Dear FCA Members,

It is with great pride and humility that I introduce myself as your current President of the Florida Counseling Association (FCA). I am grateful to have opportunities to know and learn from many professional counselors within the (FCA) family and am looking forward to getting to know and working with you. The goals that I have for my presidency are (a) supporting and further developing FCA by increasing membership and membership involvement to serve the counselors and people in Florida, (b) supporting and mentoring new and seasoned leaders, (c) engaging in advocacy efforts within our profession and for those we serve, and (d) strengthening multicultural and ethical competencies in our work.

Florida Counseling Association operates through the work of skilled counseling professionals and students who volunteer their time to serve on the executive board and in other capacities within the organization. Therefore, we are always looking for individuals who would like to get involved in FCA. If that is you, please feel free to contact me at dribjfca@gmail.com to discuss how you may get connected and serve. It is definitely a team effort to keep FCA running smoothly, and we are stronger together. I look forward to seeing and hearing from you soon and seeing you at an upcoming professional event.

Humbly,

Letitia Browne-James, Ph.D., LMHC-S, NCC
What’s in a Name?
Power, Privilege, and Oppression
LaTonya Summers, PhD MAC NCC LPCS LCAS
FAMCD President

“What’s in a name?” Shakespeare penned, as Juliet Capulet questioned the worth of Romeo’s surname. Montague, a name that meant forbidden since the Montagues were blood rivals to Juliet’s family. Yet, to Juliet the name meant nothing because if Romeo had been born into any other family he would still be just as wonderful.

Centuries later, there are people who believe like Juliet—that names carry no worth, especially those belonging to people of color. To the privileged, people of color have names that are weird, inconvenient, and take too much work to learn. Those with presumed power have refused to learn ethnic minority names and instead have shortened or changed them to their liking. One of the first ways to honor a person who is culturally-different from ourselves is to learn their name.

My first name is LaTonya, pronounced luh-ton-yuh. I love how it rolls off the tongue when I say it and hear it. Moreover, it proves Juliet—who believes that names don’t have worth—wrong as its Russian-Latin translation is inestimable. LaTonya means “worth too great to calculate.” Yet, I get called LaToya, LaTasha, or Tonya. Once, I met a woman who told me she could not pronounce my name and asked if she could call me L.T. Talk about privilege, power, and oppression.

A well-known study was conducted about the relationship between ethnic names on applications and job call-backs (Bertrand & Mullainathan, 2004). The results showed that applicants with White names were called back 50% more than Black-named applicants. This study was replicated in the counseling field (Kugelmass, 2016), and it was found that ethnic-sounding voices left on counselors’ voicemail got fewer return calls for appointments than White-sounding therapy seekers. This may be the reason why today we find many ethnic minority children with White names, perhaps parents want to ensure their children have a fairer shot at employment and other life outcomes. However, an old study by Terrell, Terrell, and Taylor (1988) found that Black adolescents with Anglo names had less self-concept than those with Black names. If still true, this could be interpreted as ethnic minority people with White names may be more likely to get jobs but lack the self-confidence to stay there.

In a profession that requires us to be culturally competent, I challenge each of us to honor culturally-different clients by learning their names; and when applicable, help them take pride in them. Think about this if you are a parent: how long did it take you to name your child? I had one parent tell me she did not name her child until he was born. She had to see his face to know what to call him. If we take that much time and pride in naming our children, then let’s respect the person who sits in our offices by calling them the name they came into the world with. By any other name, they would still be worthy of our respect.

