Dear MCA Members,

As we enter this season of spring and renewal, I encourage you to take time for self-care and reflection on your personal and professional goals. For myself, attending the annual ACA Conference is part of my self-care as a respite from my clinical work with a chance to focus on learning new interventions as well as connecting to other colleagues.

During the ACA Conference, I assisted with the Southern Region booth in the Expo center and met many current and future MCA members. I participated in our annual Southern Region business meeting as well as the ACA Membership meeting. Although these meetings take place during some education sessions, I would encourage you to attend these meetings in the future to share your voice and opinion with ACA Leadership. Finally, we had a successful joint reception with Johns Hopkins University, National Employment Counseling Association (NECA) and the American College Counseling Association (ACCA).

With the sudden closing of Argosy affecting many of our members, MCA reached out to build on the relief offered by ACA and CACREP. Proudly, we pulled together to set up supports for members needing assistance or mentoring. In conjunction with MCSJ, we are hopeful to have additional resources available to address the needs of those affected.

We have plans for many future workshops and events with MCA! I invite you to join us to celebrate our outstanding MCA Members with our Awards Banquet this year on May 4, 2019 from 3-5pm at Ted’s Montana Grill, located in Downtown Crown, 105 Ellington Boulevard, Gaithersburg, MD 20878. Registration information is on our website.

Continuing with our theme of Advocacy this year, I am pleased to announce that Senator Chris Van Hollen has agreed to co-sponsor S.286 the Mental Health Access Improvement Act of 2019, "a bill to amend title XVIII of the Social Security Act to provide for the coverage of marriage and family therapist services and mental health counselor services under part B of the Medicare program, and for other purposes.” Our Advocacy Team continues to meet on a monthly basis and our elected representatives are delighted to engage with their constituents.

To address some financial challenges with our organization, MCA sought supervision and assistance from other state branches, Southern Region as well as ACA Headquarters. I am happy to say we have a solid financial plan in place for the future. This includes:

- Application to become a 501(c)(3) non-profit which will allow us to have tax-exempt status
- Realistic budget
- Increased number of educational workshops offered to members
- Decrease expenses and fees
- No increase in membership fees

Currently, our Executive Board is going through a period of growth and change during this season as we begin the transition towards new leadership in July. I am excited to see the plans of our next President-Elect, Dr. Ajita Robinson. I appreciate our members who have stepped up to volunteer in key positions, those board members who have served well and will be moving on to their next professional chapter and to those who are returning to MCA.

Finally, it has been my pleasure to serve our membership during my tenure as President. I look forward to supporting our next President, Dr. Ajita Robinson and MCA.

With deepest appreciation,

Catherine “Cathie” Eaton
LCPC-S, GCDF, NCC
President, Maryland Counseling Association
Pastoral Counselor and Psychotherapist
240-401-8686

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JOB OPENINGS

➢ Psychiatric Rehabilitation Specialists (Part time and full time)
  Full time 40 hours required weekly
  Part time 20 hours required weekly

➢ Addictions counselors to conduct 9 hours weekly groups for intensive outpatient and 6 hours weekly for outpatient

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Sundays - By Appointment Only

brightfuturehealthcareservices@gmail.com
INDEPENDENT LICENSED MENTAL HEALTH THERAPIST

BACKGROUND:

Hopeful Counseling, LLC is seeking an independent licensed mental health clinician to join our growing team! We are looking to hire a clinician who is a self-starter and highly motivated to learn and continue to sharpen their clinical skills! At Hopeful Counseling, LLC, you are able to create your own schedule and independently manage your caseload. You will complete your paperwork in our electronic health record system, as we manage the billing process through invoicing each week. We will oversee the process of credentialing with insurance panels (upon request).

JOB OVERVIEW & DUTIES:

As part of our network of independent licensed therapists, you will be required to:

- Provide clinical assessments, render/confirm diagnoses, and determine additional treatments to agency referrals (as needed);
- Arrange assessments and other sessions in line with availability of other required personnel and office space;
- Conduct individual and family therapy, within the scope of your expertise
- Organize your own schedule and set appointments with clients based on agency referrals; and
- Maintain a caseload of a minimum of at least 5 clients every week.

You will be working as an independent contractor and carry your own liability insurance. The expected salary range for this position depends on work productivity (details are outlined within the contractor’s agreement) with no additional benefits.

