NBCC MAKES PROGRESS ON MILITARY AGENDA

NBCC has been an advocate on behalf of counselors who are employed by the branches of the military under the Department of Defense (DOD) for some time. However, our efforts have gained momentum lately, with the release of studies and reports highlighting the dire need for mental health services to troops currently serving in and returning from Iraq.

Congressional testimony on July 7, 2004, spotlighted the serious mental health issues facing service men and women, their families, and their communities and provided a timely opportunity for NBCC to contact the members of the House and Senate Armed Services Committees. NBCC took this opportunity to make introductions with principal committee members and staff, provide background information on the counseling profession, and begin a discussion regarding the dilemma of the current military healthcare system, which is not adequately addressing soldiers’

SEXUAL ADDICTION STUDY PINPOINTS TRAINING NEEDS FOR COUNSELORS

By W. Bryce Hagedorn, PhD, LMHC, NCC, MAC

During the summer of 2003, a study investigating the necessity of educating counselors on the realities of sexual addiction was completed. By surveying three distinct groups of professional addiction clinicians, counseling competencies for the treatment of sexually addicted clients were identified. With the instrumental support of NBCC, the majority of participants were those holding NBCC’s Master Addictions Counselor (MAC) credential (65%). In addition to the startling conclusions drawn from this study, valuable data regarding NBCC MACs was gathered. Given the readership of The National Certified Counselor, I thought it most pertinent to explore the following three topics: (a) the purpose and primary
mental health care needs.

Our introductory letter explained that TRICARE beneficiaries are not given direct access to NCCs. Physician referral and supervision is required in order for counselors to provide services to the military population, which limits the pool of mental health professionals available to soldiers experiencing mental health problems, thereby denying access to qualified professionals with the training and certification needed to specifically assist them. Certified social workers and psychologists do not encounter these same barriers.

Another issue for counselors is restrictive hiring policies instituted by branches of the Armed Services in the year 2000. Position descriptions written subsequently state that LPCs are eligible to apply but only if they hold a master's degree in social work, effectively eliminating qualified counselors from the applicant pool. As a result, DOD positions are going unfilled, and counselors who were already employed by the military prior to the time these policies were instituted cannot advance or even transfer to a different location. One counselor employed in a military facility described the conditions as a "glass box," referring to the fact that neither transfers nor promotions are an option. Because of these restrictions, many experienced counselors who were previously dedicated to their work with troops and their families have been forced to leave the military. Ironically, many of these counselors have gone into private practice, providing service based on their state regulated counselor credentials, as sanctioned by the federal government.

At this time, NBCC’s Government Relations team in Washington and the staffs of the Armed Services Committees are meeting to further discuss the issue. NBCC’s goal is for professional counselors to be included in this legislation designed to alleviate the artificial shortage of mental health providers available to soldiers and their families.

In addition to working on Capitol Hill, NBCC will appeal to the Office of Personnel Management about the classification of counselors. Currently counselors fall into the General Service (GS) 0101 series. This series also includes a variety of non-mental health professionals and paraprofessionals (such as biologists, economists, etc.), while social workers and psychologists are in the GS 0180 series (0180 for psychologists and 0185 for social workers). At this time, the goal is the creation of a designated GS series for the counseling profession. The draft of the appeal will include classification levels that cover entry level counselors through the clinical supervisory level.

NBCC believes that these efforts and the working relationships established through them will help raise awareness of the strength of the counseling profession, particularly with those who create legislation that affects our ability to progress professionally.
CACREP Endorses NCSC
The Council for the Accreditation of Counseling and Related Educational Programs (CACREP) recently endorsed the National Certified School Counselor (NCSC) credential as the national certification of choice for school counseling professionals. Citing the fact that the NCSC is the only national credential for school counselors requiring a master’s degree and the NCSC’s commitment to CACREP’s core curriculum as a credentialing foundation, the organization noted in a press release that “CACREP has always viewed NBCC as a committed partner in promoting high levels of professionalism for all counselors, including school counselors.”