--Dr. LaTonya M. Summers is an assistant professor of clinical mental health at Jacksonville University where she conducts research to improve mental wellness in Black communities. She serves as the 2019-2020 FAMCD President.
An ongoing wave for social justice and advocacy is sweeping across the counseling profession. The wave is calling for counselors to expand their roles beyond the counseling room as advocates for the populations they serve. This wave had been generated by notable counseling professionals over the course of the past half-century (Steele, 2008). In fact, shortly following the installation of multiculturalism as the fourth force in counseling, scholars predicted that social advocacy would follow as the fifth force in counseling. Such a prediction was made in response to societal concerns regarding war, sexism, racism, and civil rights (Smith, Ng, Brinson, & Mityagin, 2008). Today, proponents within the counseling profession have long embraced the notion of advocacy as the fifth force in counseling (Myers & Sweeney, 2011; Ratts, Singh, Nassar-McMillan, Butler, & McCullough, 2016; Roysircar, 2009).

Despite this ongoing development in the counseling profession as a whole, the growth in research regarding the multifaceted relationship between advocacy, counselor education, and counselor supervision is relatively new. In 2003, the American Counseling Association adopted competencies oriented toward client advocacy (Lewis, Arnold, House, Toporek, & Daniels, 2018). Since its inception, there has been significant empirical evidence making clear that a safe, equitable, and fair political environment is mandatory for healthy human psychosocial development to occur (Fleuridas & Krafcik, 2019). Smith, Ng, Brinson, and Mityagin (2008) observed an increase in advocacy publications in counselor education journals from a meta-analysis of 78 empirical pieces. Despite this increase, only 10% of research articles published in counselor education and supervision journals focused on social justice in counseling (Smith, Ng, Brinson, & Mityagin, 2008). Most recently, the Council for Accreditation of Counseling and Related Educational Programs (2016) installed academic standards that promote advocacy within the counselor identities of doctoral students.

Understanding how individuals become advocates can provide useful information for counselor educators to effectively craft their pedagogical approach.

Developing the will to engage in social justice and advocacy

To date, there are multiple models that are designed for counselors to lay the foreground for organized advocacy activities to occur among counselors (Freire, 1993; Goodman & West-Olatunji, 2009; Lewis, Arnold, House, Toporek, 2018; Ratts et al., 2016). Prior to examining existing models for social justice and advocacy, to understand how counselors develop the will to engage with social justice and advocacy may be helpful. Understanding how individuals become advocates can provide useful information for counselor educators to effectively craft their pedagogical approach.
In seeking understanding as to how individual counselors become advocates for social justice, Swartz, Limberg, and Gold (2018) sought to understand the process through the lens of grounded theory. Through their efforts in collecting information from ten exemplar counselor advocates, they found that the generation of social justice interests were concurrent with multiple elements. Such elements included an increased awareness of their own unmet needs, specific personality characteristics, experience with helplessness, exposure to injustice, oppression, and racism, incitement of spiritual beliefs, experiences with social movements during childhood, and increased experiential knowledge of privilege (Swartz, Limberg, & Gold, 2018).

In utilizing this information, the research suggests to thoughtfully implement such themes into counselor education curricula and supervisory relationships. More specifically, this information may help counselor educators and supervisors to become more intentional about designing objectives in a manner that prepares the counselor to serve oppressed, marginalized, or underserved populations (Swartz et al., 2018). As empirical evidence has demonstrated the detrimental impacts of oppression, prejudice, and racism (Nurius et al., 2013; Ratts et al., 2016), counselor educators and supervisors should be mindful to be sensitive toward the previously identified themes within the experiences of counseling students. Counselor educators should be careful in their craft of creating a classroom conducive of social justice and advocacy.

Applying Pedagogy towards Social Justice and Advocacy

There are multiple pedagogical perspectives that seek to integrate the advocate into the counselor identity (Freire, 1993; Ratts & Pedersen, 2014). A model that has propelled pedagogy toward recognizing social justice issues is the Liberation Model, which highly emphasizes the concept of critical consciousness. The concept of critical consciousness is succinctly defined as the development of awareness toward societal dynamics and one’s own social position. More specifically, critical consciousness recognizes one’s position regarding privilege and one’s role in societal dynamics that inadvertently generates oppression against underserved populations (Freire, 1993).

