Dear FAMCD Members,

I hope this correspondence finds you well. With the fall season just a few short weeks away, many of us find ourselves acclimating to the beginning of a new academic year. This could mean preparing children for classes, readjusting to a new work schedule, or daydreaming of our next three-day weekend or holiday vacation.

As we settle back into our routines, I ask that we do not forget about the unaccompanied minors still in need of our support, the transgender population continuing to face legislative battles on a daily basis, the violence, discrimination, and bigotry directed at various minorities, and the trauma experienced by so many underserved populations on a daily basis.

It is not surprising to think of the toll that watching the news can have on an individual in today’s society. While the harsh reality of injustice plaguing minorities in our country and across the globe can leave us wanting to turn our focus to more positive stories, and understandably so, we cannot leave any group of individuals behind. As counselors in this profession, we have a privilege that many others do not have. We have the ability to use our platform, our education, our knowledge, and our voices to be heard. We can be the voice for those who have been silenced, and we can share this platform with those whose voices may have been taken from them.

The courage that marginalized individuals—oftentimes our clients—have to face their daily challenges motivates us every morning upon waking up. And the courage our counselors have to walk alongside our clients in their trials, tribulations, and successes never ceases to inspire me. I implore you all to continue to be courageous and know that your voices and your actions matter. It is easy to forget this as we settle back into our routine and get bogged down by our caseloads, assignments, and deadlines. But our clients and underserved populations are counting on us to be the change we all wish to see.

As we commence this new academic year, FAMCD’s executive board is committed to providing more learning opportunities to our membership. In our newly initiated quarterly newsletters, our goal is to provide features from professionals and members of the community here in Florida and across the country who will share personal experiences and foundational pieces of advice when working with specific minorities. Education and knowledge are key pillars when it comes to advocacy and social change, and we want to take advantage of every possible opportunity to increase multicultural counseling competencies so our members can continue making a difference in our communities.

Margaret Mead stated, “Never doubt that a small group of thoughtful, committed, citizens can change the world. Indeed, it is the only thing that ever has.” I am excited to work alongside our FAMCD executive board and membership this upcoming year to do our best to change the world, one step at a time.

Sincerely,
Daniel Balva, MS, NCC, CRC
FAMCD President, 2018-2019
https://www.facebook.com/FLAMCD/
Daniel Balva graduated in 2017 from the Clinical Mental Health Counseling and Vocational Rehabilitation Counseling master’s program at Florida International University, and is currently working towards attaining licensure in the state of Florida. He is a National Certified Counselor (NCC), Certified Rehabilitation Counselor (CRC), and Transgender Care Professional. Daniel’s clinical experience spans a variety of settings including the vocational rehabilitation sector as a vocational evaluator, adult outpatient and crisis stabilization units, working with court mandated adolescents, and working with children and adolescents with histories of trauma and abuse in northern Peru.

He serves on the International Committee of the American Counseling Association, and is an active member of the American Rehabilitation Counseling Association, the Florida Mental Health Counseling Association, and the Florida Counseling Association. Daniel is a co-coordinator for Emmaus Medical Mission and helps coordinate medical missions to Guatemala on a bi-annual basis. He has been fortunate enough to work with Global Trauma Research, Inc. to provide intervention training for professionals in Haiti, and recently had the opportunity to start a medical campaign in the poverty stricken region of La Libertad, Peru. Daniel has a strong passion for sustainable global mental health care and plans on dedicating his doctoral research efforts to this topic.

Maurianna Harriet-Swanson is a licensed mental health counselor and has been practicing individual and group therapy, in a variety of settings since 2005. She has provided counseling and therapy services in community mental health, substance abuse (rehab/detox) facilities, and psychiatric hospitals and correctional environments. She is a certified addiction professional, internationally certified drug and alcohol counselor, and a U.S. Department of Transportation trained Substance Abuse Professional. As an adjunct to her practice and in an effort to work with families, she is currently pursuing a certification in family mediation.

Currently she has a private practice in Pembroke Pines, Florida where she encounters a wide variety of people, of all cultural and ethnic backgrounds, who are seeking help with chronic mental illness, depression, anxiety, mood disorders, and addiction related issues.