ACES Endorses Master’s Trained School Counselors
In a letter to NBCC, Donna Henderson, PhD, LPC, NCC, president of the Association for Counselor Education and Supervision (ACES), underscored the necessity for school counselors to be trained at the master’s level. Henderson cited the specialized educational and clinical training denoted by the master’s degree and the importance of consistent standards for credentialing school counselors. She pointed out that ACES members share a goal of assisting students in meeting professional standards along with criteria for licensure and certification as school counselors.

Note: For the entire text of the CACREP release and the ACES letter, visit NBCC’s Web site, www.nbcc.org (click on e-news).

Mississippi Legislation Providing School Counselor Pay Stipend Updated
School counselors in Mississippi have been successful in their efforts to amend legislation that would have ended the $6,000 pay stipend received by NCSCs employed in Mississippi public schools. Mississippi Governor Barbour signed the bill into law, benefiting more than 250 current NCSCs, as well as school counselors in Mississippi who choose to obtain the NCSC credential in the future.

The legislation originally stated that once the National Board for Professional Teaching Standards (NBPTS) implemented a credentialing process for obtaining certification, this would replace the NCSC as the credential required to obtain a pay stipend. The Mississippi Counselors’ Political Action Committee (MCPAC), together with the Mississippi Counseling Association (MCA) and the Mississippi School Counselors Association (MSCA), were at the forefront of the endeavor to amend the law, protecting current NCSC certificants from undergoing a second credentialing process and maintaining the NCSC as the designated credential required for the pay stipend.

Mississippi’s school counselors and other concerned citizens phoned, sent letters, and personally visited their legislators to request their assistance. They educated their representatives regarding all that is involved in obtaining and holding the National Certified Counselor (NCC) and NCSC credentials, as well as regarding their commitment to Mississippi’s children and to the communities in which they live and work. As a result, almost every vote taken about this legislation was unanimous.

Originally, the law regarding salary supplementation for school counselors specified that the NCSC would be the standard for supplements until the NBPTS implemented a credentialing process for school counselors. The first NBPTS certificants under the school counselor certification process participated in assessment processes this year. In order to honor the specifications that were in place prior to the amendment, school counselors in Mississippi who began work toward obtaining the teacher board’s certification between June 1, 2003, and June 30, 2004, and who complete the requirements and acquire the teacher board certification will also be entitled to the pay supplement.

Nevada Providing Pay Incentive for NCSCs
Practicing school counselors in Nevada who hold an NCSC credential are eligible for a 5 percent pay incentive this academic year. The legislature will decide during the next session (which runs February 7–June 7, 2005) whether it will continue this funding for future years. With the election now over, Nevada NCCs and NCSCs are encouraged to thank the people who made this possible and encourage them to support continuing this incentive. We include NCCs in this because this type of recognition for NCSCs is a positive step for all NCCs.
NBCC TO HOST STATE BOARD MEETING AUGUST 5–6

NBCC will host the 6th meeting of state counselor credentialing boards August 5–6, 2005. One member of each state counselor credentialing board using an NBCC examination will be invited to attend, all expenses paid.

The meeting will provide an opportunity for state board representatives and/or staff to network and to learn from one another. NBCC staff will present on topics including reciprocity, assessment, and other issues in professional credentialing.

Invitations will be sent out after the first of the year.

DISCIPLINARY ACTIONS

The following NCCs were adjudicated and sanctioned by NBCC® for violating the NBCC Code of Ethics.