Based on the original works of theorist Paulo Freire (1993), the Liberation Model was designed to bring social justice issues toward the forefront of counselor education among master-level counseling students (Steele, 2008). This model emphasizes a problem-focused approach that promotes mutually agreeable content between professors and students. This approach involves a multiphasic process that gradually places students into the shoes of social justice advocates through investigation, examination, deconstruction, and application (Steele, 2008).

One of the more recent models that seeks to promote advocacy work among counselors is referred to as Critical Pedagogy (Decker, Manis, & Paylo, 2016). The foundation of Critical Pedagogy rests on its function to increase cultural awareness, societal dynamics, and systemic oppression, and is rooted from the nuanced experiences of the civil and human rights movements (Freire, 1968). Born from the works of Paulo Freire, the Critical Pedagogy approach shares a common foundation in the constructivist-developmental perspective (McAuliffe & Eriksen, 2011).

Critical pedagogy delineates multiple activities in which counseling students are promoted in their growth as future advocates. Major themes of activities include fostering multicultural skills, inclusion of social change and advocacy theories, incorporation of reflexive exercises, attention toward present-day current events, incorporation of social justice case studies, and the assignment of real life advocacy work (Decker et al., 2016).
Social Justice and the Supervisory Relationship

The incorporation of Social Justice in Counselor Supervision also hinges on the moral imperative as the supervisory relationship may present as an exemplar of a power relationship for many counselors-in-training. Thus, addressing power, privilege, and oppression in the supervisory relationship is critical for supervisees to emulate with their clients (Chang et al., 2009; Glosoff & Durham, 2010). Furthermore, the supervisory relationship can be a conducive environment for critical consciousness to develop as self-awareness is often a theme among a host of supervision models (Bernard & Goodyear, 2009).

To date, the perspective of Paulo Freire has been conceptually posited to fit within the supervisory relationship. Glosoff & Durham (2010) share a rationale for promoting social justice activities within supervisory relationships. In their work, Glosoff and Durham (2010) emphasize the utilization of the supervisees cognitive complexity toward social justice issues, focused and bilateral discussions surrounding issues of culture and power (Vera & Speight, 2003), reflexive interventions, and structured instruments designed to explore social identities and experiences regarding systems of privilege and oppression.

Call to Action in Counselor Education and Supervision

Indeed, there is a lore of models that are specifically designed to promote critical consciousness in counselor education and supervision. In fact, the opinion is that there is a multitude of outstanding counselor educators who are currently active in such an endeavor. Yet, the literature recognizes factors that act as barriers to entry for advocacy to become fully integrated into counselor education (Decker, Manis, & Paylo, 2016). One factor represents advocacy work as a higher order task; one that assumes counseling students to expand beyond helping the individual, placing aside longstanding values and politics, in order to promote change on a societal level (Smith, Reynolds, & Rovnak, 2009). Another factor is perceived unpreparedness to engage in advocacy as a result of inadequate preparation throughout counseling programs (Chang & Gnilka, 2010; Decker, Manis, & Paylo, 2016).

Nevertheless, the strong recommendation held is to increase representation of critical consciousness in the counselor education and supervision literature. First and foremost, practicing counselors should utilize their training to develop an advanced familiarity with the previously identified concepts. Moving forward, as conceptual maps regarding social justice in counseling have long been delineated, there is an urgency toward continuous empirical support for the critical experiences of counselor educators, supervisors, students and supervisees as advocates. With hard data, the perceived dearth in quantitative support toward social justice in counselor education could be replaced with an advanced dialogue for social justice advocacy: such a dialogue would be extended into both the classroom and supervisory relationships. This advancement could solidify a paradigm shift in counselor education and supervision that promotes continuous and consistent social-justice-oriented pedagogy within counselor education and supervision programs across the world.