Maurianna is also a Qualified Clinical Supervisor for Mental Health Counseling Interns and for individuals seeking certification as addictions and criminal justice specialists/professionals.
Letitia Browne-James

Letitia Browne-James is a Licensed Mental Health Counselor and Qualified Clinical Supervisor for mental health counselors and marriage and family therapy therapists seeking licensure in Florida. She is a National Board Certified Counselor and Florida Behavioral Health Case Manager Supervisor. Letitia has many years of counseling experience working with adults, children, families, and couples in individual and group settings, and is currently an Assistant Clinical Director at a level 8 juvenile detention facility for young men who have committed serious crimes and need mental health and substance abuse services. Letitia serves as Adjunct Faculty at Stetson University and the University of Central Florida and is the Founder and Owner of Victorious Living Counseling & Consulting, LLC. Letitia is a Doctoral Candidate at Walden University pursuing a Ph.D. in Counselor Education and Supervision with a specialization in Counseling and Social Change. Her dissertation title is “Racial Microaggressions and the Lived Experiences of Black Individuals: Implications for Counseling.” Letitia is passionate about serving and advocating for persons from marginalized populations to create global positive social change. Letitia is also the Immediate Past President of the Florida Association for Multicultural Counseling and Development, Current Treasurer of the Association for Multicultural Counseling and Development, and a Past President of Chi Sigma Iota Omega Zeta Chapter at Walden University.

Maria Davis-Pierre

Maria Davis-Pierre is a Licensed Mental Health Counselor and Qualified Clinical Supervisor for mental health counselors and marriage and family therapy therapists seeking licensure in Florida. Maria Davis-Pierre is the founder of Autism in Black Inc. She is a therapist, coach, speaker, author and advocate. After going through the process of getting her daughter diagnosed at 18 months, Maria changed her specialty and began working heavily in the Autism community. In January of 2018 Maria launched her 2nd private practice, Autism in Black Inc., which aims to provide support to black parents who have a child on the spectrum through educational and advocacy services. Autism in Black Inc. is dedicated to bringing awareness and acceptance to Autism Spectrum Disorder and reducing the stigma associated with ASD in the black community. She graduated from Florida State University with a Bachelors of Science in Sociology and went on to obtain a Masters of Science in Mental Health Counseling from Nova Southeastern University. Maria is currently working on her Ph.D. in Family Therapy from Nova as well. Maria is also the founder of Day by Day Therapeutic Services which is dedicated to bringing awareness to postpartum depression and anxiety in the black community and serving black women dealing with postpartum depression and anxiety. Maria's passion is being an autism advocate with her mission being to bring awareness to the impact culture can have regarding an ASD diagnosis.
Pastor Homer R. Brown, Ph.D., LMHC, NCC works as a Licensed Mental Health Counselor, a Florida Qualified Supervisor, and a National Board-Certified Counselor (NCC). Additionally, Homer works as an adjunct professor at two Christian based universities, Barry University and Palm Beach Atlantic University. Elder Brown is an active member of several professional counseling organization including the American Counseling Association (ACA), National Board for Certified Counselors (NCC), and Florida Counseling Association (FCA).

Tia Nagel is a Licensed Mental Health Counselor & National Board Certified Counselor working out of Charlotte and Sarasota Counties. Tia earned her Bachelors of Science in Criminal Justice from Florida Gulf Coast University in Fort Myers, Florida, and earned her Masters of Science from the CACREP Accredited Hodges University, also in Fort Myers. She has been in the mental health field for over 10 years having experience within youth shelters, military bases, jails, state hospitals, community agencies, and private practice. Tia enjoys working with all populations particularly trauma, the military & their families, and teenagers. She helped to establish and become one of the first counselors for the Teen Court program in North Port, Florida.

