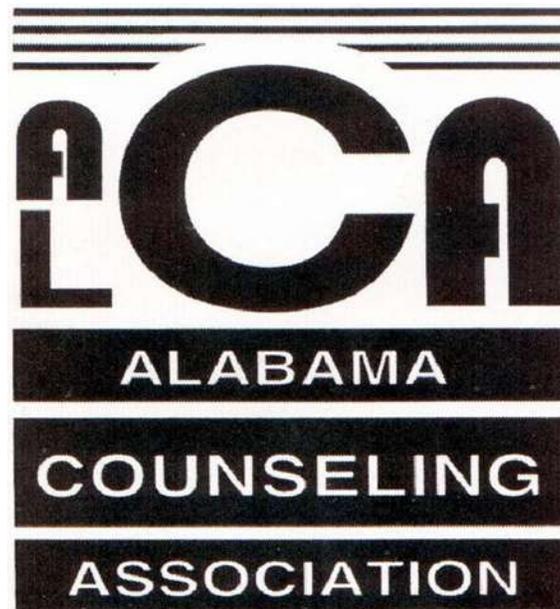


The Alabama Counseling Association Journal



- Enhancing human development through the lifespan
- Promoting public confidence and trust in the counseling profession
- Caring for self and others
- Acquiring and using knowledge
- Respecting diversity
- Empowering leadership
- Encouraging positive change

Happy 40th Anniversary Alabama Counseling Association Journal!

Linda H. Foster, Ph.D., LPC

In preparation for this special celebratory edition of the Alabama Counseling Association Journal, I began thinking about the nature of anniversaries and the significance of celebrating an anniversary or birthday. Beginning with a child's first birthday, we create special celebrations that continue throughout life with milestones all along the way. Celebrating these milestones of life is an important part of our culture and our history. In our worldview, we honor longevity by celebrating the "world's oldest person" and honor our ancestors with celebrations and remembrances. Now we celebrate publication of the Alabama Counseling Association Journal beginning with the very first edition in 1974. We appreciate all the previous editors, contributors, reviewers and editorial board members that helped to create and sustain this important part of our counseling association. Back in 1974, gasoline was \$.35 per gallon and the number one song was "Build Me up Buttercup". And many things have changed in our society since that very first issue of the ALCA Journal. But our desire to be counselors and counselor educators remains in sharp focus and our commitment to our counseling association remains strong.

Today we celebrate another year of life - or in this case – publication of the Alabama Counseling Association Journal. The traditional anniversary gift suggestion for a 40th anniversary is the precious gemstone of a ruby. Rubies are a strong stone with only a diamond begin stronger. Rubies are valued based on the intensity of their color. And the history of rubies has been documented as far back as 200 BC. Yet, even the strongest ruby and the most intensely deep red rubies have imperfections that make the stone unique. As we consider the gift of rubies

– perhaps we can think about our Alabama Counseling Association as being strong like a ruby, with many different facets of color and diversity, with little endearing twists that make us unique and a rich history that will continue to thrive and flourish!

This edition of the Journal has a selection of various articles throughout the years including the Abstract and citation information. The entire article can be found on the ALCA website. Each special contributor has reviewed the previous article and included their thoughts from a current perspective.

Thank you to all the special contributors who dedicated their time and energy to help create this 40th Anniversary celebration journal!

Hoping you are well,

Linda



Table of Contents

Letter from Alabama Counseling Association Executive Director.....	5
<i>Dr. Ervin L. (Chip) Wood</i>	
Letter from 2014-2015 President Alabama Counseling Association.....	8
<i>Donna Clark</i>	
Letter from former Editor	10
<i>Dr. Paul F. Hard</i>	
Alabama Counselor Licensure: 35 Years and Counting.....	13
<i>S. Allen Wilcoxon, Ed. D., LPC, NCC</i>	
Clinical Supervision Revisited.....	32
<i>Anita A. Neuer Colburn, PhD, LPC (VA), LPCS (NC), ACS, NCC</i>	
Human Rights Revisited.....	51
<i>Asha Dickerson, Ph.D., LPC, NCC</i>	
Homonegativity Revisited.....	55
<i>Jamie Satcher, PhD, Professor Emeritus, The University of Alabama</i>	
<i>Mark Leggett, PhD, LPC, Core Faculty, MS Clinical Mental Health Program,</i>	
<i>Walden University</i>	
Training Marriage and Family Counselors Revisited.....	58
<i>Charlotte Daughetee Ph.D., LPC, LMFT, NCC</i>	
Revisiting School Counselors’ Challenges.....	61
<i>Jan Chandler, PhD., NCC</i>	
Gay, lesbian, bisexual and transgender issues revisited.....	67
<i>Glenda R. Elliott, Associate Professor, Emerita, UAB Counselor Education Program</i>	
Revisiting counselor education programs.....	70
<i>Nancy J. Fox, Ph.D.</i>	

On the 40th Anniversary of the ALCA Journal

A Word from Ervin L. (Chip) Wood, ALCA Executive Director

One of the less glamorous task that has fallen to me as executive director is as caretaker of the many cardboard boxes and file cabinets which hold the history of ALCA. Our first executive Director Dr. Wilbur Tincher started the task of organizing all these items and I have made much more progress, but still it is a monumental task just to store and keep up with everything.

I give you this information because in 1997 when Journal editors Sandy Magnuson and Ken Norem asked me to go back and look at old editions of the Journal to find what topics counselors were concerned about in the past I knew exactly where to go. We actually do have a complete set of “hard copies” of every Journal published. The first Journal was published on September 2, 1974, with Richard W. Warner, Jr. as editor. The Journal ran 50 pages and included six articles and two editorials. Contributors for the issue included Leeman C. Joslin, Richard Warner, Jr. Sanford Colley, Ann H. Easley, Bill Hamer, Richard S. Hawk, Carolyn Thomas, and Robert E. Comas (historical facts cited from *Facts and Stats about the Journal, 2006, Hard and Fancher*).

While the Quarterly is our association newsletter, the ALCA Journal has always presented articles of a professional and scholarly nature. It has been used as a tool to convey the latest and “best” in information about counseling effects, techniques, and innovations. In addition, it has been and continues to be an excellent opportunity for counseling faculty, aspiring authors and researchers to publish and share their insights with their colleagues. For these reasons the Journal is important to our Association and its members- as it has been since 1974.

There have now been 15 different editors of the Journal. This list includes some of the best and brightest of our members and counselor educators. Some were solo editors; a number were co-editors, and one pair- Ken Norem and Sandy Magnuson- were even husband and wife. The Journal has varied in length from 23 pages to over 100. There have been two volumes devoted to the history of ALCA and its divisions and there have been several volumes devoted to topics of special interest. The most recent of these was devoted to the issue of Suicide and was published in 2013. The first issue in 1974 was delivered to 800 members. The last issue in 2014 was delivered electronically to 2000 members. In addition each issue has been posted on the ALCA website for anyone who chooses to reference it.