Paul Benfield, #21223, placed on one-year probation, public reprimand, and supervision for one year
Gayle Coons, #29644, placed on one-year probation and public reprimand
Kevin Formolo, #83672, placed on probation for three years
Toshia Johnson, #76979, placed on one-year probation
Dr. Lucy Moore, #28227, placed on probation for two years and monthly supervision for one year
Gregory Prince, #90436, placed on one-year probation

SCHOOL COUNSELING UPDATES

Grass-roots State Initiatives Promote Benefits for NCSCs

State counseling associations and school counselor associations in several states have undertaken initiatives to educate their legislators about the NCSC credential, and to enlist sponsorship for legislation for the purpose of attaining parity with school counselors who obtain the NBPTS teacher board certification.

Counselors certified by the teacher board will be eligible to receive salary supplements for the 2005–2006 academic year, if their state or locality has enacted laws or rulings supporting this type of supplementation. If your state counseling association or state school counselor association is interested in working to achieve this same recognition for NCSCs in their state, NBCC can provide information to support the effort.

Contact Rita Maloy, special projects administrator (maloy@nbcc.org), or Wendi Schweiger, research associate and counselor in residence (schweiger@nbcc.org), for more information.

The Making of an Assessment—The NCSCE

The procedures used by NBCC for assessment development, maintenance, and security help ensure a valid certification program and are acknowledged nationwide as the standard for the counseling profession. NBCC employed these procedures when it created the National Certified School Counselor Examination (NCSCE).

Linda Foster, PhD, NCC, NCSC, chaired the NCSCE Examinations Development Committee during the initial creation of this assessment instrument. She also possesses a thorough knowledge of both the ASCA National Model for School Counseling Programs (NMSCP) and the National Standards for School Counseling Programs (NSSCP). She has authored a study addressing the issue of the inclusion of the NMSCP and the NSSCP in NBCC’s assessment instrument for school counselors.

The study illuminates how the assessment development process incorporates the NMSCP and NSSCP throughout. While Foster’s study is a summary and provides a skeletal view of the components of the process, in light of the ASCA National Model and the National Standards, it attests to the strength of the assessment component of a thorough credentialing process, and to the commitment to professional standards.

Foster’s report is available in its entirety on NBCC’s Web site, www.nbcc.org, in the e-news section.

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Leslie Armeniox, NCC, of Greensboro, NC, was recently awarded the Distinguished Practitioner Award by the University of North Carolina at Greensboro (UNCG) Department of Counseling and Educational Development.

Casey Barrio, NCC, and Marie Shoffner, NCC, NCSC, both of Greensboro, NC, and Deborah Newsome, NCC, of Winston-Salem, NC, received the Chi Sigma Outstanding Research Award at the American Counseling Association (ACA) annual conference. They received both the Chi Sigma Iota International Award, as well as the Upsilon Nu Chi Chapter Award. Barrio also received a Marian Pope Franklin Award from UNCG’s Department of Counseling and Educational Development.

Jeanne Bleuer, NCC, and Garry Walz, NCC, both of Tucson, AZ, and co-directors of the former ERIC/CASS and adjunct faculty members in UNCG’s Department of Counselor Education, received the Arthur A. Hitchcock Distinguished Professional Service Award at the ACA annual conference.

L. DiAnne Borders, of Greensboro, NC, has been named a UNCG Excellence Professor. A member of the Counseling and Educational Development faculty since 1987, Borders is also co-author of the New Handbook of Counseling Supervision and Evaluation of School Counseling Programs.

Craig Cashwell, NCC, of Kernersville, NC, was recently awarded the Chi Sigma Iota "Spotlight" Service Award. He is a professor in the Department of Counseling and Educational Development at UNCG.

Catharine Chang, NCC, of Atlanta, GA, and Jane E. Myers, NCC, of Greensboro, NC, received the Chi Sigma Iota ACA Research Award at the annual ACA conference. In addition to receiving the research award, Myers also was a recipient of the Distinguished Leadership Award.

Sharon Cheston, NCC, of Cockeysville, MD, received ACA’s Carl D. Perkins Government Relations Award at the 2004 annual conference. Cheston is director of doctoral admissions and a professor at Loyola College in Maryland.