ADDITIONAL DETAILS & REQUIREMENTS:

- You must be a licensed clinician (LGPC, LGSW, LCPC, LCSW-C, or LCMFT).
- For graduate counselors and/or social workers (LGPCs & LGSWs), weekly or bi-monthly supervision will be offered in support of securing full licensure at no cost.
- You must be able to complete your CAQH application and obtain a NPI number.
- You must be willing to work independently and demonstrate the ability to do so.

HOW TO APPLY:

To apply for this position, please send your resume to Dr. Lenese Stephens at DrStephens@hopefulcounseling.org.

The intentional act of physically hurting oneself in order to relieve psychological or emotional pain seems utterly confusing, scary, and counter intuitive. It is fair to ask “If someone is already in pain, why would they intentionally inflict more pain onto themselves?” Further, why would someone inflict pain that leaves behind scars that will be seen by others?

I have specialized in treating teenagers that self-harm for the last 15 years. During this time, I have had the unique opportunity to get a behind-the-scenes look into the thoughts and emotions of those who choose self-harm. What most people don’t understand is that people who self-harm see this as relief instead of a form of pain. There are many reasons why teenagers engage in self-harm. One aspect is the endorphin theory; when we are hurt, we produce a rush of “feel good” endorphins throughout the entire body. This rush of endorphins can not only create a soothing sensation, but also become very addicting.

Since self-harm can provide some temporary relief, most teenagers will share that it “feels good” in the moment. However, it’s the after effect and ramifications of self-harm that tend to have the most devastating emotional consequences, and results in your loved ones having a distorted view of themselves and the world around them. It is the psychological impact of self-harm that often promotes a deeper craving to punish or hurt through self-harm, which in turn often leads to deeper feelings of shame and guilt. In this lies the deceptive danger of self-harm that can so easily lead into a slow, self-destructive, addictive cycle, resulting in deeper or more frequent cuts as well as fostering more self-hatred.

However, before we detach ourselves too much from those suffering emotionally, physically, or psychologically, we should ask ourselves in what ways do we also self-harm? Although many people have not physically picked up a razor to cut themselves in an attempt to cope with life, many have vices or negative habits that are also self-destructive.

Whether it is alcohol, cigarettes, vaping, food, drugs, pornography, being a workaholic or any other vice, the self-destructive formula is still present and affects millions of adults. When adults are in pain or feel out of control or overwhelmed, they look for ways to either numb the pain, escape or simply yearn to feel better in the moment. Even though they know these decisions do not actually solve the underlying issues, adults can easily succumb to the temptation of these vices because they provide temporary relief in the moment.

While some of these behaviors may provide temporary relief, most adults would also acknowledge they are not healthy habits or rituals and often lead to more shame and guilt, in addition to becoming more addictive. Yet, even in knowing these facts, many continue to choose behaviors that only harm instead of focusing on solving the problems or addressing deeper emotional issues in life.

In reaching out to someone struggling with self-harm keep in mind that although the choice of how to cope may be different, many adults have much more in common than we might acknowledge at first glance. Many of us choose to intentionally participate in vices and behaviors that manifest harm in some capacity even if the physical effects similar to self-harm are not present.

Christian T. Hill, M.A., the Self-Harm Expert, can be contacted at 719-233-TEEN or selfharmexpert@gmail.com.
Self-harm and the Helper Personality Written by Christian T. Hill, M.A., Self-harm Expert

A helper personality is someone whose nature is wired to not only help others, but sometimes help others at the expense of themselves, especially when in their teenage years.

As Elissa entered my office, she physically sought out the furthest possible place from me, positioning herself on the couch, sinking into the seat, trying to disappear into the safety of the cushions. Pale-skinned and with unkempt hair, Elissa, in her own words, dressed that day to “be invisible”.

It’s so important to take the time and patience to make a new teen client feel calm, comfortable, and safe, slowly engaging in light conversation and gauging what the client is and is not comfortable with. It takes courage to come in, as teens are often overwhelmed and shameful, and sharing with a stranger is a challenge. It’s important to resist the urge to ask the obvious, over-arching question with self-harm teens: “Why?” What leads one to desire external pain, to prefer pain, to seek to harm themselves?

The answers to questions such as this are rarely simple. My acronym, S.C.A.R.S., helps summarize common themes behind the reasons for self-harm: Self-punishment, Control, Attention, Regulation of mood, and Self-expression.

While Elissa’s issues were a bit unique, I quickly learned she fell under the category of Control. Elissa’s life, for the most part, was actually pretty good: a loving family, decent grades, and hobbies, like writing, horseback riding, and music. However, what was troubling Elissa the most was not necessarily something going on in her life, but in the lives of the people she loved the most.