The Journal has been delivered in several formats over the years. The original one and those that followed for many years were compiled in booklet format, but the size was 5 ½” X 8 ½”. Several years later, it dawned on someone that the Journal would be much easier to “lay out” and, most of all read, if the size was increased to 8 ½” X 11”, and this was done. In recent years, in an attempt to “keep up with the times” and deal with “ballooning” costs, the Journal was changed to an all-electronic format. While archival copies of all issues exist in the ALCA state office and at several state universities, the move to an electronic format has allowed us to archive issues online so that they are readily available for reference. Dr. Larry Tyson, UAB counselor educator, and a recent past editor led this effort and largely responsible for the important step forward.

I feel I would be remiss if I did not mention the tremendous contributions made in behalf of the ALCA Journal by Dr. Paul Hard and his husband (now deceased) C. David Fancher. The

two of them contributed innumerable work hours and effort in compiling a fascinating history of the Journal called simply “Alabama Counseling Association Journals: Facts and Stats, 1974-2006”. This document contains a compilation of major and minor facts about practically every facet of the Journal body of work. There is everything from important facts to minor trivia. In fact, while I have not APA referenced them, I clearly acknowledge that most of the facts I cite in this article have come from their compilations.

The second thing that Dr. Hard and Mr. Fancher did was actually prepare abstracts on all issues of the Journal from 1974 to 2009. At the time this document was added to the ALCA website, but it was also made available in CD-ROM format for personal or library purchase. This task represented a Herculean effort on the part of Paul and David and is definitely the forerunner of our current online electronic delivery process.

The ALCA Journal always has been a work in progress. It will continue to be. It is a mainstay of our research and professional development efforts. It is hard to believe that it is in its 40th year of publication. I am sure you join me in saluting and thanking the many volunteers and contributors who have lent their abilities to its publication over the years. Happy 40th Anniversary ALCA Journal!

Chip

Letter from the President

Donna Clark

Dear ALCA Members,

I would like to take this opportunity to congratulate the Alabama Counseling Association on its' 40th Anniversary of the ALCA Journal. Our current editor, Dr. Linda Foster, has done an excellent job as editor and a BIG “thank you” to all of the former editors as well. Without their commitment and leadership, the ALCA Journal would not have continued to be published for 40 years!

I would also like to thank those who have contributed articles over the years. Many of these fine counselors and practitioners are no longer with us in body, but are remembered for their everlasting contributions to the ALCA Journal and the ALCA family. Over the years, several authors and contributors have held various leadership positions in ALCA; presidents, president-elects, committee chairs, chapter and division presidents, etc. Most importantly, our MEMBERS have faithfully supported the ALCA Journal and are truly the lifeblood of this publication.

I look forward to reading the 40th Anniversary edition of the ALCA Journal. We've asked several ALCA leaders to review past articles, share their thoughts, describe important points in the article that may be relevant today and if there are any significant changes since the article was published, and provide an overall impression of differences between when the article was published and now. I look forward to seeing how we've grown as a profession!

Again, Congratulations and Happy 40th Anniversary to the Alabama Counseling Association Journal! I encourage our members to continue to support the ALCA Journal by submitting articles for publication. We learn best when we learn from each other ☺

Donna Clark, President

Congratulations on 40 years of professional scholarship!

By Paul F. Hard

I have been intrigued by the thoughts, challenges, insights, and history of a diverse and wonderful group of people – Alabama’s Professional Counselors (Hard, 2006, Welcome). Upon the inauguration of our Journal our first editor, Richard W. Warner, Jr., commented that “No journal and assuredly not this one, is the product of one individual or even a small number of individuals. It is the product of many individuals working together for a common cause (Warner, 1974, p.4).” These words introduced the first digital archive of *The Alabama Counseling Association Journal*.

I first came to appreciate “The Journal” (as our association refers to it) when studying for my masters at the University of Alabama. I prized the articles and scholarship found in it all the more because the authors were my mentors, friends, and colleagues. It was both informed and approachable. This appreciation continued into my PhD and dissertation work when it occurred to me that aside from my personal knowledge of articles *The Journal* was neither indicated nor searchable in any form rendering it unusable for any researcher. This realization led to the initial idea of creating a simple abstract index of the journal and developed into a lengthy task of developing the CD including all issues and articles published since 1974.

David, my late husband, and I soon discovered that there was no location at which all of the issues of *The Journal* could be found! With the help of several Alabama universities, the ALCA Executive Director, various ALCA historians, and the ALCA membership at large we were able to locate and secure all issues of the Journal. The individual journals were then hand scanned, resized and formatted and place on the CD making them completely searchable by key word.

Although time consuming, this effort was rewarding. Our efforts gave us insight into the thoughts and journeys of the professional counselors of Alabama. Some suggested that the might remain of little interest to anyone outside of the state. Shortly after its completion, however, we received a request for one of our articles (Tyson, Foster & Jones, 2000) from an Australian researcher!

Here are a few interesting facts about *The Journal*:

- The Journal has had 5 name names: (1) 1974 – 1983 - Alabama Personnel and Guidance Journal; (2) 1984 – 1989 - Alabama A.C.D. Journal; (3) 1989 – 1992 - Alabama Association for Counseling and Development Journal; (4) 1993 – 2006 - Alabama Counseling Association Journal; (5) 2006 – Present – The Alabama Counseling Association Journal.
- The top three contributors to the journal have been S. Allen Wilcoxon, Jamie Satcher, and J. Vernon Blackburn.
- The most authors contributing to a single article were 11.
- The longest article was 21 pages long.
- The longest title was published in 2001 and was 165 characters long. (Fancher, 2006).

Those interested in these and the historical aspects of our association are encouraged to search the CD's archival features.

In 1974 Leeman C. Joslin, President Alabama P.G.A., introduced our first issue and noted that it marked “another milestone in the maturation of an important state-level professional association of counselors . . .” (1974, Joslin, p. 3). The fortieth anniversary of our journal is another such milestone! It is my hope many more such milestones remain in the life of the Alabama Counseling Association!

References

- Hard, P.F. (2006). Welcome. In Hard, P. F. & Fancher, C. D. (Eds.). *The Alabama Counseling Association Journal 1974-2006: Professional Publication on Compact Disk*. [CD]. Birmingham, AL: BugnBear Productions
- Hard, P.F. & Fancher, C.D. (Eds.). (2006). *The Alabama Counseling Association Journal 1974-2006: Professional Publication on Compact Disk*. [CD]. Birmingham, AL: BugnBear Productions
- Fancher, C.D. 2006). Facts and stats. In Hard, P. F. & Fancher, C. D. (Eds.). *The Alabama Counseling Association Journal 1974-2006: Professional Publication on Compact Disk*. [CD]. Birmingham, AL: BugnBear Productions
- Joslin, L.C. (1974). President's corner. *Alabama Personnel and Guidance Journal*, 1 (1), 3.
- Tyson, L.E., Foster, L.H. & Jones, C.M. (2000). The process of cinematherapy as a therapeutic intervention. *The Alabama Counseling Association Journal*, 26 (1), 35-41.
- Warner, R.W. (1974). Editorial. *Alabama Personnel and Guidance Journal*, 1 (1), 4.

Moracco, J. C. & Warner, R. W. Jr. (1979). Alabama licensure law. Published as the *Alabama Personnel and Guidance Journal*, 5 (2), 5-17.