Bradley T. Erford, NCC, of Shrewsbury, PA, received ACA’s Professional Development Award at the 2004 annual conference. He is associate professor of education in the School Counseling Program at Loyola College.

Kamlesh Mehrotra, NCC, of Glen Ridge, NJ, received a Special Service Award from the Association of Indians in America, NJ (AIA-NJ) for volunteer career consultation. Mehrotra provided an additional three free days of career consultation after a career clinic. She has served as AIA-NJ Youth Awards Chair for a number of years.

Spencer G. Niles, NCC, of University Park, PA, received the ACA Extended Research Award. He is professor-in-charge of Counselor Education Programs and coordinator of the Doctoral Program in Counselor Education at Pennsylvania State University.

Matthew Shurts, NCC, of Milford, NJ, received the Chi Sigma Iota Outstanding Doctoral Level Student Award at the ACA conference. Shurts is an assistant professor in the Department of Counseling, Human Development, and Educational Leadership at Montclair State University in New Jersey.

Jeanne H. Stec, NCC, of Greensboro, NC, was named Outstanding Doctoral Student during UNCG’s Annual Departmental Awards Ceremony.

Nicholas Vacc, NCC, posthumously received the Gilbert and Kathleen Wrenn Award for a Humanitarian and Caring Person at this year’s ACA conference. Nancy Vacc attended the conference and accepted the award.

Carrie Wachter, NCC, of Greensboro, NC, was named Chi Sigma Iota International Fellow. Wachter is a recent graduate of UNCG’s master’s program and a current doctoral student there.
NEW NBCC AND CCE BOARD MEMBERS AND OFFICERS NAMED

The National Board for Certified Counselor, Inc., and Affiliates, in Greensboro, NC, elected new members and officers to the Board of Directors at the June meeting. Linda H. Foster, PhD, NCC, NCSC, LPC; Cynthia Jordan, EdD, NCC, NCSC, LPC; and Kurt Kraus, EdD, NCC, ACS, LPC, will each serve three-year terms on the board. In addition, Richard Percy, EdD, NCC, LPC, LMFC, was elected to the board for NBCC’s affiliate organization, the Center for Credentialing and Education, Inc. (CCE)

The new NBCC Board electees replace outgoing board members Charles “Rick” Gressard and Wayne Lanning. The newly elected officers are: Thomas M. Collins, PhD, NCC, ACS, LPC, chair; M. Sylvia Fernandez, PhD, NCC, NCSC, ACS, LPC, chair-elect; and Dawna Jackson-Sanford, MCoun, NCC, LCPC, LMFT, secretary.

Foster earned her doctorate at Mississippi State University. She is a school counselor at McAdory High School in Birmingham, AL, and is an adjunct faculty member at the University of West Alabama in Livingston. Jordan is a tenured professor at the University of Tennessee in Memphis, and is director of Counseling Services at Presbyterian Day School in Memphis. She is also certified by the American Red Cross as a Disaster Mental Health Specialist.

Kraus, an associate professor of counseling at Shippensburg University, earned his doctorate at the University of Maine. He is director of the School Counseling Program at Shippensburg, provides volunteer counseling services there, and also provides professional supervision to counselors.

Former NBCC Board Chair Richard Percy was elected to CCE’s board, replacing Harold “Dick” Hackney, who has completed a five-year term. Percy, who lives in Naples, FL, is professor emeritus at Vanderbilt University, and is currently on the faculty of Walden University.

SPECIAL INTERNATIONAL ISSUE DUE OUT IN SPRING 2005

NBCC will publish a Special International Issue of the National Certified Counselor in spring 2005. This special issue will focus on international efforts, bringing you up-to-date on progress that has been made in efforts you’ve read about previously and inform you about some new initiatives that have begun. Word has spread quickly about NBCC’s willingness to be part of a worldwide dialogue regarding the counseling profession, and we are in contact with leaders in the profession from around the globe.