When Tia is not in the office, she enjoys spending time with her family. She likes to work out & lift weights as part of her self-care. Tia aspires to grow her expertise with her trauma work and become a certified supervisor. Tia feels honored to currently sit as the legislative chair to the multicultural division and will continue to make efforts for better understanding, increased access, and less stigma in the counseling field.
Dion E. Price Sr. served in the United States Air Force for 20 years. He has been awarded a Bachelor's in Science Degree in Religion at Liberty University along with a Master of Arts in Theological Studies. He is currently pursuing his Master of Science Degree in Clinical Mental Health Counseling at Walden University. Dion volunteers at the Talbot House Ministries in Lakeland, Florida and desires to counsel at-risk youth. He is a member of Toastmasters and is the founder of Life-Changing Mentorship. Dion currently serves as the Graduate Student Representative for the Florida Association for Multicultural Counseling and Development (FAMCD).

Elisa Niles is a licensed mental health counselor in the state of Florida. She is also a national certified counselor and a qualified supervisor for mental health interns and marriage and family therapist interns. Elisa is a 2016 recipient of the National Board of Certified Counselor- Minority Fellowship Program. She completed her education at the University of the Virgin Islands 2002, 2005 and Argosy University in 2009. She is currently a third-year doctoral student at Walden University pursuing her Ph.D. in Counselor Education and Supervision. She is working on her dissertation and plans to examine the relationship between trauma and reoccurring homelessness in the U. S. Virgin Islands. Elisa is the past membership chair of Chi Sigma Iota-Omega Zeta Chapter and member-at-large for the Florida Association for Multicultural Counseling and Development, and the Southwest Regional Director for the Florida Mental Health Counselors Association. She recently started a local radio talk show called Sound Mind, which integrates faith and mental health on the carribbeancommunityradio.com. She is working towards becoming a Registered Play Therapist Supervisor. Elisa is trained in Traumatic Incident Reduction and is a Certified Clinical Trauma Professional. She has presented at local and national conferences. Elisa is the Clinical Director for Southwest Florida Counseling Center in Port Charlotte, Florida. Elisa was born in St. Thomas, United States Virgin Islands, but has also lived in Jamaica and Antigua. She enjoys singing, dancing, travelling, going to the beach, and trying new foods.
BUILDING CULTURAL COMPETENCE THROUGH IMMERSION EXPERIENCES: THE PROOF IS IN THE PUDDING!
BY BAXLEE A. BYNUM, M. ED, NCC, LPC, AADC

Last summer, USA today published and article, “Cultural immersion experiences are a springboard to learning and leadership”. I could not agree more. My life and personal perspective on the world and my own cultural competence has been opened up and changed immensely through opportunities I’ve been given to study and work abroad. My passion to study and experience cultures around the world began when I earned an undergraduate minor in international studies during a semester abroad in Italy. Since then, I have sought out any opportunity that I could find to experiences cultures of the world. Outside of my personal travels, I’ve been able to conduct cross-cultural research at Korea University in Seoul, South Korea and was able to teach counseling skills to community leaders of Croix de Bouquet, Haiti through the amazing organization Global Trauma Research, Inc.

Opportunities to work and study abroad are increasing daily as our professional community is moving towards the realization that breeding counseling professionals with a healthy global perspective is more important than ever. Over the years, the United States has experienced a dramatic shift in population demographics. It is projected that by 2050, more than half of the U.S population will consist of individuals representing diverse racial and ethnic backgrounds (Colby & Ortman, 2015; Humbert, Burket, Deveney, & Kennedy, 2012) and there will be an increase in foreign-born residents that will exceed native born residents (Colby & Ortman, 2015). Literature has shown that immigrants underutilize mental health services due to a host of reasons, including mistrust for mental health professionals (Abe-Kim et al., 2007; David, 2010; MPI, 2016; Shea & Yeh, 2008) and it has been hypothesized (Fraga, Atkinson, & Wampold, 2004; Kearney, Draper, & Baron, 2005) that diverse populations tend to underutilize counseling services because they do not perceive counselors to be competent in addressing their culturally related issues. (Continued on next page)
Inadequate care amongst this population is unfortunate and disappointing. With a greater understanding of diverse immigrant cultures and with a heightened awareness of and sensitivity to acculturative stress, mental health professionals may be able to foster a more inviting and trustworthy environment/experience for clients.