Abstract

Act 423 was signed into law by the Governor on July 18, 1979, thus culminating five years of work by the Alabama Personnel and Guidance Association. The Law, which is now in effect, requires that individuals who wish to offer themselves to the public as professional counselors in private practice must be licensed. The law is reprinted below with comments for your information. If you have further questions, you should contact me directly.

Alabama Counselor Licensure: 35 Years and Counting

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Initial Thoughts on the Article

This article from the Alabama Personnel and Guidance Association (AIPGA) journal is the first published review of the “new” legislation that created the Alabama Board of Examiners in Counseling (ABEC) with the mission of public protection through the issuance of a license for professional counselors. The article features each of the sections of the law (Act 423), now referenced as Chapter §34-8A-1, et seq., Code of Alabama, (1975) that established counselor licensure for our state. In addition to examining the Act, the author offers “COMMENTS” concerning the significance of each section of the legislation. My initial impressions of the article are formed by two quotes from the preface to the article. The first quote is from John Moracco, editor of the AIPGA Journal

We are proud that Alabama is only the third state to have a licensure law. In a sense, we are pioneers in the effort to have licensure laws in all states. Licensing is a normal function of most professions, and our belief is that it will make us more professional and will help us provide better services to our constituents (p. 5).

The second quote is from Richard Warner, the author of the commentary article

Act 423 was signed into law by the Governor on July 18, 1979, thus culminating five years of work by the Alabama Personnel and Guidance Association. The Law, which is now in effect, requires that individuals who wish to offer themselves to the public as professional counselors in private practice must be licensed (p. 5).

A report in *Guidepost*, the newsletter for the American Personnel and Guidance Association (APGA) (APGA, 1979), preceded Warner's article in the AIPGA Journal. The *Guidepost* account noted that the Alabama law was the third in the nation, preceded by Virginia in 1975 and Arkansas earlier in 1979.

The language of Act 423 is perhaps more stirring when one considers it was the authorization for the ABEC to be formed and for licenses to be issued *beginning in 1980*. At the time of the AIPGA article, ABEC did not exist, the Administrative Code for the ABEC did not exist, and the first counselor license did not exist. A future of counselor licensure in our state was assured but its evolution was undefined. The Act clarified the authority of the ABEC to protect consumers, to create an Administrative Code as rules to execute the legislation, to issue licenses, and to exert jurisdiction over licensees. In essence, Warner's article and "COMMENTS" were speculative, if not predictive, concerning the future of a professional venture that only 2 other states had previously undertaken. As in Moracco's comment as AIPGA Journal editor, the term "pioneering" (p. 2) was featured in the 1979 *Guidepost* article to describe this Alabama legislation. It would appear that such a term was most appropriate for the time and context of Warner's article. Even more notable seems to be that the "The 1994 ACA Model Legislation for Licensed Professional Counselors" (Glossoff, et al., 1995) to serve as a template

for state licensure efforts was not published until *16 years after* the authorization of Act 423 and the publication of Warner’s article. Pioneering indeed!

Aspects of the Article that Remain Relevant

As a brief preface, readers are urged to consider that licensure for most any state can vary in many ways. An excellent source for such information and distinction is the American Counseling Association (ACA) website entitled “Requirements for State Professional Counselor Licensure” (ACA, 2015).

Legislation may be enacted to authorize a license that is issued and administered from a state department, not unlike that of a Division of Motor Vehicles issuing driver’s licenses. For example, counselor licensure in the State of Washington is administered through the Washington State Department of Health – Mental Health Professions division. By contrast, legislation may be enacted to authorize a license that is issued and administered by an appointed board. Act 423 is an example of legislation to create a separate state agency for administration of counselor licensure through the authorization of the ABEC.

Legislation may also be enacted to authorize specialty licensure for administration by a state department or board that is unique to a discipline or profession. Similar to the existing Alabama Board of Examiners in Psychology, Act 423 authorized specialty licensure for the ABEC. By contrast, many states subsequent to 1979 authorized counselor licensure by combining or creating a composite board or state department to license multiple disciplines or professions. For example, counselor licensure in the State of Tennessee is administered by a composite board entitled the Board of Licensed Professional Counselors, Licensed Marital and Family Therapists, and Licensed Pastoral Therapists.

In summary, the original 1979 legislation through Act 423 created a specialty license for counselors to be administered for public protection by the ABEC. Though probably

underappreciated at the time, this legislation was of significant and lasting benefit for citizens and licensees in the State of Alabama. Warner comments on this matter by noting that the ABEC is "...a self-sustaining board so no state funds will be needed" (p. 10).

A review of the current version of §34-8A-1, et seq., Code of Alabama (1975) reveals that great similarity exists between the current language of the legislation and that featured over 3 decades previously in Act 423. Among those items that have endured since its inception are:

- a. The composition of the ABEC as 2 citizen members, 2 counselor educators, and 3 practitioners,
- b. Recommendations for board appointments originating from the state counseling association rather than prospective appointees applying directly to the Office of the Governor,
- c. The use of the term "private practice of counseling."
- d. The creation of a board that is self-sustaining financially and without any state form of funding for operations,
- e. Licensure opportunities for persons who graduate from programs other than counselor education graduate programs,
- f. Verification of curricular content,
- g. "Associate" status for supervised practice in preparation for independent licensure,
- h. The option to substitute post-graduate academic course work for supervised experience in "Associate" status,
- i. Biennial renewal of one's LPC license,
- j. Required continuing education, and,
- k. Recognition of other state/territorial licensure by ABEC.

Warner's comments in the AIPGA journal article highlighted items that were unprecedented in the licensure laws for Virginia and Arkansas as well as in many subsequent legislative acts in other states to authorize counselor licensure. For example:

COMMENT: ...Section 18 is of major importance. Clients of counselors in private practice now have the right of privileged communication (p. 16)

The legal right of privileged communication for clients of licensed counselors was not featured in many original legislative acts in other states even after Alabama's Act 423 of 1979. The struggle to add privileged communication rights for clients of licensed counselors to existing statutes in most of those states was lengthy and expensive, if not initially unsuccessful. Thus, the foresight of those who crafted the original law in Alabama was greatly beneficial on behalf of client confidentiality, as was noted in Warner's comment.

Similarly, Warner emphasized an item from Act 423 concerning the authority of the ABEC to investigate, adjudicate, and discipline licensees. In this respect, he noted

COMMENT: ...Of particular importance is the fact that the enforcement of adherence to a code of ethics is written into the law. (p. 15)

Once again, the foresight of those who crafted the original law in Alabama removed the often-confusing distinctions between legal obligations and ethical principles for counselors. To join ethical obligations of a licensee within the structure of the law for purposes of compliance and adjudication meant that the refrain of "ethics are aspirational but not obligatory" was inaccurate. Warner's insight about the importance of this feature in the law was and continues to be significant.