We combined our Fall and Winter publications in order to bring you the Special International Issue. We anticipate a late February/early March publication date for this special issue.
Licensure Law Passes in Hawaii

On July 13, Hawaii Governor Linda Lingle signed SB 2595 into law, an act that regulates both the title and practice of professional counseling in the state of Hawaii. This is the result of five years of hard work by the Hawaii Counseling Association, Sandra Joy Eastlack, and volunteers who put in more than 10,000 hours of volunteer work on this initiative. NBCC congratulates and commends all who worked to see this through, with special kudos to Eastlack.

The law details specifics regarding education, experience, and examinations. The education and experience requirements are much like NBCC’s NCC requirements. Both the National Counselor Examination for Licensure and Certification (NCE) and the National Clinical Mental Health Counseling Examination (NCMHCE) are included as qualifying exams. Individuals who earn Hawaii’s credential will be referred to as “Licensed Mental Health Counselors.” In terms of practice, the law covers “the assessment, diagnosis, and treatment of, and counseling for” mental and emotional disorders, substance abuse, and conduct disorders.

Any qualified applicant for licensure in Hawaii who passed the examination to become a National Certified Counselor (NCC), a Certified Clinical Mental Health Counselor (CCMHC), or Certified Rehabilitation Counselor (CRC) after January 1, 2000, will not be required to retake an examination in order to become an LMHC in Hawaii. Credential holders who tested prior to January 1, 2000, will be required to re-test.

NBCC is working with Eastlack to coordinate special administrations of the NCE or NCMHCE for Hawaii’s NCCs and CRCs who tested for their credential prior to January 1, 2000. If you need information about testing or about study groups, please contact Kai Nao Lilly (lilly@hawaii.edu) at the Hawaii Counseling Association or Eastlack (sandrajoyl@hawaii.rr.com) for details.
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Purpose and Results of the Guiding Study
Given the frequent comorbidity of sexual addiction with other addictive and psychiatric disorders, it is likely that most clinicians, whether or not they work in substance abuse treatment facilities, will encounter sexually addicted clients. The study of professional addiction clinicians found that 93% of those with a graduate degree in the behavioral sciences (i.e., counselor education, psychology, and social work) were not exposed to the realities of sexual addiction during their formal educational experiences.

Given the current estimates of individuals suffering from this addictive disorder (between 17–37 million Americans—greater than the combined number of individuals addicted to both gambling and eating disorders), the purpose of this study was to identify the crucial competencies necessary for the training of current and future counselors. Without additional training or changes to the graduate curriculum addressing addictive disorders, uninformed clinicians commonly miss or misdiagnose the comorbid or underlying sexual addiction in their clients. When the addictive disorder goes unrecognized and untreated, treatment prognoses are poor.

The survey instrument developed for this study, “Essential Competencies for Master’s-Level Clinicians in the Addictions Field,” listed 93 competencies, each followed by a 6-point Likert scale. Respondents were instructed to identify those competencies that they felt were most important for the preparation of master’s-level clinicians. Respondents were asked to rate each competency on a scale from 1 (Not Important) to 6 (Essential). A factor analysis was completed to determine how the competencies each loaded on six treatment domains.

In addition to gathering common demographic data, the questionnaire asked participants to identify their primary clinical certification—Master Addictions Counselor (MAC), Certified Sex Addiction Therapist (CSAT), or Certified Addiction Specialist (CAS). Respondents were further asked for their opinions and perceptions as they related to (a) use of terminology, (b) personal recovery status, (c) training in the assessment and treatment of sexual addiction, (d) sources of professional training and education in sexual addiction, (e) number of graduate courses that discussed sexual addiction, (f) preferences for additional training in sexual addiction, (g) competence in treating sexual addiction, and (h) professional experience with sexual addiction.