One method to prepare counseling professionals to work with individuals from an ever-growing diverse population is to incorporate transformative learning experiences through international travel exposure in counseling graduate programs and professional service experiences. Transformative learning is a process where one changes their perspectives or mindsets into a more open or inclusive way of thinking in order to develop more justified beliefs to guide one’s actions (Hubbs & Brand, 2005). When students and professionals engage in global research and outreach initiatives, it adjusts the lens that they see themselves and the world through, which impels a new and more informed perspective. Immersion experiences are unique in that they ignite fast and lingering growth/change! Through my immersion experiences abroad, I’ve noticed internal changes and growth such as adaptability, resilience, deeper sense of empathy, self-awareness and a habit of deeper self-reflection. There is something so powerful about learning through experience.

We can talk and read about cultural sensitivity all day long, but until we get out of our comfort zones and open-mindedly experience something as complex and intimate as being an outsider in a new culture, it is impossible to relate. This type of experience evokes extraordinary self-awareness and growth. This is your passport to true empathy!

The elephant in the room when talking about study abroad programs and global initiatives is $$$ funding. Are these programs inclusive only to individuals who can afford high travel costs and program fees? My answer is absolutely not. When I developed this interest as an undergraduate student, I knew that the only way I would be able to travel abroad would be through an educational program. Many programs offer scholarships, fundraising aid, get help from student outreach program funding and even carve out ways to allow grants and student loans to pay for tuition and program fees.

As a professional, there are also many ways to find funding for a global initiative. I used a fundraising site, wrote letters to potential supporters and gave presentations of my global projects to local helping organizations to fundraise. If you are motivated, you will find a way. I encourage every student and professional to seek a global perspective not only for personal growth, but to advance our profession and enhance the accessibility of quality care. Studying and serving abroad can change your life- the proof is in the pudding!

For references, questions, or concerns, please contact baxleebynum@gmail.com.
HOW NON-CLINICAL COMMUNITY ORGANIZING GROUPS EMPOWER AFRICAN AMERICAN WOMEN WHO HAVE EXPERIENCED TRAUMA. EXPERIMENTAL CASE STUDIES.

BY LILLIAN WALKER SHELTON, E.D.D., LCPC, LPC


There is a gap in the literature concerning how non-clinical community organizing groups can assist African American women who have experienced trauma. Community organizing groups have their roots in the history of social workers assisting immigrants in America (Frederick, 2003). Community organizing has since developed. My dissertation study observed four community organizing models: Faith based, Women Centered, Community Coalition, and Grass Roots and how these groups used psychological empowerment.

Psychological Empowerment has previously been used to help African American women who have experienced trauma in a community setting (Zimmerman, 1995). Psychological Empowerment looks at the socio-political context of where a person lives and the person’s world view. My study used a field guide to collect information on three areas of Psychological Empowerment (intrapersonal, interactional, and behavioral).

My study was conducted using a qualitative method with a case study format. Research has shown that when working with African Americans, on culturally sensitive studies that they have responded more positively to a qualitative study (Tillman, 2002). Using a qualitative design will allow for cultural standpoints to be expressed and participant collaboration. Tillman (2002) recommended for African Americans to be involved in research studies of their culture so that misperceptions do not occur. Culturally appropriate, qualitative research of African Americans can lead to cultural intuition, because of the involvement of African Americans in the study.

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The program director of the non-clinical community groups was interviewed for my study. The program directors collaborated with me on the questions to be asked. The concept of program directors collaborating with me is part of the social justice competencies and multicultural counseling (Ratts, Singh, Nassar-McMillian, Butler & McCullough, 2015). The idea of having the program directors be involved in the research project supports the idea empowering people from a marginalized community (Ratts et al., 2015).

Empowerment occurs when an individual or group is given the tools to have control over issues that affected the individual or groups’ lives (Zimmerman, 1995). This may be decisions that affect their lives or their destinies. The core components of empowerment are: access to resources, and critical understanding of one’s sociopolitical context. The access that African American, female trauma victims have to resources was reviewed in my literature review and showed health disparities. The sociopolitical context will be the community actions which the women participated in that empowered them.