Leo Balseiro is a Mental Health Counselor and Marriage and Family Therapist. Currently, Leo is working toward a Doctorate of Philosophy at Barry University with an emphasis on Counselor Education and Supervision.
References


McAuliffe, G., & Eriksen, K. (2011). Handbook of counselor preparation: Constructivist, develop-


The Florida Counseling Association Day at the Capital in Tallahassee is now scheduled for February 18, 2020. Join fellow FCA members and partners in taking our message to our representatives. We would like to have all participants to arrive by 9:30am at the front steps of the Capital for a picture. We are requesting that each counselor/student schedule meetings with your house representatives and senator by going to the following link: https://www.votervoice.net/COUNSELING/Home

Once there, you can type in your zip code and home address. Click on your State Senator’s and State Representative’s link and their Capital and District information will appear. Use the capital phone number to contact your legislature’s office and schedule your appointment. We are also looking forward to sitting in on committee hearings that day. We will provide more information as the days agenda is solidified.

Be on the lookout for FCA’s Legislative Platform which will be available soon!

SB 540/HB 851 Human Trafficking
https://www.flacounseling.org/resources/Documents/HumanTraffickingTalkingPoints.pdf

SB 84/HB 109 Conversion Therapy Ban
https://www.flacounseling.org/resources/Documents/ConversionTherapyTalkingPointsFINAL.pdf

Florida Bills of Interest
Growing up Jewish and queer in a conservative part of Birmingham, Alabama, I faced some pretty severe bullying as a child and teenager. It was a common occurrence for me to be called anti-Semitic slurs and mocked for looking and acting different. I was excluded by almost all of my classmates and had very little social support.

As a result, I struggled a great deal with my mental health. I felt depressed and anxious almost every day, and there were times when I felt sheer panic and terror about the prospect of attending school. Because I never seemed to fit in, I was completely convinced that I was fundamentally unlikeable, and that the only positive quality I possessed was my near perfect academic track record. So, on top of the anxiety and depression I felt as a result of being bullied, I also put enormous amounts of pressure on myself to score perfect grades. Any score less than a 100 would send me into a spiral of shame and self-hate.

I cried a lot, and this worried many of the adults around me. I was sent to a number of therapists throughout my childhood. Most of them focused on figuring out ways to get me to stop crying so much; I was prescribed medication, exercise, and an array of breathing techniques. Some of them worked on encouraging me to act more “normal” - maybe if I didn’t talk about my academic interests so much, or if I stopped trying to be the “teacher’s pet,” or if I were just less sensitive, then more of my classmates would like me. While some of the advice was useful, there were many times when I walked out of therapy continuing to feel like something was wrong with me - like it was my fault that I was being bullied, because I was just too weird and different to understand how to act like everyone else. More than anything else, I was frustrated with myself for not being able to stop crying or feeling depressed.

My experiences with and perspective on therapy drastically changed when I went away to college. After struggling considerably with the transition to a new city and a new environment, I reluctantly sought counseling from my university’s mental health center. I can still remember my first session. After answering some questions about my childhood during the intake, I remember saying, “I know I must seem really messed up. Everyone hated me in high school, and now I just started college and I still don’t fit in. There’s something wrong with me, I know it. I just can’t fit in anywhere.” I could feel myself start to tear up, and I immediately apologized for crying. “And on top of that, I am so overly emotional! I must be your worst client.”

My new counselor raised his eyebrows, looking up from his notes. “I was actually about to say that the way you’re reacting seems normal to me. It sounds like you had a pretty difficult time in school, and that was hard for you - it would be for anyone. And the transition from high school to college is hard too - which is also normal! I don’t know if I’ve met anyone who didn’t struggle to make friends in the first few months of college. I think it shows that you have a lot of resilience to get through all of that and to reach out for help.”