Whereas the detailed results of the study are beyond the scope of this article, I did want to note the six factors that were identified by reviewing participant competency ratings. The following areas were identified as crucial to the education of master’s-level clinicians for assessing, treating, and empowering sexually addicted clients:

1. **Family Counseling Interventions**—competencies and skills necessary for working with families where sexual addiction is present, especially since clients often seek counseling as a result of marital or family discord or crises.

2. **Pre-treatment Interventions**—tasks usually performed during an intake interview and screening session to determine the appropriate level of client care.

3. **Sexual Addiction Assessment Interventions**—skills necessary for the initial and ongoing assessment process, which ideally involves a multimodal/multimethod approach, to include the unique challenges in assessing clients for the presence of sexual addiction.

4. **Sexual Addiction Specialty Counseling**—tasks performed on a regular basis when working with sexually addicted clients. These tasks are similar, yet also unique to working with this client population.

5. **Treatment Planning**—competencies that stress the importance of both accurate treatment planning and progress evaluation.

6. **Professional Practice**—competencies involving clinician self-care and professional development as these pertain to the ongoing challenge of working with sexually addicted clients.
For additional information that addresses the needed treatment protocols, psychometric properties of the instrument, and the data pertinent to the entire sample group, review the professional counseling literature for current and future published articles on this subject. However, I do want to highlight those findings most applicable to the readership of this newsletter, and it is to that subject that I now turn.

TRAINING NEEDS OF PROFESSIONAL COUNSELORS

NBCC provided a randomized sample pool that included half of the currently certified MACs. Of this sample pool, given the nature of the testing procedures (Internet-based survey and e-mail correspondence), a total of 238 individuals were sampled. An unprecedented 50% response rate solidified the importance of this topic. Whereas the abbreviated data that I am about to present is drawn from the responses of Master Addiction Counselors, I believe it is necessary for all professional counselors to recognize the need for additional training in this area as they are likely to encounter a sexually addicted client at some point in their career.

The following data was collected on the MAC participants, as it pertains to implied training needs, and is briefly presented here for review:

1. Fifty percent reported little-to-no professional training in the area of sexual addiction.

2. Of those who reported being trained in the area of sexual addiction, 35% received this training on-the-job or through self-study.

3. Almost 50% reported feeling incompetent or that treating sexual addiction was beyond their area of expertise.

4. Nearly 60% reported treating one or more sexually addicted clients per week (this is particularly interesting when one considers the implications of points 1, 2, and 3).

5. Seventy-eight percent noted their need for additional training in assessing and treating sexual addiction.

6. Eighty-two percent noted the need to receive such training through a certificate or seminar/continuing education program.

In reviewing these results, the important thing to keep in mind is that MAC certified clinicians are well educated and trained to work with chemically addicted clients—as a matter of fact, it is due to the dedicated efforts of NBCC that only the most qualified clinicians hold the MAC certification. But given the number of addiction clinicians identified by this study who expressed feelings of inadequacy in treating sexual addiction, there is the need to study more specialized training in addictions. This opinion was expressed by participants who revealed feelings of inadequacy and yet also reported working with sexually addicted clients. In light of this, the profession should be encouraged to explore future needs of counselor training in the area of sexual addiction.

ASSESSING FOR SEXUAL ADDICTION—A TOOL FOR PROFESSIONAL COUNSELORS

Whereas the research and treatment of sexual addiction is the focus of my professional career, I recognize that I am the exception, rather than the rule. In an extensive review of the literature, I was unable to locate a quick and structured interview tool to help clinicians assess for the presence of sexual addiction. Since the purpose of this article has been to underscore the need for increased clinician awareness, I felt it appropriate to include the interview tool that I developed from my professional practice and extensive research in this area. Whereas this assessment instrument has not been empirically tested at this point (a focus of my current research), I have found it to be accurate in determining the severity of clients’ presenting concerns. The following information is adapted from an article that I wrote with Dr. Jerry Juhnke, my mentor and friend, which is soon to be published in the Journal of Addiction and Offender Counselors.