A professional who is an outsider working with a community organization on empowerment issues can take an egalitarian approach by developing a co-identity and working with community members as copartners (Zimmerman, 1995). The outside professional can also empower the community members by helping to develop leadership skills so that they are not dependent on the professional.

Empowerment outcomes can be quantitative or qualitative. These outcomes assist in measuring the results of using empowerment with an individual or group and add to the literature available on empowerment.

I found that the cases socio-political context and organizational structure effected how they assisted African American women. The socio-political context also impacted participants’ worldview. Under the behavioral component of the answers, when discussing coping skills, the Faith Based Organization (FBO) and the Women Centered group both mentioned prayer as a tool to deal with trauma. The grassroots organization and the Women Centered group both mentioned negative coping skills that their members may have to deal with trauma also.

The FBO and the Women Centered group use sister circles or small groups to meet with their members. The FBO and the Women Centered group are also similar in their approach of using a member vote or majority rule to decide on projects that the group should work on. The FBO, the grassroots organization, and the community coalition all had ties to churches. The FBO was a church, but the grassroots organization and the community coalition used churches for meeting space. The FBO, the Coalition and the Grassroots discussed how their participants were involved in the organization with fundraising. All the organizations said that their members volunteer on projects.

The worldview of the participants and the organization impacted the level of participant involvement. The leader of the Grass Roots organization mentioned members worldview changed from being involved in their organization. This connection with worldview is part of the Social Justice Framework when working with a client from a marginalized population (Ratts et al., 2015). Based on the findings of my research, mental health professionals can assist African American women who have experienced trauma by using social justice competencies, multicultural interventions, social identity development, and a Strengths Based Counseling model (SBCM). The results of the field guide/questionnaire supported the idea that many African American women who have experienced trauma gain a new identity through being involved in a non-clinical community organizing group. The participants in these groups also, are encouraged to use their strengths and skills to assist the organizations. All the groups in my study said that they engaged and encouraged their members through skill development.
UNDERSTANDING REHABILITATION COUNSELING THROUGH ADVOCACY WORK: ASSISTIVE TECHNOLOGY

BY: ALEXIS DUGGAN, NAMRC STUDENT REPRESENTATIVE, FIU VOCATIONAL REHABILITATION COUNSELING STUDENT

&

JASMINE BRYANT, FIU VOCATIONAL REHABILITATION COUNSELING STUDENT

Description of Organization

The Florida Alliance for Assistive Services and Technology (FAAST) is a state-run program with six regional demonstration centers across Florida. The South Florida demonstration lab services the following eight counties: Monroe, Miami-Dade, Broward, Palm Beach, Collier, Hendry, Lee, and Charlotte. The Miami-Dade demonstration lab is located at the University of Miami in the Mailman Center. This office has two rooms where clients can examine several different assistive technology devices and two private offices where the client completes any necessary paperwork. There are also five reuse centers throughout Florida. The reuse centers fix and refurbish adaptive devices and sell and gift devices that have been donated.

The FAAST lab is an information only source. Their primary task includes assistive technology demonstrations and training. They offer guidance and recommendations for selecting proper devices and provide information on specific assistive technology products and needs. Persons with disabilities can go to any of their locations and test out appropriate assistive technology devices. Some devices that they have available include daily living devices, adaptive toys, tablets, computers, and mid and high-level speech generating devices.

They offer a 4-week training for the individual, parents, spouses, and caregivers. They have a device lending program that allows clients to borrow any applicable device for 14-30 days. Devices can be borrowed and shipped to the client’s home from any regional location.

Current Challenges

The South Florida community is very large and diverse which often presents an issue in providing the appropriate outreach services. The current challenge faced by South Floridians in need of assistive technology is building awareness so that this population can utilize assistive technology services effectively in their daily life. There is a lack of awareness within this population that prevents them from integrating technology that could be used to improve their lives on a consistent basis. People with disabilities are either unaware that assistive technology exist or that they qualify for it.

Multiple factors play into being unaware of adaptive devices such as economic status. Clients from low SES have less access to transportation to get to appointments, less access to the internet to research resources, or don’t even attempt to inquire about adaptive devices because they think that they can’t afford it.

