Certified Clinical Mental Health Counselor (CCMHC) Required Coursework

The Certified Clinical Mental Health Counselor (CCMHC) certification requires that all applicants must currently hold the National Certified Counselor (NCC). Applicants must have completed a total of at least 60 semester or 90 quarter hours of graduate-level academic credit in counseling from a regionally accredited program.

The descriptions below will help you determine which classes from your graduate program fulfill the coursework content areas required for the CCMHC. All courses except supervised field experience must carry at least two semester or three quarter hours of graduate-level credit. Please note that a single course cannot fulfill two content areas, and the courses must not have been applied to your NCC coursework requirement.

Counseling field experience, which includes your internship/practicum, must total at least nine semester or 15 quarter hours of graduate-level credit. If you do not have nine semester or 15 quarter hours of clinical training in supervised field experience, you may make use of one of the following alternative options:

- Six semester or 10 quarter hours of clinical training in supervised experience and a full state license.
- Six semester or 10 quarter hours of clinical training in supervised experience and an additional 120 hours of direct supervision.
- Three semester or five quarter hours of clinical training in supervised experience and 10 continuous years as a fully state-licensed counselor.

### COURSEWORK CONTENT AREAS

**Clinical Diagnosis & Treatment** - You must have taken a course in this content area as outlined below.

*Studies in this area provide an understanding of the following elements:*

a. Evolution of the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the interface between the DSM and International Classification of Diseases (ICD).

b. Use of the DSM decision trees for various diagnostic subgroups.

c. Accepted principles and practices of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the DSM.

d. Role of psychopharmacology in diagnosis and treatment planning; the association of specific categories of mental illnesses to pharmacological agents used for treatment.

e. Treatment planning and methodologies associated with various diagnostic categories.

f. Structuring and conducting psychosocial evaluations and mental status exams.

g. Ethical considerations related to clinical diagnosis.

Additionally, you must have taken courses covering at least three of the following six content areas listed below:

1. **Advanced Clinical Skills**

   *Studies in this area provide an understanding of the following elements:*

a. Advanced skills such as immediacy, challenge, and self-disclosure.

b. Counseling skills and paradigms.

c. Approaches to intake formats and the criteria for their appropriate use.

d. Intake interviewing, mental status evaluation, and biopsychological and mental health history.

e. Psychological assessment for treatment planning; strategies for selecting, administering, and interpreting assessment and evaluation instruments and techniques in counseling.

f. Caseload management.

g. Interfacing with integrated behavioral health care professionals and the legal system; personal and professional options in working within the current managed care framework.

h. Ethical considerations.
2. Human Sexuality

*Studies in this area provide an understanding of the following elements:*

a. Psychological, social, and emotional issues for individuals and couples associated with sexual functioning.
b. Expression of human sexuality and intimacy across the lifespan.
c. Issues related to sexual orientation and gender identity; gender differences specific to sexual functioning and the impact of gender role expectations on sexual functioning.
d. Sexual myths, variations in sexual behavior, and common sexual and relationship concerns/disorders; various therapeutic approaches.
e. Common questions and treatment issues that helping professionals encounter in practice related to sexuality issues.
f. Systemic interactions and main treatment approaches to sex counseling and therapy with special problems.
g. Ethical considerations.

3. Clinical Counseling with Special Populations

*Studies in this area provide an understanding of the following elements:*

a. Needs of and treatment for special consumer populations such as persons of diversity, children and families, couples, the elderly, persons with physical disabilities, sexual minorities, developmental disabilities, and cultural and ethnic minorities.
b. Role of ethical and culturally competent counseling with special populations in schools, agency, and other clinical settings.
c. Reporting expectations of mandated reporters.
d. Impact of stereotypes, prejudice, discrimination, the dynamics of power and privilege, and interlocking systems of oppression on clients/students and the counseling process.
e. Treatment issues for special populations; unique problems of populations at risk.
f. Risk factors, protective factors, warning signs, chronic risk, emergency risk, and demographic markers.
g. Ethical considerations.

4. Family/Couples Counseling

*Studies in this area provide an understanding of the following elements:*

a. Historical development of family/couples counseling; issues related to the sociology of the family, family phenomenology, and family of origin theories.
b. Theories and models of family/couples counseling, including family and system dynamics.
c. Assessments and case conceptualizations from a systems perspective that are relevant to working with families and couples.
d. Role of the family/couples counselor when interacting with clients.
e. Techniques used in counseling sessions to foster wellness; implementation of interventions and treatment plans for clients.
f. Common consultation topics such as career development, life changes, gender roles, and physical and mental health; impact of human sexuality, aging, intergenerational influences, interpersonal violence, employment, and trauma when counseling families and couples.
g. Ethical and legal considerations in family/couples counseling.
5. Addictions/Substance Abuse Counseling

*Studies in this area provide an understanding of the following elements:*

a. Historical development in addictions counseling; issues related to the etiology and treatment of substance use disorders.
b. Theories and models of addiction counseling; implementing a multi-modal/multi-method approach to diagnosing and assessing addictive and comorbid disorders.
c. Major classifications of psychotropic drugs of abuse, typical routes of administration, and brief descriptions of effects.
e. Principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning; identification of sociocultural impacts upon the development and implementation of treatment models.
f. Etiological models of substance abuse and dependence, including genetic and biological models, psychological models, sociocultural models, and the biopsychosocial model.
g. Neurological, behavioral, psychological, physical, and social effects of psychoactive substances and addictive disorders on the user.
h. Psychological tests and assessments specific to addiction counseling; the use of alcohol and other drug abuse screening and assessment tools and procedures.
i. Professional issues in addictions counseling.
j. Ethical considerations.

6. Counseling for Trauma, Violence, or Abuse

*Studies in this area provide an understanding of some of the following elements:*

a. Impact of crises, disasters, sexual assault, and other trauma-causing events on individuals and communities.
b. Treatment of trauma-related disorders.
c. Examination of trauma through the impact on the brain regions and on memory, as well as variations of emotional regulation and somatic responses.
d. Counseling perspectives and practices for children and adolescents experiencing trauma, violence, or abuse.
e. Counseling perspectives and practices for families experiencing trauma, violence, or abuse.
f. Function and operations of emergency management systems within clinical mental health agencies and in the community.
g. Legal considerations in dealing with children, adolescents, and/or families experiencing trauma, violence, or abuse.
h. Ethical considerations.