MAINE COUNSELING ASSOCIATION

NEWS & VIEWS

WWW.MAINECA.ORG

FALL 2006

Message from our MECA President

By Kay Richmond

The energy at the summer leadership meeting for our MeCA board was positive and almost palpable. Since there was representation from many different branches and divisions, we were all able to hear the concerns and needs of the various groups who make up our membership. It was obvious that we have a strong group with great ideas and strengths in brain storming and with a wide range of resources.

Presiding over this meeting was my first task as acting President and it rekindled my hope to have more active involvement by all our branches and divisions. I have often wondered why it is that there is not more representation from all the different kinds of counselors that this state professional organization embodies. Ben Milster's dogged barrage of letters to many various officials regarding the question of the SAT's being substituted for the MEA's for the Maine's high school juniors and the response his efforts brought, proved the power and potential of this organization. It also proved that the national organization does hear us and will participate with us when we take on an important issue.

Just so you don't think I've lost it, I do realize we haven't "won the battle" but at least there was a significant battle and it has gotten national attention. Who knows how this will all end up ... it's not over yet. Our organization took a stand rather than ignore a situation that had ethical issues for a large segment of our association.

Now let's take this a step further. If another segment of our organization has an issue that has ramifications for that segment of our constituency, we need to hear their voice so that we can be a part of the problem solving and, if necessary, take a professional position. We need to have representatives at our board meetings to hear the issues facing each division and each division needs to have active members at their meetings to hear what is going on at the different levels of counseling work that is all represented by MeCA.

Another point that was brought out at our July meeting was our need to foster involvement with our professional organization in our new counselors who are coming out into the field. It's kind of like the buddy system, in a way. Come to a meeting and bring a friend ... a new counselor who needs to understand that part of being a professional is to belong and participate with one's professional organizations, at all levels - local, state, and national.

So, as we start a new MeCA year, I urge you to jump in and become active with your local division and/or branch. Learn to be a part of this professional organization and how to use the power it can bring to a question.

Maine Association for Specialists in Group Work (MeASGW) Got Groups?

By Terry Mitchell

Greetings all: The newest future division of the Maine Counseling Association MeASGW continues to grow. We have completed the national association start-up kit including a full roster of leadership, 20 members, and initially proposed by-laws. During our first meeting. June 30, 2006, we voted for leadership positions and initial by-laws. I will serve as the MeASGW President this year. Frank Donaldson, MeASGW President Elect, will assume presidency on July 1st 2007. He has been a member of the ASGW for 13 years and is excited about establishing this new division for group workers. Karen Wagner is our Secretary, and Dean Collins has offered to be our interim Treasurer. Currently, we have a growing list of 37 interested members who have asked to become involved. It is important to remember that we are not an "official" division of Maine Counseling Association, or a State branch of the Association for Specialists in Group

Work until such time that those organizations approve our initial by-laws and business members vote on our proposal. Last July 27th and 28th I presented our group to the Maine Counseling Association summer leadership summit and asked that they recognize us. The MeCA Executive Board were enthusiastic and clearly 100% supportive.

The primary goal of MeASGW will be to encourage, support and enhance the advancement of professional group work for counselors in Maine. I envision this association interconnecting with all professional fields of counseling: creating the opportunity for learning together, networking, and professional growth. As counselors, we work in a fast paced, ever-demanding environment that seems impossible to manage at times. My hope for this new division is that counselors would now consider offering

Continued on page 6

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FROM OUR EDITOR - Deanna Hartel

Please do not hesitate to send articles for our next newsletter .As a counseling organization, I believe it would also be exciting to hear from some of our students of any age.Additionally, if you would like to submit an advertisement, send or email a cameraready ad. Your advertisement will run in 3 consecutive issues of News and Views. Please send your check for \$100.00 (made payable to MeCA) to: DeAnna Hartel, Dexter High School, 12 Abbott Hill Road, Dexter, Maine 04930. If you have any ideas, articles or questions please contact me as soon as possible. My email address is dhartel@msad46.org.

Maine Admissions Meeting

By Carlena Bean

The Maine College Admissions Association held its annual meeting on August 16, 2007 at the University of Maine's Hutchinson Center in Belfast, Maine. Jim Slattery, College Board's Chief Educational Manager, shared information regarding the changes, concerns, and plans for the future of "the new SAT." He stated that the College Board is collaborating with the Maine Department of Education in order to meet the requirements of the *No Child Left Behind Act.* The College Board is also reviewing the possibility of incorporating a science examination, in addition to the critical reading, writing and math subjects.

A brief meeting was held to discuss issues common to the Maine College Admissions Association . We discussed the need for more people from the Maine College Admissions group to submit workshop proposals for the MeCA conference.