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Not only is the population uninformed but so are many of the specialists that work with them. The professionals that work with and come in contact with persons with disabilities don’t know or don’t provide the proper resources for their clients.

Findings
It takes a multidisciplinary team to advocate and spread awareness about assistive technology services. One barrier encountered during this project was finding a profession that was connected to the disability community that we could collaborate with to spread awareness about assistive technology. Through interviewing Ana Navares of the FAAST lab we were able to brainstorm different populations that worked with the disability community before deciding upon addressing this issue with the faculty and staff of a local school. This school has multiple students who have disabilities who could benefit from assistive technology being integrated into their school day. Another small barrier we had to overcome was convincing the identified school that this presentation would be valuable to the staff.

The in-service focused on vocational rehabilitation services and benefits of assistive technology being used in the classroom. Mrs. Navares connected us with one of her colleagues who was able to accompany us on our in-service to inform the faculty of the FAAST Lab’s services. Out of the 35 teachers and staff members who attended 94% stated that the in service was beneficial and informative. 97% stated that it increased their awareness and that they could use this information to help current and future students and their parents.

While the issue of awareness is still something to be worked on we hope to continue to tackle this issue through providing more informational meetings across the Miami Dade area to other populations that provide services to the disability community such as doctors, social workers, and therapists.

Project Significance
Our project contributes to the advancement of rehabilitation counseling and our local community in many ways. This particular in-service was geared towards assistive technology being used in the classroom. Through this in-service, we were able to educate and make professionals who may come in contact with students with disabilities aware of assistive technology services. We addressed to them the importance and value of assistive technology being utilized in the classroom. These teachers can now advocate for their students and give them the chance to have the same educational opportunities as their peers. The teachers can now advocate for their students and give them the chance to have the same educational opportunities as their peers. In general, the more people with disabilities use and integrate technology into their lives, the more we learn about disabilities and how we can improve adaptive devices.

Conclusion
To address the issue of increasing awareness of assistive technology devices and services within the disabled population an in-service was given at a local school. Our goal of this advocacy project was to educate people with disabilities and professionals and make them cognizant of the benefits of assistive technology. We worked in partnership with FAAST lab to advocate for our issue. We set out not only to spread awareness that assistive technology exist but also inform the community of the value and the effect it can have on the quality of life. Integrating technology into the classroom, workplace, and daily living makes for a more accessible tomorrow. Assistive technology can bridge the gap between unemployment and gainful employment, give students access to the general curriculum at school or just overall enhance quality of life and independence.

*Alexis and Jasmine were named the winners of the American Rehabilitation Counseling Association’s (ARCA) Understanding Rehabilitation Counseling project competition which was awarded at the American Counseling Association 2018 Conference & Expo. More information can be found via the following link: http://casenews.fiu.edu/index.php/2018/06/27/rehabilitation-counseling-students-win-big-at-the-aca-arca/
I have had the privilege of working with military veterans for little over 10 years. Also, had the opportunity to work with active service members during pre-doctoral internship at the Great Lakes Naval facility when it merged with the North Chicago VA and became known as the Captain James A. Lovell Federal Health Care Center. During my time working with military veterans and active duty servicemen/women, one of the most frequent concerns reported by veterans was being asked about their experiences during combat and this was usually asked by individuals that had never worked with the veteran population. As such, I was asked to provide a brief synopsis of areas related to military veterans including diagnoses, treatment and other clinical considerations for mental health providers that have little to no experience working with the veteran population.

Post-traumatic Stress Disorder (PTSD) is one of the most common disorders that are found when working with military veterans. These traumas can be combat related or as a result of military sexual trauma (MST). At this time, the data is unknown regarding males vs. female veterans who sustained a military sexual trauma. The Veterans Health Administration (VHA) has made significant progress on developing evidenced-based treatments for veterans with PTSD. The most recent evidenced-based treatment is Cognitive-Processing Therapy (CPT) which is a manualized 12-week program cognitive-behaviorally based treatment.