Aspects of the Article that are No Longer Relevant or have Changed Significantly

As with so many laws, legislation that is contemporary at the time, becomes dated, obsolete, or in need of revision over time. Perhaps none is as significant as that to which Warner referred in the following comment:

COMMENT: This section projects use of title "Professional Counselor" and also restricts law to private practice. (p. 6)

In reference to Warner’s comment, it is accurate that the initial language of Act 423 represented a protection of the title “Professional Counselor,” (p. 6) a protection commonly known as a “title law.” It is also notable that in many instances, initial success for state counselor licensure in other states was through a “title act.” In essence, such legislation protected the terminology that could be used to describe the behavior or activities in which one can engage. From the standpoint of title law, one could engage in the activities proscribed in Act 423 so long as one did not use the term “professional counselor.” However, Warner’s comment did not emphasize that the original 1979 legislation represented a “practice act,” since it included language that specified activities or functions as well as the title employed by the individual. This language was consistent with the content of Virginia’s initial licensure act. Though Alabama was not the first to establish counselor licensure as a practice act, its authors avoided significant difficulties in revising its original license from title status to practice status. While title acts essentially became obsolete over time for all states with counselor licensure, such concerns were not problematic in Act 423 as a title and practice act. Just as with the previous discussion about privileged communications, revising an established licensure statute to replace a title law with a practice law was a significant battle for many states.

Other obsolete and revised elements of the original Act 423 include:

- a. Revision of the original text to gender-neutral language,
- b. Replacement of “Alabama Personnel and Guidance Association” with “Alabama Counseling Association or its successor association,”
- c. Conclusion of the “grandparenting” period for licensure on September 30, 1982, and,
- d. Elimination of the requirement that 1 of the 3 practitioner members of the board be a member of the American Association for Marriage and Family Therapy (based on the

creation of a separate law and licensure for Licensed Marriage and Family Therapists in 1997).

In his article, Warner commented on the final item from above as an example of a “specialty designation” (p. 12) for licensure. Though the language concerning specialty designation for licensure remains in §34-8A-1, et seq., Code of Alabama (1975), it is generally undefined by the statute or Administrative Code. Perhaps this status is reflective of the difficulty ABEC and other state boards have encountered with this notion. For example, in its only effort to examine specialty designation in a public hearing in September 1995, 28 individuals appeared before the ABEC, 27 of whom expressed their opposition to creating specialty designations.

Warner also offered an opinion on one aspect of the Act that has not yet been tested in a legal context. Toward that end, readers are urged to consider the era as well as the interpretation offered in the article as not reflecting legal advice or opinion but, rather, that of a knowledgeable professional examining new legislation at the time of its creation.

COMMENT: Projective testing for purposes of diagnosis are prohibited but not if a counselor wished to utilize a projective as part of counseling process. (p. 7)

Warner’s comment on this feature of the Act certainly warrants further investigation, if not legal opinion, prior to its implementation. Perhaps the narrow nature of his interpretation is legally accurate.

Some rather notable revisions have been made to the Act which are relevant in relation to Warner’s comments in the 1979 AIPGA Journal Article. Such revisions are:

- a. Further operational clarification of the private practice of counseling to include phrases such as "whether in individual or group practice" and "salary" to avoid common misunderstandings,

- b. ALC revision from biennial to annual renewal of licensure,
- c. Addition of a duty-to-warn protection statute for licensees,
- d. Authorization for ALCA to select a replacement to fill a vacancy on the ABEC board from the list of nominees submitted to the Governor if a replacement is not appointed to fill a vacancy by January 1, and,
- e. Designation of the ABEC as an enumerated agency subject to the Legislative Sunset Review Committee and regular review and re-authorization every four years.

Greatest Differences: Then and Now

How could Richard Warner anticipate some of the changes in the counselor licensure law after 35 years of its implementation? To be certain, Dr. Warner's acumen at the time of his article reflected unique insight and thoughtful logic. However, changes in era, cultural sensitivity, political climate, social/institutional initiatives, and the balance of opportunities versus obstacles often merge to create changes that could not be anticipated a decade earlier, much less 3 ½ decades earlier.

The re-designation as an enumerated agency subject to the Legislative Sunset Review Committee has already been noted previously as a significant revision to the counselor licensure law. However, various other changes, some perhaps even more far-reaching, have occurred since the original 1979 act. These include:

- a. Creation of the term "Associate Licensed Counselor" as a replacement term for "Certified Counselor Associate,"
- b. Removal of "Resident of Alabama" as a requirement for licensure due to conflicts with state and federal legislation as well as the emergence of greater interest in technology-based care across state lines,

- c. Recalculating “years” as “hours” to determine the minimum requirement of supervised experience as an CCA/ALC for eligibility to become an LPC, which aligned with the national standards for the field,
- d. Specifically authorizing “diagnosis” as an essential component of treatment planning for comprehensive client welfare and care, and,
- e. Establishing “Provisional Licensure” status as a category for applicants seeking endorsement for an existing license from another state yet lacking academic work or a passing score on an exam required of any applicant seeking Alabama licensure at the same time as when the other state issued the license (this is commonly known as the “era equivalency” endorsement procedure).

Each of these significant changes merits some elaboration. These elaborations are based on information discussed at public meetings of the ABEC, any of which were and continue to be accessible to any person who wishes to be present during such a public meeting of the ABEC.

Amending the “certificate” status of an associate counselor under supervision to that of “Associate Licensed Counselor” allowed these supervised practitioners to be participants in the co-pay formula for many managed care agencies and health maintenance organizations.

Additionally, such a revision created greater option and choice among clients/consumers who wished to employ their co-pay status with qualified licensees.

The removal of a requirement that a licensee of the ABEC must be an Alabama resident was a requirement of the ABEC and all other similar agencies in response to federal and state legislative revisions tied to interstate commerce and restriction of trade. Among other outcomes, this change allowed many persons living in boarder states to hold dual licensure for practice in more than one state. Additionally, the emergence of interstate technology-based counseling

services posed a critical dilemma for many state boards: which state laws are applicable for client welfare when the counseling method is not face-to-face? This discussion is often phrased as the choice between the state of origin (i.e., the state from which the counselor's activities originate) versus the state of destination (i.e., the state in which the client resides) (Wilcoxon, Remley, & Gladding, 2013). Thus, in removing the requirement of state residency for licensure eligibility, the ABEC created an option for client protection in Alabama for a counselor wishing to provide technology-based care from another state.

During one of the scheduled reviews of §34-8A-1, et seq. Code of Alabama (1975) by the Legislative Sunset Committee, the ABEC introduced formal language to the law that definitively established that licensed counselors could engage in diagnosis for the purposes of treatment planning and client welfare. As noted previously, Warner's comment concerning the use of projective testing for diagnostic purposes was speculative. However, at the time of Warner's comment, the explicit right of licensed counselors to diagnose for any reason did not exist. A definitive legal right for a licensed counselor to offer any formal diagnosis was not codified in licensure law until 2000.