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RETIRING??

If you are retiring this year, the Maine Counseling Association wants to keep you in the family as an emeritus member (no membership fee). All you have to do is make sure that we have your mailing address and we'll automatically renew your membership each year. Just send your address to Gene Oakes, Membership Chair, at goakes2@verizon.net.

Not My Father's MMA By Jeff Wright

In 1975, three high school acquaintances were admitted to Maine Maritime Academy. Because MMA's reputation for discipline and regimental rigor was well known, my dad stated they would be lucky to make it through the first month. Out of the three, one lasted a day, one stayed a week, and one completed the year but didn't return. Who knew Dad was a visionary. His knowledge of MMA's strictness came from his friends who attended MMA in the early 1950's.

In 1986, I found myself in the employ of Maine Maritime. When I arrived on campus, it seemed like things hadn't changed much since the 50's. "Do as I say" was the order of the day, with little regard for student opinion, input, or services. Campus morale was low, enrollment was down, and applications for admission were dropping.

Just about this time, new leadership took the helm, and evaluated MMA's strengths, weaknesses, opportunities, and threats. A strategic plan was developed to take advantage of MMA's expertise, facilities, and resources. The ebbing tide began to turn. With the incoming current came innovative programming, capital investment, and a collegiate vision. Though holding true to our traditional educational offerings, MMA has experienced more growth in the past twenty years than any college in Maine and, possibly, the nation.

- Increased the number of majors from two to eleven, to include business, systems engineering, and the sciences, offering internships and co-ops in all programs.
- · Doubled our enrollment.
- \$30+ million in capital improvements: renovated residence, recreation facilities, dining services, and classrooms, new simulation, advanced technology, etc.
- · Welcomed non-regimented students.
- Restructured the objectives and organization of the uniformed Regiment into a leadership lab, not military training program.
- Have student representation on Board of Trustees and other decision making boards.
- Increased female enrollment tenfold and field competitive women athletics.
- Maintain outstanding job placement, both nonmaritime related and our traditional at-sea opportunities.

However, with all the investment, development, and growth, MMA battles its historical perceptions (see below). My dad still asks, "How are things on base?" Though we work tirelessly to inform the schools and the general public of our changes, most are unaware of the transformation and lapse into a false familiarity.

But the word of MMA's growth is slowly spreading. Now more than ever, MMA is considered an attractive college option. This fall, MMA welcomes its largest freshmen class in history. Our campus enrollment has reached its capacity of 850, two-thirds of these students are Mainers.

I invite you to plan a visit MMA and the Castine area, either with the family or one of your high school groups. I'd be happy to show you how MMA has progressed into one of the leading colleges in Maine.

Top Misperceptions about MMA

Maine Maritime Academy (MMA) is a high school. Academy in this context is a college where special subjects and skills are taught.

MMA is a private institution.

MMA is a public college, created by an act of the Maine Legislature in 1941.

MMA has limited academic offerings. We have majors in the business, logistics, engineering, engineering technology, science, and transportation disciplines.

MMA is a rigorous military school.

MMA has an "independent" and uniformed student body, mostly depending on major. The "independent" student has similar scheduling and responsibilities as students at most colleges. About 57% of our students are in the uniformed regimental training program, which promotes personal development, leadership and management skills. No "boot camp".

There is a required military obligation.

Only 5% of MMA graduates opt to take a commission in the Navy, Marine Corps, or Coast Guard through commissioning programs like ROTC.

MMA is expensive to attend.

As a public college, MMA costs are comparable to other state universities and colleges.

Women are not allowed.

MMA was the first maritime college to graduate women. Our women's enrollment is expanding, and we offer women's athletics and other programming.

MMA has strict entrance requirements

Like most universities and colleges, we require a traditional college prep course of study with satisfactory academic performance.

Need a congressional appointment to attend.

The application process is similar to that of other state universities and colleges, sometimes easier.

Located on a "naval base".

Our beautiful campus is located in the safe surroundings of Castine village. No gates, no fences.

There are only ocean-oriented jobs available.

We have graduates at Cianbro, Bath Iron Works, Central Maine Power, Coor's Brewing Company, General Electric, Lockheed-Martin, Caterpiller, Duke Energy, Environmental Protection Agency, Dept. of Marine Resources, Honda Manufacturing, and more.

There are no shipping jobs available.

"...one of the highest professional placement rates of any college in the U.S." - Director of Career Services.