Elissa explained her parents had recently been fighting a lot, and although both parents assured her it was not her fault, Elissa blamed herself. She believed she should be able to mend it, and this looming disappointment became so overwhelming with mounting self-hate. Simultaneously, Elissa’s best friend Amber had begun feeling suicidal, sharing her thoughts with Elissa, another burden that Elissa took personal responsibility for as she helplessly watched her friend struggle.

At this point in her journey, it became clear: Elissa has a “helper personality”. Even though she is practicing self-destructive behaviors, these actions actually originate from good place, deep inside her, stemming from a desire to help and heal others.

The good news is after doing this for over 15 years, as teens who self-harm grow and mature, eventually, many of them end up in the helping profession, as either counselors, educators, medical professionals, or working for a non-profit. This is an important commonality when it comes to understanding them, to help them untwist this belief that they are responsible for others, and help them find focused ways to exhibit that helper personality trait. Once we help them learn to view themselves differently and recognize what is and is not their responsibility, the scars and behaviors tend to take care of themselves.

If you know someone who is struggling with self-harm or suicidal thoughts, always seek professional help. Please refer to the following: National Suicide Hotline: 1-800-273-8255 and Hopeline NC: 1-919-231-4525 (call or text).

Christian T. Hill, M.A., the Self-Harm Expert, can be contacted at 719-233-TEEN or selfharmexpert@gmail.com.
Howard University, Department of Human Development and Psychoeducational Studies

The Department of Human Development and Psychoeducational Studies at Howard University consists of an undergraduate program in human development, a master’s program in school psychology and counseling services, and doctoral programs in counseling psychology, educational psychology, and school psychology. The programs reflect Howard University’s commitment to addressing the needs of urban and diverse school systems by expanding the pool of diverse and well-prepared professionals. We seek candidates who are committed to these same ideals and wish to contribute to our learning community.

Howard University

Howard University is a federally chartered, private, coeducational, nonsectarian, historically black university located in Washington, D.C. It has a Carnegie Classification of Institutions of Higher Education status of RU/H: Research Universities (high research activity). Howard University’s commitment to preparing educational leaders dates back to 1890. The School of Education seeks to improve and expand educational opportunity and access, particularly for African Americans and other underserved communities with a strong institutional commitment and capacity for advancing educational leadership preparation, research, and practice.

Tenure-track Assistant/Associate Professor of Counseling Services

The Department of Human Development & Psychoeducational Studies at Howard University is seeking applicants for a full-time, tenure track position in Counseling Services. The appointment is at either the Advanced Assistant or Associate Professor level and available for start in August 2019. We are seeking a candidate who can also serve as Coordinator of the Counseling Services program.

Position Details:
Candidates can expect to work in a productive, collegial atmosphere centrically nested in the multicultural, scientific, and educational richness of the Washington D.C. metropolitan area. The Counseling Services program is seeking to strengthen its faculty with a candidate that possesses evidence of expertise in school counseling, knowledge of the ASCA Model, and knowledge of CACREP standards and accreditation.

Candidate Details:
The salary is competitive. Strong candidates for the position are those who: possess a proven track record of clinical experience/expertise; demonstrate potential/productivity in terms of research and external funding; and have the ability to teach across these areas: contemporary school counseling, organization and administration of school counseling, diversity and counseling, practicum/internship, and career counseling. Candidates also must demonstrate a strong interest in, and commitment to, diversity and culturally responsive teaching, research, and practice. Candidates must hold an earned doctorate in counselor education from a CACREP accredited program OR hold a doctoral degree in counselor education or a related field (i.e., Counseling Psychology, School Counseling, Mental Health Counseling, etc.) and have been employed as a full-time faculty member in a counselor education program at a University with CACREP accreditation. Other requirements include existing certification/licensure (or license eligibility) and knowledgeable of CACREP standards. Preferred applicants will have demonstrated promising success in teaching, supervision, and research, along with an established professional identity as a Professional Counselor and Counselor Educator.

Application Information:
Review of completed applications will begin immediately and will continue until the position is filled. Applicants should electronically submit: (a) a letter of application reflecting qualifications and interest, (b) a curriculum vitae, (c) a copy of a valid license and (d) the names and contact information of three potential references to: Howard University School of Education, ASA Building Room 303, Attention: Dr. Mercedes Ebanks, Search Committee Chair, 2441 4th Street, NW, Washington, DC 20059 HDPES@Howard.edu

For inquiries about this position, contact Dr. Mercedes E. Ebanks: mebanks@howard.edu.

