

The Counselor's Voice

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Upcoming Events

March 25, 2011
Ethical Considerations & Practice While Working with Families
3.0 Contact Hours
Hickory, NC

April 4, 2011
Thinking About Ethics
3.0 Contact Hours
Raleigh, NC

April 8, 2011
Thinking About Ethics
3.0 Contact Hours
Greensboro, NC

April 9, 2011
Myths of Christian Counseling
1.0 Contact Hours
New Bern, NC

April 15, 2011
Thinking About Ethics
3.0 Contact Hours
Kannapolis, NC

April 30, 2011
Supervision Workshop
15.0 Contact Hours
New Bern, NC

May 13, 2011
Supervision Workshop
Pending
3.0 Contact Hours
Kannapolis, NC

Visit www.lpcanc.org for event details and to register online.

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Our Association: Welcome to Blue Star Services

By Dianne Taylor Dougherty, MS, CAGS, LPC, NCC



LPCANC Board of Directors is pleased to introduce **Blue Star Services** to our membership and all LPCs in North Carolina. We welcome **George and Debora Steenson** along with their staff as our new association management team and anticipate an energetic and dynamic relationship with Blue Star Services.

Blue Star's office is located in Chapel Hill, North Carolina and serves clients in the southeastern United States. The company was founded in 2007 by George and Debora Steenson, who describe their business in the following way: "Blue Star Services is a full service, client focused association management and conference planning company. The name **Blue Star** was chosen to honor all those that have served in the armed forces of the United States."

Debora has over twenty-five years experience in association management and George over fourteen years. Both serve their community as Rotarians and are also active in church activities. Debora volunteers with Hope Clinic which provides healthcare to people that cannot afford it, and she volunteers with a community based program providing food to those in need. George is a volunteer EMT and a volunteer fire fighter. He will also serve this year as Commandant for the Tarheel Marine Corps League Detachment

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Our Profession: Brain Science: Translating Basic Neuroscience Research into Counselor Competencies

By Linda Makinson, PhD, LPC, NCC, MBA

The past decade has been one of dizzying change driven by our acquisition of knowledge regarding the human brain and its amazing capacity for change. Given the advent of measuring equipment such as MRI, EEG's etc, we have been able to peer into the working brain for the first time. This mere three pounds of grey matter is the foundation of the mind, the seat of intelligence and problem solving, and the origin of our thoughts, emotions and behaviors. This is the organ that professional counselors treat.

Until recently, neuroscience dogma stated that once the brain development is complete in early childhood, neural structures remained fixed throughout the lifespan: similar to a computer without hardware upgrades. Today, we know that neural circuits are in a constant state of change, reacting to both genes and the environment, and while most neurons are produced early in development, there are at least three areas of the brain where neurogenesis occurs as an ongoing process.

Neuroscience research supports the concept that top-down psychotherapy (talk therapy) not only leads to the client change that we witness in our everyday work, but that counseling affects fundamental gene expression. In addition, counseling changes brain function at the structural level. New neural pathways are formed and old, less advantageous ones are weakened. Grey matter even takes on entirely new functions – thus the term "neuroplasticity." Norman Doidge, author of *The Brain that Changes Itself*, has coined a new term for psychotherapists: Neuroplastitians, because we help our clients change their brains.

Now, in this second decade of the new millennium, I propose that the field of professional counseling fully embrace neuroscience research. As leaders in the mental health professions, I challenge my colleagues to engage in the task of transforming basic neuroscience research into counselor competencies as we incorporate new concepts into our practice to benefit our clients, our profession, and ourselves.

President's Ponderings by LPCANC President Lili Sznaidman, MS, LPCS, ACS

In thinking about the various roles and activities in which Professional Counselors get involved during our weekly routines, the concept of supervision and self reflection come to mind.

Throughout our professional careers we take part in a variety of clinical supervision experiences, such as providing and receiving individual supervision, participating in peer supervision groups, and attending related trainings. How do all of these activities impact our work with clients? How does supervision and who we are as individuals influence one another in the counseling room? How can we readily identify our counter-transference with a particular client, rather than following our perhaps initial perception of their resistance to treatment?

The notion of professional counselors needing to possess a high degree of self awareness is vital to fulfilling our responsibility in competently serving our clients. Attainment of

deeper levels of self knowledge within the supervisory relationship hinges on our attunement to the "psychological mindedness" embedded in our daily work.

It speaks to an important aspect of our profession: Recognition that our inner worlds, biases, struggles, fantasies, and memories are indeed very present in the counseling/consulting room, affecting our work with clients and supervisees alike.

Solid supervision relationships present an ideal environment for the emergence of multiple viewpoints in conceptualizing client cases. Supervision provides the opportunity to learn techniques and tools, but also for the exploration of what lies within our core as counselors in relation to the people we serve.

Resource: "The Supervisory Encounter; Jacobs, Daniel, M.D., David, Paul, M.D., Meyer, Donald Jay, M.D.; Yale University, 1995

News & Views

William Lawrence, PhD, LPC, University Relations Chair announces **2011 Nancy Howell Scholarship** application deadline is May 1 and recipients announced May 15. Each year LPCANC grants two \$500 scholarships to students who are members of LPCANC: one to a master's counseling student and one to a doctoral counseling student. See www.lpcanc.org for more details.

Deanna Madison, LPC, Jim Gibson, LPC and Debora Steenson, Membership Committee announces a "get out the word" membership campaign for LPCs in North Carolina for 2011. Help is needed in all Regions and volunteers should respond to lpcanc@bluestarservices.net with name, location, and availability.