Jeff Wright
Director of Admissions
jeffwright@mma.edu
www.mainemaritime.edu

CLINICIAN'S CORNER

If you have a client or student who creates a strong wake in everyone's path—wherever he/she goes AND you find you are spending enormous amounts of time making right what is wrong for them-

READ THIS: Borderline Personality Disorder

Raising Questions, Finding Answers

Borderline personality disorder (BPD) is a serious mental illness characterized by pervasive instability in moods, interpersonal relationships, self-image, and behavior. This instability often disrupts family and work life, long-term planning, and the individual's sense of self-identity. Originally thought to be at the "borderline" of psychosis, people with BPD suffer from a disorder of emotion regulation. While less well known than schizophrenia or bipolar disorder (manicdepressive illness), BPD is more common, affecting 2 percent of adults, mostly young women. There is a high rate of self-injury without suicide intent, as well as a significant rate of suicide attempts and completed suicide in severe cases. Patients often need extensive mental health services. and account for 20 percent of psychiatric hospitalizations. Yet, with help, many improve over time and are eventually able to lead productive lives.

Symptoms

While a person with depression or bipolar disorder typically endures the same mood for weeks, a person with BPD may experience intense bouts of anger, depression, and anxiety that may last only hours, or at most a day. These may be associated with episodes of impulsive aggression, self-injury, and drug or alcohol abuse. Distortions in cognition and sense of self can lead to frequent changes in long-term goals, career plans, jobs, friendships, gender identity, and values. Sometimes people with BPD view themselves as fundamentally bad, or unworthy. They may feel unfairly misunderstood or mistreated, bored, empty, and have little idea who they are. Such symptoms are most acute when people with BPD feel isolated and lacking in social support, and may result in frantic efforts to avoid being alone.

People with BPD often have highly unstable patterns of social relationships. While they can develop intense but stormy attachments, their attitudes towards family, friends, and loved ones may suddenly shift from idealization (great admiration and love) to devaluation (intense anger and dislike). Thus, they may form an immediate attachment and idealize the other person, but when a slight separation or conflict occurs, they switch unexpectedly to the other extreme and angrily accuse the other person of not caring for them at all. Even with family members, individuals with BPD are highly sensitive to rejection, reacting with anger and distress to such mild separations as a vacation, a business trip, or a sudden change in plans. These fears of abandonment seem to be related to difficulties feeling emotionally connected to important persons when they are physically absent, leaving the individual with BPD feeling lost and perhaps worthless. Suicide threats and attempts may occur along with anger at perceived abandonment and disappointments.

People with BPD exhibit other impulsive behaviors, such as excessive spending, binge eating and risky sex. BPD often occurs together with other psychiatric problems, particularly bipolar disorder, depression, anxiety disorders, substance abuse, and other personality disorders.

Treatment

Treatments for BPD have improved in recent years. Group and individual psychotherapy are at least partially effective for many patients. Within the past 15 years, a new psychosocial treatment termed dialectical behavior therapy (DBT) was developed specifically to treat BPD, and this technique has looked promising in treatment studies. Pharmacological treatments are often prescribed based on specific target symptoms shown by the individual patient. Antidepressant drugs and mood stabilizers may be helpful for depressed and/or labile mood. Antipsychotic drugs may also be used when there are distortions in thinking.

Recent Research Findings

Although the cause of BPD is unknown, both environmental and genetic factors are thought to play a role in predisposing patients to BPD symptoms and traits. Studies show that many, but not all individuals with BPD report a history of abuse, neglect, or separation as young children. Forty to 71 percent of BPD patients report having been sexually abused, usually by a non-caregiver. Researchers believe that BPD results from a combination of individual vulnerability to environmental stress, neglect or abuse as young children, and a series of events that trigger the onset of the disorder as young adults. Adults with BPD are also considerably more likely to be the victim of violence, including rape and other crimes. This may result from both harmful environments as well as impulsivity and poor judgment in choosing partners and lifestyles.

NIMH-funded neuroscience research is revealing brain mechanisms underlying the impulsivity, mood instability, aggression, anger, and negative emotion seen in BPD. Studies suggest that people predisposed to impulsive aggression have impaired regulation of the neural circuits that modulate emotion. The amygdala, a small almondshaped structure deep inside the brain, is an important component of the circuit that regulates negative emotion. In response to signals from other brain centers indicating a perceived threat, it marshals fear and arousal. This might be more pronounced under the influence of drugs like alcohol, or stress. Areas in the front of the brain (pre-frontal area) act to dampen the activity of this circuit. Recent brain imaging studies show that individual differences in the ability to activate regions of the prefrontal cerebral cortex thought to be involved in inhibitory activity predict the ability to suppress negative emotion.

