice could be granted in a few moments time.

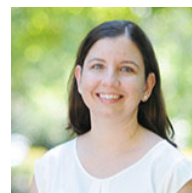
This data sharing would also enhance the public’s protection as information on investigations of misconduct and disciplinary action would be commonly available.

Furthermore, the Compact would benefit counselors by ensuring them more freedom of movement, dramatically reducing the time needed to receive authorization to practice in a new state. In addition, the Compact would create new opportunities for counselors to practice in additional markets.

Moreover, continuity of care for clients would be made possible when counselors or clients travel or relocate.

The Compact will go into effect once enacted into law by ten states. This could happen as soon as 2022.

For more information, visit
<https://counselingcompact.org/>



Natalie Trice is the TLPCA Newsletter Chair. Natalie earned a PhD in English and taught as an English professor for 10 years. She is currently a student in the Ed. S. Professional Counseling program at MTSU.