I was shocked. Here was a counselor who was not saying anything was wrong with me, or that I needed to change myself to fit in better. In his opinion, I was having a natural reaction to the circumstances I’d been through. I’d never heard anything like it before.
Over the next several months, I went from viewing myself as an unlikeable weirdo to a person who is different (and perhaps weird, in a good way!) but still deserving of acceptance and belonging. I started to see my uniqueness as a strength. Instead of encouraging me to change myself to fit in, my counselor empowered me to seek out on-campus groups and spaces where I would be accepted. I joined my campus Hillel as well as Active Minds, a student mental health organization. He also encouraged me to stand up for myself in instances of bullying. Above all, he never pathologized my emotions or told me it was wrong to feel sad or depressed. I finally felt that I was given the space to process and react to some of my experiences as a child.

After my experiences with mental health struggles and therapy, I began to get involved with initiatives and organizations developed to combat prejudice and social injustice. I interned at the Anti-Defamation League of Philadelphia during my senior year of college, and I completed an honors thesis on weight-based bullying, i.e. bullying due to a child’s weight or size. Eventually, through my coursework and through my involvement in a few different advocacy communities, I found my way to disability studies, a discipline that centers the voices of people with disabilities and explores philosophical, cultural, and sociological perspectives on the experience of disability. Generally, the field of disability studies challenges the idea that disability is solely or primarily an individual defect in need of medical treatment, and posits that disability is the result of a multitude of factors, including societal exclusion and inaccessibility. The perspectives encompassed by disability studies greatly resonated with me as a person who cares deeply about challenging social injustices and exclusion rather than primarily changing individuals. Over the past several years, I have become intricately involved with disability studies research and advocacy.

One of my most pivotal moments within my advocacy career has been coming to view myself and accept my identity as a person with a psychiatric disability. Embracing that identity has allowed me not only to accept myself and reduce my shame around having experienced mental health struggles, but also to become connected to a community of people with similar experiences and perspectives. I started working with the National Empowerment Center, an organization led by and for mental health consumers, and helping develop advocacy initiatives, educational programming, and workshops that center the voices of people with lived experience of mental health challenges and advocate for increased self-determination and acceptance of people with psychiatric disabilities.

For me, the most meaningful and fulfilling part of my work has been spending time with people with psychiatric disabilities, sitting with them through difficult times and empowering them to advocate for their rights and self-determination. My work has often included responding to people in crisis and providing space for people to experience strong emotions and extreme states.

My passion for that kind of intensely interpersonal, relational work sparked my interest in becoming a mental health counselor. As I began to explore the possibility of pursuing a graduate degree in counseling, I became increasingly certain that it was the right choice for me. There is little that I care more about than supporting people with psychiatric disabilities to gain agency over their lives and experience community, connection, and meaning. However, I also wondered how my disability studies background and perspective would fit with my role as a counselor. While the disability studies field seeks increased acceptance and accommodation of disability in society, the counseling field often seeks to treat or prevent psychiatric disability. Would it be possible to reconcile both of these goals and perspectives?
I am only in my third semester of graduate school, so I have yet to fully know how I will integrate my disability studies background with my role as a mental health counselor. However, I believe it is quite possible to do so. In my own experience with counseling at my university’s mental health center, I felt that my counselor focused much more on encouraging me to accept myself and find spaces where I would be accepted than changing me or fixing me. I hope to take this same general approach with my clients. I believe that person-centered therapy and other humanistic approaches to counseling provide an excellent framework to do so; these approaches require therapists to work with clients from a standpoint of unconditional positive regard, and to support clients in discovering their strengths rather than operating from a deficit-based model.

I also believe that it is important to learn from counseling approaches developed by and for other marginalized communities. For example, while homosexuality used to be pathologized as a mental illness in the DSM, many counselors now practice LGBTQ-affirming therapy, which supports LGBTQ clients in accepting themselves and decreasing any feelings of shame they may have around their identities. Similarly, feminist therapy focuses on empowering women and people from other marginalized groups to advocate for themselves and challenge injustice in their daily lives. Similar approaches could be applied to counseling clients with disabilities, including those with psychiatric disabilities.