National Institute Mental Heatlh

Asperger's Disorder

Handout for Teachers, Counselors and Parents

By Alison Rifkin Westerkamm and Jane Holtscaw Fox National Association of School Psychologists

FACT:Autism Spectrum Disorders occur in 1-2 or more of every 500 births, and 3-4 times more often in boys

Background: Asperger's Disorder (AD) is a pervasive developmental disorder characterized by deficits in social interaction, adherence to rules, routines and rituals, and lack of emotional reciprocity. It is generally equated with high functioning autism; the primary distinction is that people with autism exhibit a significant delay in language skills while those with AD have only mild impairments or peculiar ways of using language. Both autism and AD include problems with social interaction skills and interests which are limited in scope and structure. Children with AD often display clumsiness with fine and gross motor activities, although this characteristic is not necessary for a diagnosis. They typically have intellectual abilities ranging from the average to the superior range of functioning. AD is more likely to occur in males and research studies have estimated that between 20 and 40 per 10,000 people meet the diagnostic criteria for AD. People with AD often have such coexisting problems as tic disorders, attentional disorders or mood disorders.

Key Characteristics:

- **Social interaction:** socially aloof, inappropriate eye contact, typically desire interaction with peers but are unskilled in approaching or sustaining positive interaction; specifically have difficulty taking the perspective of another person and appear to lack empathy.
- Rules/Routines/Rituals: use objects in atypical fashion (e.g., continually lining up toy cars but not "driving" them), insisting that others do things according to a strict structure developed by their own rules, strong desire for orderliness.
- •Language development: may have delays in early childhood followed by a "language explosion" with rapid skill acquisition; may demonstrate hyperlexia (an extraordinarily broad vocabulary) but not understand language usage or pragmatics; may engage in perseverative or repetitive speech; impairments in social uses of language and deriving meaning from spoken or written word.
- **Poor problem solving and organization skills:** difficulties in situations requiring "common sense," organization and abstract reasoning; deficits in mental planning, impulse control, self-monitoring and transitioning from one situation to another.
- Limited interests and preoccupations: may talk at length about some topic of interest only to him/herself one mother described her son's Asperger's experience as "wearing blinders and being able to focus on one thing at a time."
- **Motor clumsiness**: seen primarily at the preschool level, may have visual-motor deficits similar to those of people with learning disabilities.

Diagnosis:

Many students with AD will be undiagnosed or misdiagnosed. Common early diagnoses include autism, a specific learning disability or obsessive-compulsive disorder. Teachers should report symptoms to the child's parents; parents should seek referral to a mental health professional

competent in assessment of psychiatric disorders (i.e., school psychologist, psychiatrist, mental health counselor, clinical psychologist). The assessment should systematically rule out other disorders and determine the possibility of medical intervention, special education programming and therapy. Assessment should include a measure of cognitive ability, academic achievement, speech/language functioning and social/emotional functioning. A comprehensive developmental and family history should be included, as well.

How Can Parents, Counselors and Teachers Help? Although children with AD have similar characteristics, their educational needs may differ. An individual plan, either under IDEA (Special Education) or Section 504 (accommodations for individuals with disabilities), is recommended. Communication between school and home will also be an important factor in the student's success.

Academic Interventions:

- Consistency is essential: Provide a safe and predictable environment where transitions can be minimized; provide a consistent daily routine; prepare AD student for changes in routine and new activities.
- Provide assistance for the student with AD as soon as difficulties are noted. These children are quickly overwhelmed and react much more severely to failure than most other children.
- Emphasize these individuals' exceptional memory; they are typically quite able to retain factual information.
- Do not assume that children with AD understand something just because they can repeat what they have heard. Use brief, concise instructions. Offer added explanation and try to simplify or make new concepts more concrete than abstract.
- The student with AD needs great motivation to not follow his or her own impulses. Learning must be made a rewarding experience and not one that induces anxiety in the student with AD.
- Children with AD generally have excellent reading recognition skills but difficulties with comprehension. Do not assume they have understood what they easily decoded.
- If the student demonstrates visual-motor difficulties, modify expectations and demands for written assignments (e.g., shorten the assignment or provide more time for completion, allow the student to respond orally or into a tape recorder).
- Students with AD require a learning environment in which they see themselves as competent. Without support, mainstream classes may present situations where they cannot grasp concepts or complete assignments, serving only to diminish their self-image, increase their withdrawal, and increase the likelihood of depression. Not all students with AD, however, need placement in a special education classroom. With appropriate levels of support and modifications, many are successful in regular education settings.

www.udel.bkirby/asperger © National Association of School Psychologists, 4340 East West Highway, Suite 402, Bethesda MD 20814 301-657-0270.

Patterns of Co-Dependency

WHAT IS CO-DEPENDENCY?