Similar to the CAGE clinical interview developed by Ewing and Rouse to assess for the presence of alcoholism, the acronym WASTE Time was created for working with clients presenting with sexual addiction. Each of the acronym’s letters correspond to one or more of the diagnostic criteria for sexual addiction and can be tailored in such a way so...
SEXUAL ADDICTION STUDY

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as to: 1) avoid resistance and denial, and 2) fit the clinical setting and individual client.

**W — Withdrawal:** “Have you experienced any withdrawal symptoms when you are unable to engage in sexual activities?” Typical responses may include irritability, anxiety, depression, anger, and/or other negative mood states. Clients may also reveal using other behaviors or chemicals to supplement their addiction to sex.

**A — Adverse Consequences:** “Have you experienced any negative or adverse consequences as a result of your sexual behaviors?” Typical responses may include broken relationships, lost career opportunities, financial difficulties, physical injury, and/or psychological trauma. This can lead to a discussion of the activities and life domains that have been reduced or sacrificed for the addictive disorder.

**S – Inability to Stop:** “Have you attempted to cut back, control, or stop your sexual behaviors without success, even when you know that continuing will cause you harm?” Typical responses may include multiple attempts at stopping or controlling the addictive behaviors without success, even when faced with the knowledge that continuing poses a physical or psychological problem.

**T — Tolerance or Intensity:** “Have you found it necessary to increase the amount or intensity of your sexual behaviors to achieve the same effect?” Typical responses may include movement within Levels [e.g., movement from compulsive-like on-line sexual encounters coupled with masturbation to real-life encounters with multiple anonymous partners (examples of Level 1 behaviors)] or between Levels [movement from Level 1 behaviors to compulsive-like voyeurism or exhibitionism (examples of Level 2 behaviors) or from Level 2 behaviors to compulsive-like stalking and/or rape (examples of Level 3 behaviors)]. For a thorough discussion of the three Levels of sexual addiction, read works by Patrick Carnes such as *Out of the Shadows.*

**E — Escape:** “Do you use sexual activity as an escape from negative mood states, such as stress, anxiety, depression, sadness, loneliness, or anger?” Typical responses may include any negative mood state.

**Time (2 Time domains) —**

1. **Time Spent (preparing, engaging, or recovering):** “Have you found yourself spending a lot of time preparing for, engaging in, or recovering from a sexual activity?” Typical responses may include such ritualistic behaviors as cruising all evening in search of a sexual conquest, sexual exercises to increase stamina, or the use of addictive chemicals in preparation for sexual activities.

2. **Time Wasted:** “Have you spent more time and/or more resources on your sexual activities than you intended?” will elicit such typical responses as hours spent on the Internet, loss of sleep due to an entire weekend spent on voyeuristic activities, or a lost paycheck spent on sexual activities.

Clinical practice has demonstrated the efficacy of this assessment tool. An affirmative answer to one of the above questions suggests a strong possibility for the presence of sexual addiction and indicates the need for further assessment as well as an intervention by a trained counselor. An affirmative answer to two or more of the questions indicates a high probability of sexual addiction, warranting immediate intervention by a trained counselor. Typical interventions may include inpatient hospitalization, outpatient counseling, and/or self-help support group attendance.

I want to thank NBCC for its support of my research and for providing a forum for the discussion of issues pertinent to the practice of professional counseling. It is through efforts like this that our profession continues to grow and adapt to the multiple needs of the clients we serve.


The NCC Corner

The NBCC newsletter is sent not only to NCCs but to graduate programs, licensure boards, and Approved Continuing Education Providers. But, this column is especially for National Certified Counselors to remind you of deadlines and to inform you of changes in policies or procedures that may affect your recertification. It takes the place of “Recertification News.” Keep your eye on this spot in the newsletter for information and announcements that are of special interest to NCCs.

- Lists of all approved Continuing Education Providers (ACEPs), Home Study Providers, and approved events on the Web.