Licensure portability is a point of great contemporary debate for the counseling profession. Kaplan, Tarvydas, and Gladding (2014) described the importance of a common definition of counseling as a prerequisite for successful resolution of licensure portability. The American Association of State Counseling Boards (AASCB) is a professional alliance of governmental agencies, including boards as well as state departments, responsible for counselor licensure. AASCB has endorsed the common definition of counseling described by Kaplan, Tavydas, and Gladding (2014). Warner noted that Act 423 featured language that recognized the need for the soon-to-be-formed ABEC to anticipate the need for recognizing licensees from other

states for Alabama licensure. However, neither Alabama nor any other AASCB-affiliated state has identified the methodology by which such portability can be seamless. Section 255-X-10.02 (3) of the ABEC Administrative Code (2015b) features a description of the endorsement of an out-of-state license that is unlike any other procedure for licensure portability. This section states

Applications will be reviewed and must meet the requirements of the Alabama regulations that were in effect on the date of the first issuance in the state of the current license.

This section describes a procedure such that the requirements in place for licensure in Alabama at the time of the applicant's licensure in the other state serve as the requirements for ABEC endorsement. Essentially, the ABEC regulations for the era of eligibility for counselor licensure of *anyone* (i.e., Alabama applicants or applicants in any other state) reflected the minimum standards for ensuring practitioner competence and public protection related to client care in Alabama.

To illustrate, if a counselor licensed in Arkansas under the 1979 regulations of its board sought to be licensed by the ABEC in 2015, the era regulations examined in Warner's article would be applicable for that applicant. The rationale for this decision seems equitable as well as protective: if the regulations at that time were adequate to allow an Alabamian to be licensed and to remain so in 2015, why would they not be adequate for a peer licensed in another state, so long as the regulations were equivalent? Similarly, a 2015 applicant for endorsement in Alabama who was licensed in another state in 2000 would be reviewed according to the 2000 minimum requirements for licensure in Alabama. Some AASCB-member states will endorse nearly any license from any era for purposes of licensure portability. By contrast, some

AASCB-member states require applicants with out-of-state licensees to meet the current regulations for licensure in that state. These two extremes offer insight into the difficulty for licensure portability, regardless of any agreement on the definition of counseling. The uniqueness of the ABEC approach to licensure endorsement seems to be the recognition of minimum standards for practitioner competence and client protection at the time of initial licensure.

Even more notable is the option for a Provisional License available to out-of-state applicants who may be near compliance with the era requirements in Alabama but may require additional educational work to meet the requirements of that era. Section 255-X-2-.15 of the ABEC Administrative Code (2015a) states that a Provisional License may be issued within the following parameters

A one-year, temporary licensure status equal to that of a licensed professional counselor or associate licensed counselor with specified stipulations for establishing substantial equivalence

In this way, the out-of-state applicant may practice under ABEC jurisdiction with full rights as a licensee but not with a biennially renewable license. Once the stipulations of the provisional license are met, the applicant is then eligible for biennial licensure.

It is likely that neither Warner nor those responsible for crafting Act 423 could have ever imagined such complexity in recognizing the licensure of another state board or agency.

However, Warner noted over 35 years ago that the basis for this option was featured in the original law. Pioneering indeed!

Then and Now: Do the Differences Mean More Effective Care for Clients?

It is my view that neither the original statute nor the differences created by statute revisions are linked to Warner's comments in relation to the changes in counselor licensure.

However, in the preface comments from the ALPGA Journal editor, John Moracco, stated

There is no question that this law will affect counselors throughout the State. We, members of ALPGA, are confident that the law's influence will be positive (p. 5)

I believe Moracco's comment to be accurate then and now: the law's influence has and will continue to be positive in terms of improving care for clients.

From its inception to its current content, legislative changes for counselor licensure have yielded improvements for client care, in each iteration. The establishment of a practice law as well as privileged communication for clients in the original language of Act 423 has been a source of substantial importance for both clients and licensees since the issuance of the first license in 1980. The re-designation of associates with "licensure" rather than "certificate" status increased access for client care, particularly when managed care is available to make counseling services more affordable. The formalization of supervision for Associate Licensed Counselors by credentialed Supervising Counselors improved the gate-keeping oversight of those aspiring to independent practice. The responsibility of the ABEC to develop and periodically amend its code of ethics in a manner that is unique to Alabama laws and practice settings is a form of local duty that has not been undertaken by the 17 states that simply authorize the current ACA Code of Ethics as the standards of ethical propriety for their licensees (ACA, 2010). The methodology of out-of-state endorsement by regulation era has merged protection with equitability for client welfare under the jurisdiction of the ABEC. Though far from an established fact, the removal of state residency as a requirement for licensure may lead to more out-of-state licensees providing

counseling via technology-based media with Alabamians while under the jurisdiction of the ABEC.

In summary, it seems that the forethought to craft the original language in Act 423 was both significant and appreciated by Warner and his contemporaries. Warner's comments about this pioneering legislation convey as much in their tone and energy. The revisions to that original legislation have been minimal considering the changes to the field since 1979. However, despite their limited number, legislative revisions to the statute have sustained as well as extended the excellent beginning for counselor licensure in Alabama.

Final Thoughts

In considering my final thoughts about the original legislation as well as Warner's commentary article lead me back to the significance of the term "pioneering" (p. 2). As an initial licensure law, the complexity and forethought of its framers continues to benefit Alabama citizens as well as counselors. Significant contributors to this effort and outcome include Don Schmitz, Richard Warner, Glenda Elliott, Harriett Schaffer, and many others.

A second thought I have concerning the article, the original legislation, and contemporary licensure issues concerns the issue of licensure portability. California's 2009 licensure legislation established the 50th state (along with the District of Columbia, Guam, and Puerto Rico) in which one can hold counselor licensure. Thus, in the interim between Alabama licensure in 1979, 47 states and 3 non-state territories have established counselor licensure. Some of those states established title law that then became practice law.

Many of those states had licensure established through the authorization of composite boards, rather than as a specialty board such as the ABEC. Some of those states had licensure established under the authority of a state department or a division with boards functioning only in an advisory capacity.

These distinctions in origins have also included significant distinctions in educational requirements, pre- as well as post-graduate supervision for licensure, and even the choice of a licensure examination. In addition to these disparate origins and distinctive requirements, every state or territory has a grandparenting period in which to establish a viable body of licensees for client care. A large number of states are still in their first generation of licensees, many of whom were “grandparented” into their status as a licensee. Against this backdrop, it should not be surprising to see the difficulty in licensure portability at this time. In that I am allowed the latitude to offer “final thoughts” for this article, I believe the obstacles to licensure portability will begin to diminish in a developmental and evolutionary manner as the second generation and even third generation of licensees (i.e., not “grandparented”) become licensed under more contemporary and common educational, supervision, and examination standards. In the interim, however, the implementation of era-based reviews for out-of-state licensees and the option for Provisional Licensure to meet the era requirements for licensure offer a fair, equitable, and precise standard by which portability can be accomplished in a manner that protects public welfare while also recognizing previous licensure status.