LPCANC Professional Development Committee plans 2011 workshop opportunities for "Ethics" and "Supervision." Go to www.lpcanc.org for calendar updates and registrations

Harold McMillion, EdD, LPCS, CCMHC, NCC, ACS suggests the "Short Screening Scale for PTSD" especially useful for working with military families and combat veterans returning from deployment: can be found in [*Journal of General Internal Medicine* 2006 January; 21 \(1\); 65-67.](#)



Conference Co-Chairs **Tammie Brettschneider** and **Shirley Huffman** announce to Board of Directors their exciting news about this year's Conference

LPCANC Board Meeting on January 29, 2011



Working through lunch: Linda Makinson, Denauvo Robinson, PDC Chairs Jason Menegio and Harold McMillion, and Tammie Brettschneider



Deanna Madison
Membership Chair, rolling
out 2011 membership
campaign to LPCANC Board



Board members review membership campaign: Linda Makinson, Treasurer, Daniel Paredes, Secretary, Lili Sznaidman, President, Dianne Dougherty, Past President, Denauvo Robinson, President-elect, and William Lawrence, University Relations Chair

Advocacy and Legislative Update by Ashley Matlock Perkinson, LPCANC Lobbyist and Counsel

The 2011 legislative session of the General Assembly convened on January 26th in Raleigh. This session will be greeted with much anticipation. This is the first time since the late 1800's that both the State Senate and House have had a Republican majority. Freshman legislators make up one-third of the Senate and one-fourth of the House membership.

The North Carolina General Assembly faces a \$3.7 billion revenue shortfall and budget cuts and government downsizing is on the agenda. I plan to monitor the dozens of bills that are introduced each day during session on behalf of LPCANC and alert LPCANC if a bill is introduced that might have an impact on Licensed Professional Counselors.

All Legislative committees will see new leadership, including mental health. The new leadership must be educated on

the services that Licensed Professional Counselors provide and the issues that impact the profession.

In addition, I will focus on items that may be before the Legislature that include protection of Medicaid rates, inclusion of Licensed Professional Counselors in the Department of Correction, expansion of Licensed Professional Counselors' roles in the Office of State Personnel, protection of the Licensed Professional Counselor scope of practice, and inclusion of Licensed Professional Counselors in pilot mental health programs that to date do not include LPCs, for example the "first commitment" pilot program.

I look forward to representing LPCANC during this 2011 Legislative session.

Our Practice: Can Sugars Really Affect Our Mood? By Jason Menegio, MS, LPCS, NCC

While Depression is not generally known to be a complication for Diabetes, a serious disorder that afflicts an estimated 16 million Americans, it can be one of the most potentially serious and even life-threatening of conditions. Several studies actually suggest that an individual with Diabetes has double the risk of Major Depressive Episode as compared to those without Diabetes. The chances of becoming depressed increase as Diabetes complications worsen.

Research further shows that Depression can also lead to further declining physical, mental, and cognitive functioning, and it is less likely for the individual to adhere to stringent dietary regimen and/or medication treatment plan. Co-occurring Diabetics and Major Depression have extremely high rates of Recurrent Depression in the five years following onset. It has been suggested that the stress of Depression itself may lead to hyperglycemia in Diabetics! While the under-

lying causes of the correlation between Depression and Diabetes remain unclear, it has been shown that the onset of a Depressive Disorder may in fact develop as a result of stress and may result from the metabolic effects of diabetes on the brain.

We can learn more about these conditions, the challenges they propose, and what we as licensed clinicians can do to help individuals live a higher quality of life. There will be a Professional Development Workshop in the Triad Region soon, and through this training we can come to a greater understanding and a deeper appreciation for the mind and body connection with these two co-occurring conditions. Dates of upcoming workshops will be posted on the LPCANC website: www.lpcanc.org. I hope to see you there!

(Welcome, continued from page 1)

focusing on "Toys for Tots" and "Wounded Warriors." Both Debora and George have a strong desire to "give back" to their community.

Blue Star Services states that their goal is to "tailor the services of the firm to meet the ever changing needs of our clientele, while knowing that each association has its own unique personality. The scope of some of our services includes but is not limited to: membership management, annual conference planning, workshops, regional meetings, communications, board and committee assistance, financial management and record keeping." Debora and George's message to membership of our association:

"It is, and always will be, Blue Star's goal to be an integral part of LPCANC. We see ourselves as a partner with

your association. We embrace a team approach to management, and it is our expressed desire to work with the Board of Directors and members to continually make LPCANC stronger and of greater benefit to the members while advancing the profession.

Additionally, we feel it is vitally important to have management that is consistent and intimately involved in the day to day activities of your association. Blue Star Services knows that the key to a successful relationship is communication, and we will always be readily available via telephone and e-mail. Blue Star Services looks forward to building our partnership and assisting each of you in the coming years."

You may reach the LPCANC office by telephone at 919.414.4817 or by e-mail at lpcanc@bluestarservices.net.

A warm and hearty welcome to Blue Star Services!



**LICENSED PROFESSIONAL
COUNSELORS ASSOCIATION
OF NORTH CAROLINA**

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www.lpcanc.org

Did you know?

North Carolina is divided into eight regions for LPCANC. Each Region has a Regional Representative to facilitate meetings for LPCs and other mental health professionals to meet, network, hear a speaker, share lunch or coffee together. LPCANC awards 1 continuing education credit hour "free" to members for each of these meetings. Check on website for Regions to see a map and determine your Region. There is also a list of Regional Representatives you can contact, and on the Events Calendar at www.lpcanc.org you will find a schedule of events in the Regions.



Part of the group attending Region 2 in New Bern on January 8 -- Maggie Minsk, LPC (seated) is Regional Representative. This group usually meets once per month for a variety of topics and clinical discussions as well as networking with other Counselors.

SAVE THE DATE!!

“Accepting the Challenge: Creating the Future”

October 28-29, 2011

Embassy Suites Hotel

Winston-Salem, NC