There is also Prolonged Exposure (PE) and Eye-Movement Desensitization Reprocessing (EMDR) as the token treatment options for PTSD, along with psychopharmacological interventions. Substance use disorders, Depression and Anxiety are other diagnoses, all which the VHA are actively working on developing evidenced-based treatments for each disorder.

When working with military veterans it is recommended to have some beforehand knowledge of the different wars and the factors, both medical and psychological, that present with each of the wars (e.g., WWII, Korea, Vietnam, Gulf War, and OIF/OEF). The most recent war is termed Operation Endurance Freedom/Operation Iraqi Freedom (OEF/OIF). Some of the medical issues associated with OEF/OIF veterans is exposure to Airborne Hazards and Open Burn Pit, Toxic, Embedded Fragments from blasts, and exposure to other harmful substances (e.g., pesticides, anti-nerve agent, biological and chemical warfare agents, etc.). Many times, these factors present other challenges outside from just mental health so it’s encouraged for providers obtain a thorough background history that includes if the military veterans served in any war era as it may be a contributing factor.

In addition to mental health disorders, other factors to be aware of when working with the veteran population are Homelessness and Suicidality.

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Military veterans end up homeless because upon discharging from the military they experience difficulties readjusting to civilian life. This can negatively impact social and/or occupational functioning which leads to family leaving the veteran, loss of employment and/or losing any type of supportive network that ultimately leads to homelessness. Since 2010, there has been a decline in homeless veterans, however there was an increase in 2017 mostly related to high rent costs in some communities. In regards to suicidality, about 126 veterans kill themselves each week with the Coast Guard, Navy, and Air Force having the lowest suicide rates. The Marine Corps and Army have the highest. Contributing factors can include substance use, PTSD, ongoing psychosocial stressors, and even homelessness.

A more recent factor is that the Veterans Health Administration (VHA) is providing education, treatment, support, and specialized positions for veterans that identify as Gay, Lesbian, Bisexual or Transgender. When the “Don’t Ask, Don’t Tell” (policy that was enacted during the Clinton administration) was repealed during the Obama administration, it allowed servicemen/servicewomen to openly serve in the armed forces without negative retaliation from the armed forces such as obtaining a dishonorable discharge which would deny the individual from receiving VA services or benefits. The repeal also granted veterans the ability to enroll their partners into their health insurances and other benefits previously granted to only heterosexual couples.

Despite the repeal, there is still a cultural adjustment within the VA setting as clinicians to automatically assume that the veteran identifies a heterosexual instead of asking, ideally during an initial encounter, how the person identifies. Also, there are providers, even in mental health, that have difficulties providing services to veterans that identify as GLBT because of their personal, religious or cultural beliefs.

Lastly, for many years when we thought of a military veteran we imagine someone older (e.g., parent or grandparent). However, military veterans these days are younger (20s or 30s) so being aware of proper professional boundaries to avoid questionable ethical problems (e.g., dual relationships, romantic relationships, etc.).

If you are a mental health provider thinking of working with this population, these are just a couple of things to keep in mind to provide a better service to them because I believe one of the biggest rewards is working with our returning servicemen/servicewomen.
2018-2019 Minority Concerns Chairpersons

FAMCD recently initiated Minority Concern Chairpersons with the goal of having dedicated students and professionals focused on shedding light on current issues and concerns surrounding minority populations. It is our hopes that throughout the upcoming year, we can do more to better inform our membership of minority concerns so that we can work together to create solutions while advocating for and alongside underserved populations. Be sure to check out FAMCD’s Facebook page and December edition of our newsletter for features on our Minority Concerns Chairpersons!

Latinx Concerns: Laura Finnell  
Disability Concerns: Alexis Duggan  
Asian American Concerns: Joanne Ongsitco  
Caribbean Concerns: Amanda DiLorenzo  
LGBTQ+ Concerns: Justin Maki  
Diversity within School System Concerns: Loidaly Gonzalez  
African American Concerns: Jasmine Bryant  
Native American Concerns: Currently Vacant (Please contact us if you’re interested in assuming this position)

In June 2018, FAMCD Past-President Letitia Browne-James, ARCA Past President Michelle Bradham-Cousar, and Rachel Henesy, Past Graduate Student Representative of FALGBTIC. This collaborative webinar focused on bringing awareness the mental health implications of microaggressions among minority groups. This webinar had the highest attendance of all prior FCA webinars! This webinar was picked up by AMCD, ALGBTIC, and ARCA and was recently offered to members of each division on August 27, 2019 with another record number of attendees! A recording of this webinar will be emailed to all FAMCD members within the upcoming weeks.