As a concluding “final thought,” I will convey an account of an event that continues to have a profound influence on my thinking about the interrelationship between the Alabama Counseling Association, counselor licensure, and the oversight of the legislative sunset review process. As many know, the Alabama Counseling Association (ALCA) sponsors a “Day on the

Hill” as an annual event of professional advocacy and activism with the Alabama State Legislature. The Day on the Hill in 2002 coincided with a meeting of an Alabama Senate committee that would advance the review from the Legislative Sunset Oversight Committee. The ABEC had been quite successful with its sunset review and the Senate committee was primarily a route through which the re-authorization act would be placed before the full legislature later in the spring. Members of ALCA had gathered for the Day on the Hill and were informed by Joanne Schrantz (ALCA Legislative Liaison) that an amendment would be introduced that afternoon at the Senate committee that would yield a huge problem as the bill moved forward. A legislator had a friend with a master’s degree in Psychology. The friend was unable to secure independent licensure through the Alabama Board of Examiners in Psychology. The legislator had prepared an amendment that essentially stated that any person with a master’s degree in Psychology would automatically *and immediately* meet all requirements to become a Licensed Professional Counselor (note: this language would preclude the need for any supervised experience or examination). Approximately 60 ALCA members appeared in the meeting room prior to the convening of the Senate committee. Four (4) ALCA members were allowed to address the committee on behalf of the group’s concerns about the tremendous negative effect the proposed amendment would have on the law. As the fourth address was beginning, the chair of the committee, who was not the author of the amendment, stopped the presentation and immediately removed the amendment from consideration. Following applause from the ALCA members, the committee chair stated concerns about “ever upsetting this group again or we will need to meet in a larger room.” Ultimately, the legislative session concluded with §34-8A-1, *et seq.*, Code of Alabama (1975) re-authorized and the ABEC continued for

another four years. I believe Richard Warner would have had a strong and appreciative comment for that group and that day. Pioneering indeed!

References

Alabama Board of Examiners in Counseling. (2014a). Administrative rules. Retrieved on 2/14/15 from http://abec.alabama.gov/PDFs/12_06_RuleChgs/255-X-2.pdf .

Alabama Board of Examiners in Counseling. (2014b). Administrative rules. Retrieved on 2/14/15 from http://abec.alabama.gov/PDFs/12_06_RuleChgs/255-X-10.pdf .

American Counseling Association (2015). Requirements for state professional counselor licensure. Retrieved on 2/15/15 from:
<http://www.counseling.org/knowledge-center/licensure-requirements/state-professional-counselor-licensure-boards>.

American Counseling Association (2010). State licensure boards that have adopted the ACA Code of Ethics. Retrieved on 1/11/15 from
<http://www.counseling.org/docs/ethics/aca-code-of-ethics-2010-%2812-22-09%29.pdf?sfvrsn=2>.

American Personnel and Guidance Association. (1979). Alabama licensure legislation. *Guidepost*, August 16, 2, 4. Alexandria, VA: Author.

Caplan, D., Tarvydas, V. M., & Gladding, S. T. (2014). 2020: A vision for the future of counseling: The new consensus definition of counseling. *Journal of Counseling and Development*, 92, 366-372.

Glosoff, H. L., Benschhoff, J.M, Hosie, T.W, & Maki, D. R. (1995). The 1994 ACA model legislation for licensed professional counselors. *Journal of Counseling and Development*, 74(2), 209-220.

Wilcoxon, S. A., Remley, T.P., & Gladding, S.T. (2013). *Ethical, legal, and professional issues in the practice of marriage and family therapy (5th ed. - Update)*. Columbus, OH: Pearson.

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Magnuson, S. and Wilcoxon, S.A. (1998). Clinical supervision of prelicensed counselor: A qualitative inquiry. *The Alabama Counseling Association Journal*, 24 (1), 54-68.

Abstract

A comprehensive qualitative inquiry was conducted to obtain descriptive data related to perceived needs and existing practices for supervision of prelicensed entry-level counselors in Alabama. Twelve thematic categories emerged in the data analysis: (a) benefits of supervision for prelicensed counselors, (b) perceived purposes of supervision of prelicensed counselors, (c) responsibilities attributed to supervisors of prelicensed counselors, (d) perceived professional needs of prelicensed counselors, (e) practices and approaches for supervising prelicensed counselors, (f) the process of supervision, (g) prelicensed counselor performance indicating successful supervision, (h) characteristics attributed to effective supervisors, (i) perceptions of ineffective supervision of prelicensed counselors, (j) concerns related to professional ethics, (k) training for supervisors of prelicensed counselors, and (l) recommendations for improving the supervision of prelicensed counselors. This manuscript features a summary of the findings in each of these categories.

Clinical Supervision Revisited

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Representing ALGBTICAL: I serve as a Member-at-Large for the leadership team of

ALGBTICAL. Their mission is to 1) promote greater awareness and understanding of sexual minority issues among members of the counseling profession and related helping professions, 2) develop, implement and foster interest in charitable, scientific and educational programs designed to further the human growth and development of LGBT

clients and communities, 3) protect from harm LGBT individuals by language, stereotypes, myths, misinformation, threats of expulsion from social and institutional structures and other entities, and from beliefs contrary to their identity, and 4) provide educational programs and resources to raise the standard of practice for all counselors who serve LGBT clients and communities.

In recognition of the 40th anniversary of the Alabama Counseling Association (ALCA) *Journal*, editor Linda Foster invited me to comment on Magnuson and Wilcoxon's (1998) *Clinical Supervision of Prelicensed Counselors: A Qualitative Inquiry*. I was honored to accept this invitation: it was published the same year I completed my master's degree, and I have been a fan of both authors' work over the years. I utilized this study in my own dissertation research, and maintain on-going interest in both clinical supervision and qualitative research. In this article, I hope to honor the work of Magnuson and Wilcoxon (1998) by summarizing the original study, highlighting the most salient points made, and commenting on related changes in the profession between then and now.

Summary of Original Article

Magnuson and Wilcoxon (1998) presented the first author's dissertation research in an ALCA Journal article guest edited by Dr. Judith Harrington, a supervision guru in her own right. The authors identified "perceived needs and existing practices for supervision of prelicensed, entry-level counselors in Alabama" (p. 54) through interviews with three counselor educators, four prelicensed counselors, and five supervisors, each of whom had been recommended as participants by the Executive Officer of the Alabama Board of Examiners in Counseling

(ABEC). At the time of their publication, the authors noted that there had been minimal scholarship addressing characteristics and traits for competent supervision of provisionally licensed counselors (Magnuson & Wilcoxon). Qualitative data analysis of the interview transcripts yielded 12 thematic categories (now commonly referred to as “themes”; Hays & Singh, 2012). The categories, briefly summarized, included the following:

1. Benefits of supervision - benefits cited for supervisors, pre-licensed counselors, the profession, and clients. Some specific benefits to counselors in training included enhanced awareness of the therapeutic process, increased knowledge, and personal growth.
2. Purposes of supervision – thoughts and ideas referencing accountability and quality control in clinical supervision
3. Responsibilities attributed to supervisors – thoughts about how they monitored the work and facilitated counselor growth.
4. Perceived professional needs of prelicensed counselors - highlighted the need for both structure and support in the supervision process, along with including specific content in pharmacology, ethics, diagnostic skills, therapeutic goals, treatment planning, discerning therapeutic boundaries, and integrating theory with practice.
5. Practices and approaches for supervising - pointed to the wide variety of procedures, structure, evaluation type and frequency, and requirements in various supervision relationships.
6. The process of prelicensed counselor supervision - reflected the nature of the supervision relationship beginning with a level of dependence, and moving to collegiality.