Co-dependency is a pattern of habitual self-defeating coping mechanisms. This is often a result of living in a home affected by alcoholism or drug addiction. In these types of homes there are three messages:

- 1. Don't talk
- 2. Don't feel
- 3. Don't trust
- My good feelings about who I am stem from being liked by you.
- My good feelings about who I am stem from receiving approval from you.
- Your struggle affects my serenity. My mental attention focuses on solving your problems or relieving your pain.
- My mental attention is focused on pleasing you.
- My mental attention is focused on protecting you.
- My mental attention is focused on manipulating you (to do it my way).
- My self-esteem is bolstered by solving your problems.
- My self esteem is bolstered by relieving your pain.
- My hobbies and interests are put aside. My time is spent sharing your interests and hobbies.
- Your clothing and personal appearance are dictated by my desires, as I feel you are a reflector of me.
- Your behavior is dictated by my desires, as I feel you are a reflection of me.
- I am not aware of how I feel; I am aware of how you feel.
- I am not aware of what I want–I ask what you want. I am not aware–I assume.
- The dreams I have for my future are linked to you.
- My fear of rejection determines what I say or do.
- My fear of your anger determines what I say or do.
- I use giving as a way of feeling safe in our relationship.
- My social circle diminishes as I involve myself with you.
- I put my values aside in order to connect with you.
- I value your opinion and way of doing things more than my own.
- The quality of my life is in relation to the quality of yours.

For more information: www.naranoncalifornia.org

Maine Association for Specialists in Group Work (MeASGW) Got Groups? by Terry Mitchell (continued from page 1)

counseling groups to their clients and organizations of employment. I believe the time has come for Maine counselors to make connections with this unique style of client services and take a risk by trying something new in their profession.

We are finalizing the plans for our next meeting and will be sending out information to those who are already in my email group listings. If you would like to learn more, or connect with us in any capacity— please feel free to contact me by email at terrymitchell56@hotmail.com or call me at home at 924-9711. We would love to have you join us, and share in this new and exciting start to a future division of MeCA.

Thank you and have a fantastic fall season!

Maine Counseling Association 2006-2007 Unified Membership Application

This unified membership form enables you to make dues payments to not only MeCA, but also other related divisions and councils with one payment. Please complete the form, make your check payable to "MeCA" and mail to the address below. Membership covers ONE year (July 1 to June 30) per MeCA bylaws. (I am available to answer your questions at Bangor High School at 992-5521.)

Membership Information

Name:Address you want mailings sent to:	Be sure to check below the dues covered by your check or purchase order. If paying by purchase order, please be sure to indicate the name(s) of the member(s) on the PO.
Work Phone: Home Phone: e-mail Address: Place of Employment (please include address if different from mailing address):	MeCA Membership \$30 Regular Membership No Fee Student Membership No Fee Emeritus Membership Divisional Membership \$10 Maine Career Development
Educational Background: Degree: Major: University/College: # Years in Professional Field: Occupation (check primary one): () Career Counselor (CAR) () College Admissions Counselor (ADM) () College Counselor (PSC) () Counselor Educator (CED) () Emeritus Member (EMS) () Employment Counselor (EMP) () Marriage and Family Therapist (MFT) () Mental Health Counselor (MHC) () Pastoral Counselor (PAS) () School Counselor (SC) Check level: K-5 (A)	Regional Council Membership \$5
	Mail to: Gene Oakes 685 Kenduskeag Avenue Bangor, Maine 04401
6-8 (B) 9-12 (C) K-9 (D)	ADMINISTRATIVE USE ONLY: Date received:
K-12 (E) () Student (STD)	Check or PO #:
() Student (STD)() Substance Abuse Counselor (SAC)() Vocational Counselor (VOC)	Amount:
() Other (OTH) Please specify:	Other/follow-up:

Types of Membership



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to joining the American Counseling Association.

Members

To be eligible, an individual's primary responsibilities must be in the area of counseling and his/her preparation or position is such to qualify him/her for membership in one of the Divisions of the American Counseling Association.



Emeritus Members

Upon retirement from participation in the professional activity that enabled regular membership in the Association, any member who has been in good standing in the Association for 5 years shall be transferred to emeritus status with the full rights and privileges of membership status, and shall thereupon be exempt from further dues and special assessments. Emeritus members are encouraged to notify the Membership Chair of address changes.



Student Members

Students Members shall be, at the time of application, students who are currently matriculated in a graduate program of study leading to an advanced degree in the field of counseling.

The MeCA Membership Application can also be found on the MeCA Web Site at www.maineca.org.

Check out www.counseling.org to see the benefits

FAQs about Membership

How do I tell what the last membership year was that I paid my dues? Your address label indicates the most current year that you paid your dues, i.e. "05-06" for this last year.