In March, 2018, FAMCD President Daniel Balva, FACAC President Luisairis Soto, and FAMCD member Rocio Morris hosted a webinar titles: Do You See Me? Understanding Outreach with Diverse Children and Adolescents, which was attended by over 20 FCA members!
FAMCD Past-President Letitia Browne-James and FAMCD member Heather Jamieson presenting on "Human Trafficking Typologies: A Global Epidemic and Implications for Counselor."

FAMCD President Daniel Balva presenting on "Understanding the Correlation Between Violence and Schizophrenia."

FAMCD member and Latinx Concerns Chairperson Laura Finnel presenting on "Ayudando los Ayudantes: Advocating for bilingual Spanish-Speaking Counselors."
"Melanin & Mental Health™ was created by two therapists who wanted to find out where we could connect with all the other local therapists who care about our Black & Latinx communities. Before we knew it, the word about what we were doing had spread and a national directory of therapists was formed. Melanin & Mental Health™ is passionate about raising mental health awareness in our communities.

We want people to know that Therapy is Dope when you have a Dope Therapist! We spread this message online with our social media accounts, website, and our official Therapy is Dope Merchandise sold in our online Melanin & Mental Health™ shop.

We won’t stop until we change the face of psychotherapy on both sides of the couch."
69th Annual Florida Counseling Association Convention

**When**: October 5-6, 2018

**Where**: Embassy Suites by Hilton Tampa USF Near Busch Gardens 3705 Spectrum Boulevard Tampa, Florida. 33612

**Registration Link** (Open until 10/4/18):
https://www.flacounseling.org/events/register

We invite all members of FAMCD to the 69th Annual Florida Counseling Association Convention “Celebrating Diversity: Counselors As Leaders, Advocates, and Voices for Marginalized Individuals.”
FAMCD will be hosting its annual Town Hall meeting at the FCA Convention, so be sure to check your email with the conference itinerary so you can attend!

Some of our executive board members will also be presenting at the Conference, so stop by and come support your FAMCD leadership!

*FAMCD’s Member-at-Large Elisa Niles will be hosting the first Pre-Conference session titled, “Addressing Counselor Wellness from a Trauma-Informed Care Approach.”

*FAMCD Past President Letitia Browne-James will be co-presenting with Dr. Lamerial Jacobson on “Multicultural Counseling and Advocacy: Integrating Experiential Pedagogy to Increase Counselor Competencies.”

*FAMCD President Daniel Balva will be presenting on “Persons with Disabilities: A Forgotten Minority.”

*FAMCD Secretary Maria Davis-Pierre will be presenting on "Autism And The Black Family."

*FAMCD Latinx Concerns Chairperson Laura Finnell will be co-presenting with Bethany Russell on “Ethical Dilemmas: Navigating the Use of Child Language Brokers in the Counseling Session.”

*Laura and Bethany will also be co-presenting a poster session titled, “Linguistic Diversity: The Power of Language in the Counseling Relationship.”

*FAMCD Caribbean Concerns Chairperson Amanda DiLorenzo will be presenting a poster titled, "Counseling and Sustainable Development: Partnership with Developing Countries Post-Disaster."
FAMCD is proud to be collaborating with The Well to provide Florida clinicians with a Qualified Clinician Supervisor Training.

This training meets the approval of the Florida Board of LMHC/LMFT/LCSW for 12 CE hours.

**When:** October 19th-20th, 2018
8:00 am-3:00 pm

**Where:** The Well for Life and the New Vision at the Well
833 22nd Street South, Suite B
St Petersburg, Florida 33712

**Contact:** Dr Shon Smith fcaoffice@flacounseling.org 305-814-9460

More information about the event and event registration can be found [here](#).