Additional information on Howard University, the School of Education and the Department of Human Development and Psychoeducational Studies may be found at www.education.howard.edu

Howard University does not discriminate on the basis of race, color, national and ethnic origin, sex, marital status, religion or disability.
FAMILY THERAPIST (BILINGUAL)

Community-based municipal agency is seeking a bilingual (English/Spanish) therapist with sound strength-based clinical skills to join our collaborative team of dedicated clinicians in a state-of-the art facility.

Clinical services are provided to a diverse population of children, ages 2 – 18 and their families, who are often dealing with complex issues. Although not required, knowledge of play therapy is desired. The agency has a commitment to on-going professional growth achieved through quality weekly supervision, expert consultation and opportunities for on-going professional training.

This 30 hour-a-week position requires two evenings a week. Candidate must possess a master’s degree within the field of mental health and an LGSW, LCSW or equivalent professional license.

The hiring range for the position is between $28 and $31 per hour depending on experience and license, plus a generous benefits package. The position offers flexible scheduling and easy access from the beltway. Join our team! Submit your cover letter, resume and completed application by March 29, 2019 to be reviewed in the first round of the selection process. This position will be open until filled.

Submit your application and supplemental materials on our website: https://collegeparkmd.applicantpool.com/jobs/

For additional information about our services visit: https://www.collegeparkmd.gov/yfs#counseling.

We are an equal opportunity employer.
Support Seniors’ Access to Mental Health Services

Bipartisan legislation in the House and Senate would improve access to mental health services and permit Licensed Professional Counselors to be reimbursed by Medicare.

The Mental Health Access Improvement Act will soon be introduced by Senators John Barrasso (R-WY) and Debbie Stabenow (D-MI). We also expect a companion bill to be introduced in the House in the near future. These bills would enable LPCs to be reimbursed for treating Medicare beneficiaries.

- Licensed Professional Counselors (LPCs) must be licensed in every state and must have at least one postgraduate degree. They help individuals dealing with depression, drug and alcohol abuse, PTSD, chronic pain and other mental health challenges.

- Care provided by Licensed Professional Counselors is covered by Medicaid, but not by Medicare, resulting in far too many seniors who cannot afford to continue seeing a counselor when they reach age 65. Many can afford counseling through their employer-provided health-care plans or Medicaid, but can no longer afford it after they retire.

- One in four older adults experiences a mental health problem such as depression, anxiety, schizophrenia or dementia, according to the American Psychological Association. Depression affects 6.5 million Americans over age 65, according to the National Alliance on Mental Illness.

- The opioid crisis is hitting seniors as hard as it is affecting younger people, largely due to seniors’ frequent use of medication to fight chronic pain. The number of older adults with substance abuse problems is expected to double to five million by 2020, according to the American Psychological Association.

Licensed Professional Counselors can play a vital role in fighting the opioid crisis, depression, and other mental health issues among seniors especially in rural areas where other mental health professionals are scarce. This legislation would allow seniors to have access to much-needed treatment by making counselors eligible for Medicare reimbursement. For more information, contact smacconomy@counseling.org
MARYLAND TRAINING LOCATIONS:
Millersville, Baltimore, Landover, Prince Frederick, and Frederick.

PLAY THERAPY SUMMER BOOT CAMP:
Two weeks during the summer; visit our website for the schedule.

LIVE AND RECORDED PLAY THERAPY WEBINARS:
See website for information. Track A participants may register.

CONTINUING EDUCATION APPROVAL:
CBPS is CE approved for social workers, LPCs, MFTs, school counselors, art therapists, and play therapists to provide continuing education.

CONTACT US AT: cbps2006@gmail.com, www.cbseminars.org. Click on calendar for training dates.

Sonia Hinds, Founder and Director
Why Should You Join MCA?

Membership is important to your professional growth and career development. It provides:

- Continuing education units at discount prices
- Early notification of MCA and all division events
- Current public policy issues and new laws of interest to professional counselors
- Grant opportunities
- Four newsletters with opportunities to publish and advertise
- Leadership training and greatly reduced registration costs to annual, regional or national conferences for board members
- Support and advocacy for professional counseling in the state of Maryland
- Electronic reminders to renew your membership
- A list of events that you have participated in

Click here to join MCA today!

Not ready to join? Choose the non-Member Contact option for a no-cost way to add your name to our email list.
To register for MCA or any of our events, please go to www.mdcounseling.org

Find us on Facebook (@mdcounseling) and Twitter (@md_counseling)

Contact the MCA President for more information about committees and open board positions.

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