What if I believe I have paid my dues for this year but my label does not indicate this? Contact the Membership Chair by e-mail (goakes2@verizon.net) and you will receive a response ASAP.

How do I get a membership card? Membership cards are mailed to individuals after the membership fee has been received.

Note: All members admitted are required to 1) subscribe to the purposes of the Association, 2) reside or work in the State of Maine, 3) maintain ethical standards of professional conduct and 4) be approved by the Executive Board by recommendation of the Membership Chair. In exceptional cases the status of member associate may be granted by a two-thirds majority vote of the Executive Board to persons not possessing the above qualifications but seeming significantly qualified in other respects.

Youth Assets

Maine High School Youth Risk Behavior Survey Results, 2006 A SURPRISINGLY POSITIVE OUTCOME...

The following data were collected from public high school students in Maine using the Youth Risk Behavior Survey (YRBS) and are representative of public high school students statewide.

Eighty-five percent (85%) of high school students indicated that they agree (either "agree" or "strongly agree") that their parent(s) and/or guardian(s) really care and give them help and support when they need it (Figure A).

 Male high school students were as likely as female high school students to have agreed that their parent(s) and/or guardian(s) really care and give them help and support when they need it. In addition, no statistically significant differences by grade were recorded for this question.

Seventy percent (70%) of high school students reported that they agree (either "agree" or "strongly agree") that one teacher really cares about them and gives them a lot of encouragement (Figure B).

 Male high school students were as likely as female high school students to have agreed that one teacher really cares about them and gives them a lot of encouragement. In addition, no statistically significant differences by grade were recorded for this question.

Fifty-seven percent (57%) of high school students indicated that they agree (either "agree" or "strongly agree") that in their community they feel like they matter to people (Figure C).

- Male high school students (62%) were more likely than female high school students (51%) to have reported agreement to this statement; this gender difference is statistically significant.
- No statistically significant differences by grade were recorded for this question.

Forty-nine percent (49%) of high school students reported spending at least one hour in clubs or organizations (other than sports) outside of regular school hours during an average week.

Figure A: Percentage of High School Students Who Agree that their Parent(s) Really Care and Give them Help and Support When they Need It

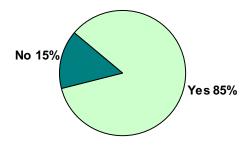


Figure B: Percentage of High School Students Who Agree that One Teacher Really Cares about them and Gives them a lot of Encouragement

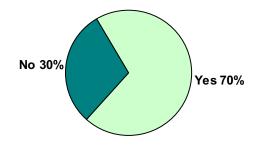
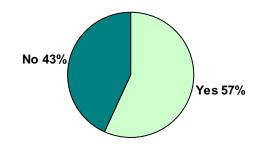


Figure C: Percentage of High School Students Who Agree that in their Community, they Feel Like they Matter to People



Interviewing School Counselors

Permission given by American School Counselor Association

The following questions are designed to help you think about and prepare for interviews.

It may help you assess your role and level of satisfaction as a school counselor.

- 1. How do you see the word "leader" fitting in to your role as a counselor?
- 2. What is the counseling theory that you most closely follow?
- 3. What is the most creative and innovative counseling technique you have used?
- 4. How would you divide your time between meeting the immediate needs of the students and keeping up with the paperwork?
- 5. How will you evaluate your programs to meet
 - (a) current state standards;
 - (b) standards of best practice for a comprehensive guidance and counseling program; and
 - (c) the ASCA National Model®?
- 6. How would you handle an irate parent?
- 7. How would you handle a passive (perhaps irresponsible) parent?
- 8. How would you handle a large group of students having attendance problems?
- 9. How do you see yourself fitting in with counselors who have many years experience as veteran teachers?
- 10. How would you fit in with a large staff?
- 11. What is your strongest asset?
- 12. What do you think is the most important characteristic of a counselor?
- 13. What do you see as the role of a counselor in a school this large?
- 14. What do you know about our school that you would consider a strength? a weakness?
- 15. What makes you want to work at _____ School?
- 16. What is it that you like about working with (grade level) school students?
- 17. What is something new you could bring to our program?
- 18. How do you handle criticism?
- 19. How do you handle stress?
- 20. Are you opposed to working above and beyond school hours to get the job done?
- 21. Are you opposed to working at night for functions such as college night, senior night, etc.?
- 22. Does your principal know you're applying for this job, and how does he/she feel about it?
- 23. What technology applications do you see being useful in your work?
- 24. What might your professional development plan look like?
- 25. What do you think the role of the counselor is in preventing school violence?
- 26. What practical experiences have you had that make you feel capable of being a counselor?
- 27. What experiences have you had in working with special education students?
- 28. What can you provide that is different from a social worker, school psychologist or mental health counselor?
- 29. When considering ethical standards and school policies, how would you handle a conflict between the two?
- 30. What do the most recent state standardized test results indicate about this school district and this school, and what is your role regarding standardized testing?
- 31. How does a school counselor assist with the implementation of English as second language in-building programming?
- 32. Describe how you would implement small-group counseling/guidance lessons.
- 33. Because time is a scarce resource in schools today and because of a strong push for improved standardized test scores, best educational practices suggest that in-class guidance lessons not take away from classroom instructional minutes. How will you address this issue as a school counselor?
- 34. What has your experience been in working with students of color and LGBT?
- 35. What is your experience with parenting programs? Describe past interactions with parents in home visits.
- 36. What does your future comprehensive program look like? What is your plan for achieving this?
- 37. How do you handle conflict with a colleague, parent, administrator?
- 38. What does a good home visit look like?
- 39. How do feel about writing letters of recommendation (high school only)?
- 40. How do you keep yourself organized? Discuss how you multitask.
- 41. Where do you see yourself in the next five years?
- 42. Can we ask you a question in Spanish, and can you respond likewise?