I do not mean to say that psychiatric disabilities should never be treated or prevented. Many people with psychiatric disabilities want treatment including cognitive behavioral therapy, dialectal behavior therapy, and/or medication. Exercise and breathing techniques should not be discounted, as they are very useful for many people. However, there is no reason why the social and systemic factors impacting a person should not also be explored. In fact, according to the American Mental Health Counselors Association Code of Ethics, counselors have an ethical and moral obligation to encourage people with disabilities to advocate for themselves. If a client is facing prejudice or discrimination on account of their psychiatric disability or other disability (or other difference), it may be helpful to explore ways to address that. Counselors can also encourage clients to request disability accommodations and provide linkages to organizations where they might find acceptance and social support, such as peer-run wellness centers and peer support groups.

The American Counseling Association’s 20-20 Consensus defines counseling as “a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals.” I believe that the disability studies field complements and enhances this goal, and does not take away from it. As a future counselor with a disability, I look forward to empowering my clients to accomplish their goals and stand up to any injustice that stands in their way.

NEW FCA MAILING ADDRESS:
Florida Counseling Association
2750 Taylor Avenue
Suite A-36
Orlando, Florida 32806
2020 FCA Convention Call for Proposals

Join us for the 71st Annual Florida Counseling Association Convention
“2020 Vision: Obtaining Ethical Clarity in Counseling”

October 2nd and 3rd, 2020
USF Embassy Suites

Call Opens: February 28th -- Submission Deadline: April 30th, 2020, 11:59 pm ET

Education Sessions make up the core of the convention presentations

Three Tracks:
Clinical Session: a 90-minute presentation that may include conceptual discussion, experiential component, and/or research symposia surrounding various topics directly related to the counselor (i.e. the clinician, the therapeutic relationship, the counseling session, etc.).

Professional Skill Building Session: 90-minute presentation that primarily focuses on advance training and information on a topic related to counseling field, which should include an experiential instructional component.

Research Session: 90-minute presentation that primarily focuses on more in-depth exploration of a counseling topic or dissemination of research findings directly related to the advancement of the counseling profession.

Choose from Two different formats:
• 90-Minute Educational Session
• 60-Minute Poster Session

PROPOSAL CONTENT

Presentation Title

Program Synopsis A brief description of the presentation content that applies to the convention theme, best practices for counselors and mental health practitioners and relevant and timely to the convention topic areas. Limit description to 50 words. (Will be included in the Convention Program).

Program Description Well-articulated presentation of program content. Include presentation learning outcomes: summary of information, best practice(s), research to be presented; presentation method (panel, lecture, large/small group discussion, demonstration, media); relevance to the convention theme; targeted audience. Limit description to 150 words.

Learning Objectives Include 3 learning objectives.

Research Based References Provide only 3 references supporting your presentation in APA format. Proposals will not be considered unless they are research/evidence-based topics that have corresponding references.

Resume/Vita Required for 90 Minute Educational Sessions In order for your proposal to be reviewed, you must submit your resume/vita to conventionFCA@gmail.com. This must be received for your proposal to be reviewed/accepted. (This is required for Continuing Education approval.)

Technical support with electronic submissions is available by contacting the FCA office: fcaoffice@flacounseling.org.

For general questions regarding the proposal, please contact the 2020 FCA Convention Committee Chairs, conventionFCA@gmail.com.

All proposals must be submitted using the online form on the FCA website http://www.flacounseling.org.
Save the date!

3rd Annual FCDA Summit

April 17, 2020 | Orlando, FL
University of Central Florida Career Services

More details to come!
Visit https://www.flacounseling.org/FCDA for updates
SAVE THE DATE

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2020 Vision: Obtaining Ethical Clarity in Counseling

10.02.2020-10.03.2020 | USF Embassy Suites | Tampa, FL
Pre-Conference sessions on 10.01.2020

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