7. Prelicensed counselor performance indicating successful supervision - revealed tentativeness and uncertainty in defining ‘successful’ supervision.
8. Characteristics attributed to effective supervisors – included professional role model, invested in professional growth of supervisee, able to discern and respond to needs, committed to modeling and encouraging participation in professional associations, proficient as a skilled counselor, able/willing to give extensive feedback.
9. Perceptions related to ineffective supervision – referred to possible abuse of power on the part of supervisors, supervisors not meeting regularly with supervisees, and supervisors “beating up” supervisees early in the process
10. Concerns related to professional ethics – focused on boundaries and dual relationships, breaches of confidentiality, and differences in religious/spiritual belief systems.
11. Training for supervisors – endorsed by the counselor educator and supervisor participants; focused on importance of formal training prior to providing supervision.
12. Recommendations for improving the supervision of prelicensed counselors – focused on the need for more clarity in expectations around supervision, which would be helpful to both supervisors and supervisees.

In the discussion of their results, the authors pointed out that their data affirmed previous suggestions that mechanisms for systematic articulation from academic to postgraduate supervision experiences were inadequate (p. 66). Additionally, they suggested the need for increased uniformity and clarity regarding supervisory responsibilities, along with effective and efficient training opportunities for supervisors. They called for single case, outcome, and longitudinal inquiry to “lend precision to determining appropriate sequencing of interventions and time requirements” (p. 67). The authors concluded that the practice of clinical supervision

had been legitimized; but that maintaining the integrity of academic preparation and postgraduate supervision for new counselors would require ongoing development of questions (and their answers), along with ongoing resolutions to dilemmas associated with the supervision process. As we look back and consider all that has been accomplished in clinical supervision, I hope the reader will agree that we continue to address such questions and dilemmas.

This original (1998) article laid the groundwork for many more contributions to the literature focused on supervision content and process. Magnuson and Wilcoxon both went on (together and separately) to make numerous contributions to counseling and counselor education scholarship, and I found 12 publications specifically addressing clinical supervision authored by one or both of them (e. g., Magnuson, Black & Norem, 2004; Magnuson, Norem, Jones, McCrary & Gentry, 2000; Magnuson, Norem & Wilcoxon, 2000 and 2002; Magnuson & Shaw, 2003; Magnuson, Wilcoxon & Norem, 2000a and 2000b; Norem, Magnuson & Wilcoxon, 2006; Wallace, Wilcoxon & Satcher, 2010; Wilcoxon, Jackson & Townsend, 2010; Wilcoxon, Norem & Magnuson, 2005; Wilcoxon & Magnuson, 2003).

Discussion

First Impressions

There were many striking thoughts I had about the article and where the “state of supervision” is today, but two were quite immediate. First, Magnuson and Wilcoxon (1998) called for better clarification for counselor trainees regarding the multi-faceted road to licensure, and that same year, Bernard and Goodyear (1998) called for differentiation between training and supervision. This suggests a 1998 consensus from the field that counseling students and counselor educators and supervisors needed better clarification of the process. In the original

article, Magnuson and Wilcoxon asked, “What implications for curriculum planning, postgraduate supervision, and collaboration would result if supervision for prelicensed counselors were explicitly viewed as the culminating component of formal preparation?” The field is closer now, yet with so many specialization areas and different types of credentials, this standard may never be completely met.

Today, there is a CACREP (2009) standard (II.G.1.e) that master’s students receive initial training in supervision models, practices and processes. This training may increase students’ understanding of the broader licensure process, and may also help prepare them to receive supervision, both in practicum/internship as well as in their post-masters work. A number of master’s programs do introduce state licensure as a part of their curriculum, and this is a vast improvement in the field. However, as a counselor educator, I’ve known many counseling students who are remain mystified by the process.

The second salient realization for me was the utilization of the work of L. DiAnne Borders (article citations 1992a., b.; 1995), who had by then established herself as a frequent writer on the topic of clinical supervision. Today, Borders continues to be a prolific contributor to the literature on clinical supervision, has served on a variety of editorial review boards, and is currently the editor for *The Clinical Supervisor* (Taylor & Francis, 2015), a peer-reviewed journal dedicated to the practice of clinical supervision among a variety of helping professionals, including counselors. In fact, our authors have some of their own work published there (e.g., Magnuson, Norem, Jones, McCrary, & Genty, 2000; Wilcoxon & Magnuson, 2003). Borders has mentored and inspired many supervision dissertations, including my own.

Results and Changes Over Time

The first three themes generated by Magnuson and Wilcoxon (1998) seemed to predict Bernard and Goodyear's (2014) dual purpose for supervision: "to foster the supervisee's professional development.... [and] to ensure client welfare – the supervisor's gatekeeping function is a variant of the monitoring of client welfare" (p. 13). This statement has been refined over the several iterations of the Bernard and Goodyear (2014) text. The purposes and definition of supervision have also been addressed in a number of ways by a number of scholars over the years, but based on an informal review of the ACA/ACES Syllabus Clearinghouse, Bernard and Goodyear's (2014) work appears to remain the leading text for teaching supervision in doctoral programs. Other definitions and purposes appear to communicate the same basic premises of client welfare and supervisee development. The congruence of thought about the overall context of supervision between then and now suggests that helping professionals are, and have been, and remain more clear than unclear about what the process supervision *should* produce. Likewise, theme #6 (*The process of prelicensed counselor supervision*) has been echoed in scholarly thinking regarding the development of supervision relationships (Benshoff, 2009; Falender & Shafranske, 2014; Watkins, 2011).

How supervision happens. Themes 4, 5, 7, and 8 highlighted the autonomy that supervisors have had in deciding about the structure, content, and process of supervision. This autonomy appeared to create confusion for the participants in 1998, and it may still leave some supervisors and supervisees confused today. Looking at what gets evaluated in supervision may imply what is expected. For example, the Alabama Board of Examiners in Counseling (ABEC) website provides two evaluative supervision forms: one for annual progress monitoring, and the other for the final report. Both require the supervisor to rate supervisees in a variety of broad areas (e.g., ethics, openness, client welfare, diagnosis, professionalism, sensitivity to diversity,

organizational skills). However, specifics aren't outlined, leaving the supervisor the freedom to focus on what they see fit, and evaluate in the manner they see fit.