EDUCATOR'S CORNER

Ten Signs That You Need to Find A Different Kind of Education For Your Child

Permission given by Jerry Mintz Alternative Education Resource Organization (AERO)

Many parents do not realize that the education world has changed drastically since they were in school. Back in those days, schools were smaller, class sizes were smaller, dropout rates were lower, violence in school was almost unheard of, teachers were not terrified of showing affection to the children, or of teaching and discussing moral values. Even through rose-colored glasses, we know that school back then was no picnic, was far from perfect, but at least the teachers and usually the principal knew every student by name at a minimum, something which is not necessarily true today.

Because our public school system has now considerably deteriorated, many parents, teachers, and individuals have taken it upon themselves to create public and private alternatives to that traditional system which is definitely failing. It is important for parents to know that they now have choices, alternatives to the neighborhood school. How do you know that it is time to look for another educational approach for your child? **Here are some of the signs**:

1. Does your child say he or she hates school?

If so, something is probably wrong with the school because children are natural learners. When they're young you can hardly stop them from learning. If your children say they hate school, listen to them.

2. Does your child find it difficult to look an adult in the eye, or to interact with children younger or older than they are?

If so, your child may have become "socialized" to that very narrow group which many children ordinarily interact with in most schools, and may be losing the ability to communicate with a broader group of children and adults.

3. Does your child seem fixated on designer labels and trendy clothes for school?

This is a symptom of the shallowness of the traditional schools' approach, causing children to rely on external means of comparison and acceptance, rather than deeper values.

4. Does your child come from school tired and cranky?

This is a sure sign that their educational experiences are not energizing but are actually debilitating.

5. Do your children come home complaining about conflicts that they've had in school and unfair situations that they have been exposed to?

This is a sign that your school does not have a proper process for conflict resolution and communication.

6. Has your child lost interest in creative expression through art, music, and dance?

These things are generally not encouraged in the traditional system today and are not highly valued. They're considered secondary to the "academic" areas. In some cases, courses are not even offered in these areas any more. This tends to extinguish these natural talents and abilities in children.

7. Has your child stopped reading for fun, or reading or writing for pleasure? Are your children doing just the minimum for homework and going off for some escapist activity?

This is a sign that these spontaneous activities are not being valued in their school and another sign that they are losing their creativity.

8. Does your child procrastinate until the last minute to do homework?

This is a sign that the homework is not very interesting to, is not really meeting his or her needs, and is tending to extinguish their natural curiosity.

9. Does your child come home talking about anything exciting that happened in school that day? If not, maybe nothing exciting is happening for your child in school. Would you want to keep working if your job was like that?

10. Did the school nurse of guidance counselor suggest that your child has some strange three lettered disease, like ADD, and that they should now be given Ritalin or some other drug?

I suggest that it is more probable that the school has the disease, EDD-Educational Deficit Disorder, and time to get your child out of that situation!

FOR MORE INFORMATION www.educationrevolution.org

The Maine Counseling Association

MeCA Regions: Northern Eastern Downeast Central Southern

Dear Colleague:

The Conference Committee is in the early stages of planning another successful conference. Feedback we received from participants at last years' conference was extremely positive. This year our keynote speaker is Dr. John Mark Haney, a licensed therapist in private practice in Austin, Texas. The keynote topic he will be presenting is "Teen Sexuality In The 21st Century". Each year an array of workshops are offered ranging from ethics to counseling techniques to personal enrichment sessions. If you have an idea for a session you wish to present, then please complete the enclosed form and return it to me prior to November 7, 2006.