To make it easier for NCCs to choose approved continuing education events and home study programs, NBCC maintains lists on the NBCC Web site at www.nbcc.org. Click on NCC Certificants and then on Continuing Education. Although NCCs can take non-approved continuing education, choosing NBCC approved events and programs ensures that they will be accepted by NBCC and perhaps by your state board as well (you must check with your state board to verify). In addition to the lists of approved providers, you will also find the Continuing Education Calendar for the coming four-month period.

- NCCs living in Hawaii. Please note the article on page 7 of this newsletter covering the passage of licensure in Hawaii. There are details about how to make sure you become licensed under the NCC option that exists only until June 2006. Don’t miss out on this historic and time-limited opportunity.

- NCCs who have “Retired-Active Status.” Effective immediately: the “Retired-Active” status option is now being called the “Reduced-Practice” status. The criteria for eligibility remain the same, but the title “Reduce-Practice” more accurately reflects the nature of the status. If you are an NCC and currently hold the Retired-Active status, you may now refer to your status as Reduced-Practice and do not need to contact our office. If you are an NCC who is 75 percent retired, but may still see a few clients or do volunteer work using your NCC credential, please contact the Recertification Department or check our Web site at www.nbcc.org/recert/status.htm if you would like information about changing your certification status.

NCC Network

- Mia Tennenbaum, NCC, of Northbrook, IL, has recently published a newly revised version of her curriculum for teens, “Essential Proteenii: Nourishing Skills for the Teen Spirit!” The program includes expanded lessons on goals, motivation, decision making, knowing one’s self, and managing change, along with new sections in the accompanying student journal to further enhance learning. More information is available at www.MiaSharon.com.

- Connie Robillard and Marcel Duclos, both NCCs and CCMHCS, have co-authored Common Threads: Stories of Life After Trauma. The book takes the reader inside the lives of frightened children through art, poetry, and short stories. “[It] brings us closer to the reality of the far-reaching effects of trauma. At the same time, it is the story of courage, resiliency, and the ability to heal.” For more information, visit www.thebookcommonthreads.com.

Voluntary Audits

The following NCCs have passed the NBCC® Voluntary Audit for special recognition in continuing education. While 100 hours of continuing education are required for recertification, these NCCs have completed and documented more than 130 hours in the five-year certification period. They have received a special certificate citing this achievement and are to be congratulated for their dedication to excellence. NBCC salutes them!

Colleen Alton, Johnson City, NY
Jon A. Bolaski, Shelburne Falls, MA
Josephine Luz Bokowski, St. Augustine, FL
Martin Clifford Coy, Frederick, MD
Edwardlyn E. Crishon, Mobile, AL
Lisa Elam-Schiff, Berlin, MD
Betty Quesenberry Henley, Dublin, VA
Paul A. Johnson, Norcross, GA
Barbara E. Kaplan, Charlotte, NC
Phlaxy L. Rosenman, Yardley, PA

If you are interested in applying for a voluntary audit, go to www.nbcc.org/recert/audit.htm and click on “Download the Voluntary Recognition Audit” form.
AFRICA AND NBCC THANK YOU FOR THE BOOKS

NBCC extends a heartfelt thank you to everyone who sent books to Africa. Professor Davison Munodawafa, of the Guidance, Counseling, and Youth Development Centre in Malawi, reports that the books are being eagerly used by the counsellors and counsellor-trainees volunteering through the centre. The centre’s space is currently limited and additional books should not be sent to Malawi until further notice.

New Book Sharing Focuses on Romania

Our book sharing project in Africa turned out so well, that we are turning to you again to help another country: Romania. Romania needs educational materials to train counselling professionals and trainees in that country. At this time, we ask that you send spare textbooks or other professional books covering counseling and related topics to:

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Two NBCC credentials—the NCC and the MAC—are accredited by the National Commission for Certifying Agencies.