Sincerely,
Martin Gallant
Conference Committee Member

www.maineca.org

Ever wished you had an online referral resource at your fingertips? Well the time has come when that is possible. The Maine Clinical Counselors Association (MCCA) has put together a searchable database of referral resources that can be accessed by going to the MeCA home page (www.maineca.org). When you get there scroll down to the "find a clinical counselor" link which will take you directly to the MCCA page where you have the ability to search for a mental health counselor. The database can also be accessed by going directly to the MCCA home page (mcca-info.org) and then opening the "find a counselor link".

The following is an example of what you will find.

Search Words:	
Area(s) to Search: You can search multiple areas by holding down the ctrl key and clicking on each area you wish to search.	All Categories * Academic Problems * Adolescence * Anger * Anxiety
City:	
Zip code: You can enter a Zip code in the first field and optionally add in a range of miles to search within that Zip code in the second field.	Within miles of Zip code

We currently have 46 mental health counselors listed who provide a variety of services from treating adjustment issues to complex trauma. We also have counselors listed who provide supervision and ethics training. So stop by and see how this feature could help you access to mental health services for some one you are working with or to share with a colleague.

Peter Comstock, LCPC 331 State St, Augusta, ME 04330 President, Maine Clinical Counselors Association 207-621-8048 empower@gwi.net

The Maine Counseling Association

MeCA Regions: Northern Eastern Downeast Central Southern

CALL TO PROGRAM

The MeCA Conference Committee announces the Call to Program for the MeCA conference being held April 2nd and 3rd, 2007 at the Samoset in Rockport, Maine. If you are interested in being a presenter at this year's conference, please fill out the information below and mail to the following address:

Martin Gallant Caribou High School 308 Sweden Street Caribou ME 04736

Telephone: 207-493-4260 FAX: 207-493-42 Please send me your email address if you wish	email: <u>mgallant@mail.caribouschools.org</u> to receive this form electronically	
TEL: (W)	(H)	
(1 97)	(Ciliali)	
MAILING ADDRESS:		
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PROGRAM TITLE:		
Please write a brief description of the pr		
conference program brochure (3-4 sent	ences):	
Target Group (Check all that apply)	Elementary 🛘 Middle 🗸 Secondary	
☐ Clinical/Mental Health Counselors	☐ Career Counselors ☐ All	
Please send a detailed description on a	· · · · · · · · · · · · · · · · · · ·	
responsible for bringing their own prese		
computers, flip charts, screens, markers		
photocopying costs can be prohibitive a	t the Samoset.	
DI EASE DETUDN BY NOVEMBER 7 2006		

PLEASE RETURN BY NOVEMBER 7, 2006

A confirmation letter will be mailed to you by mid-January, 2007. Keep presentation time frames to one hour. Thank you for your interest, and support of our professional organization.

This form is also available on our website: www.maineca.org

A Charter Branch of American Counseling Association

Licensed Professional Counselors and Medicare

In the 109th Congress a total of six bills were introduced that included language to allow LPCs to be reimbursed by Medicare.

In the Senate, Senator Craig Thomas (R-WY) and Senator Blanche Lincoln (D-AR) introduced the "Seniors Mental Health Access Improvement Act of 2005" (S.784). This bill's sole purpose was to allow licensed professional counselors and marriage and family therapists to bill Medicare for providing services to its beneficiaries.

Along with Senator Thomas and Senator Lincoln, please recognize:

Senator Jeff [NM,] Richard Durbin [IL], Senator Barbara Boxer [CA], Senator Thad Cochran [MS], James M. Jeffords [VT], Senator Mark Dayton [MN], Tim Johnson [SD], Senator Bryon Dorgan [ND], and Mark L. Pryor [AR].

In the U.S. House, Representative Barbara Cubin (R-WY) introduced a bill, the "Seniors Mental Health Access Improvement Act of 2006" (H.R. 5324) that had language identical to S. 784. Along with Rep. Cubin, please take time to thank: Rep Gillmor, Paul E. [OH-5], Moran, Jerry [KS-1], Rep Rothman, Steven R. [NJ-9], and Rep Schmidt, Jean [OH-2].

Once again, ACA and AMHCA want to thank you for all of your grassroots efforts!

For questions: American Counseling Association 800-347-6647, ext. 242

MAINE COUNSELING ASSOCIATION <u>ANNUAL CONFERENCE</u> <u>April 2 - 3, 2007</u>

Conference cost and information is available now on our website at: www.maineca.org

Mr. Dean Collins Madison Area High School 486 Main Street Madison, ME 04950

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