Indeed, each state's forms vary based on local code. For example, the Virginia Board of Counseling requires quarterly updates on a form with open-ended questions targeting client population(s) seen, issues addressed, therapy techniques used, assessment instruments used, and evaluation summary. In addition to these, completing the final Verification of Supervision form requires the supervisor to evaluate specific skills in counseling/psychotherapy techniques, appraisal, evaluation and diagnostic procedures, treatment planning and implementation, case management and record keeping, professional identity and function, and professional ethics and standards of practice. Different than the Likert scale used in Alabama, the Virginia form offers two options: yes - the applicant has satisfactorily demonstrated competencies in this area, or no - additional work is required to achieve competency. In North Carolina, quarterly reports only address hours of direct/indirect client time and individual/group supervision, while the Final Supervision Report broadly addresses items with a Likert scale similar to Alabama. The differences in the way various states address the final "signing off" process to signify the end of supervision suggests that as a discipline, we're still not precisely certain of what we expect newly minted licensees to be able to do. States retain the authority to grant licensure in the manner they see fit, but the promise of licensure portability may eventually also inform the material that is covered in that final signing off process. Currently, the licensure boards in Tennessee and Kentucky appear to be working on a reciprocity agreement (Martin Cortez Wesley, LinkedIn postdated 3/23/15). Further, the website of the American Counseling Association (ACA; www.counseling.org) includes a link to the "20/20: A Vision for the Future of Counseling" project, and it appears that we are making progress toward true licensure

portability. However, the lack of consensus around educational requirements remains a stumbling block to this end (Yelamanchili, 2014).

The participants in Magnuson and Wilcoxon's (1998) study seemed to agree that supervisees needed to learn about pharmacology, and 17 years later, the need is still present. This is a tricky topic since we aren't medical doctors, yet many general practitioners write psychotropic prescriptions based on information provided by counselors, and counselors may be the first to notice abreaactions to certain medications (Williams, 2013). Psychotropic knowledge is not a CACREP (2009) requirement, nor is it found on state licensure sign-off lists. Yet the growing number of workshops and webinars on the topic suggests maximum demand on the part of counseling professionals. In Alabama alone, Gary Williams recalls having a "full house" at each of his 12+ presentations on the topic over the past eight years (Personal Communication, 3/23/15).

Supervision standards and training. In themes #7 and #9, Magnuson and Wilcoxon's (1998) participants agreed that identifying good supervision was a challenge (pp.61, 63). Through the years, we're getting closer (Benshoff, 2009; Bernard & Goodyear, 2014; Falener & Shafranske, 2014; Magnuson & Shaw, 2003; Magnuson, Wilcoxon & Norem, 2000b; Norem, Magnuson & Wilcoxon, 2006; Wallace, Wilcoxon & Satcher, 2010) but we surely know what good supervision *isn't* (Creaner, 2009; Ellis, D'luso & Ladany, 2008; Ellis, Siembor, Swords, Morer & Blanco, 2008; Magnuson, Wilcoxon & Norem, 2000a; Wilcoxon, Norem & Magnuson, 2005). Many state licensure boards (including Alabama) have added language to their codes requiring length and frequency of supervision meetings. Also, the *Approved Supervisor* model of the American Association of State Licensure Boards (2007) offers a guideline, and the

Association for Counselor Education and Supervision (ACES; 2011) *Best Practices* document provides a thorough list of aspirational qualities and processes to which supervisors can strive.

The 1998 participants agreed that those who supervise pre-licensed counselors should have some formal training. Given the variety of supervision standards (e.g., CACREP, 2009; Engels et al., 2010) consensus around minimal competencies for clinical supervisors is still being developed in the counseling discipline (Neuer Colburn, Grothaus & Hays 2015; Washburn, 2015), creating inconsistencies in training curricula. Doctoral counseling students have reported role confusion in their journey to becoming competent supervisors (Frick, 2009; Hays & Neuer, 2010). And since state supervision expectations vary so much, there is no best method for training and evaluating field supervisors (Washburn, 2015). Full development of minimal supervision competencies may increase the quality of academic supervision training, as well as the trainings that have been developed in some states (including Alabama) for licensed practitioners wishing to serve as clinical supervisors. One big improvement in the area of supervisor training is that now there are a number of states requiring ongoing supervision CEUs to remain active as approved supervision providers. Further, Kemer, Borders and Willse (2014) conducted a concept mapping analysis of expert supervisors' cognitions while providing supervision, the results of which may ultimately inform best practices for development of true expertise in supervision.

Supervision ethics. Ethics was an area that the 1998 participants agreed needed to be addressed in a variety of contexts (p.63). Their concerns centered on dual relationships and the opportunities for supervisors to, perhaps unintentionally, take advantage of supervisees. Of course, our language is now “multiple relationships” in acknowledgement of the various ways that counselors might be loosely connected with clients or supervisees in non-harmful, non-

professional ways. Ethics codes have undergone several revisions since the original article was published. Currently, the ACA (2014) *Code of Ethics* (Section F) addresses many of the concerns cited in the 1998 article, including the importance of intentionality around extending the supervisory relationship, competence, alternative formats (e.g., online), and prohibitions on imposing certain values on supervisees. The ACES (2011) *Best Practices* document expands on ethical codes and offers very specific ways for supervisors to avoid ethical dilemmas when providing supervision. The 1998 participants' voices were definitely heard in the field, and we've made great strides in the area of supervision ethics.

Qualitative Research Methods

Magnuson & Wilcoxon (1998) didn't name a research tradition in their methodology, but based on categories in use today, their study would have been labeled phenomenological in nature, as it identified the current practice and lived experiences of supervisees, supervisors, and counselor educators. Their work filled an important void in the supervision literature through this study, and qualitative research has grown quite a bit over the years. For example, the measures they took for data triangulation (by interviewing people from 3 different stakeholder groups) and member checking actually met some of the current standards for ensuring trustworthiness in qualitative research (Hays & Singh, 2012). Scholarly thinking about subjectivity and objectivity in qualitative research has also changed. As the primary researcher, Magnuson assumed the position of student, claiming no *a priori* assumptions about the participants, their perceptions, or their practices (p. 56). Today, we do assume that qualitative investigators have a personal interest and corresponding bias going into the research, and we take measures to bracket assumptions, and utilize peer debriefing, research teams, reflexive journaling, and outside auditors to ensure that researcher bias does not skew the data analysis process (Hays & Singh, 2012).

Final Thoughts

The practice of clinical supervision has come a long way since 1998. Magnuson and Wilcoxon conducted timely qualitative inquiry around supervision practice in Alabama, and their results spawned ongoing improvements to the understanding and provision of clinical supervision, both in Alabama and around the country. With calls from the field for counselors to hold the tension of opposing values between themselves and their clients (ACA, 2014; Bayne & Neuer Colburn 2014; Elliott, 2011), be skilled in appropriate distance supervision strategies (McAdams & Wyatt, 2010; Scarcia-King, 2011; Vaccaro & Lambie, 2007), integrate spirituality (ASERVIC, 2009; Hartwig Moorhead, Neuer Colburn & Stewart, 2015), and promote social justice/advocacy competencies (Ratts, Singh, Nassar-McMillan, Butler & McCullough, 2015), there is surely no shortage of issues to deal with in clinical supervision. At the same time, we are indebted to the works of supervision scholars like Sandy Magnuson and Allen Wilcoxon for paving the way for systemic improvements by giving voice to the stakeholders in clinical supervision.

References

Alabama Board of Examiners in Counseling (2006, December). *Supervision Report Forms*.

<http://www.abec.state.al.us/supervision.aspx>, Accessed 03/23/15.

American Association of State Counseling Boards. (2007). *Approved supervisor model*.

Retrieved from

www.aascb.org/associations/7905/files/AASCB_Supervision_Model_0607.pdf.

American Counseling Association. (2014). *ACA code of ethics*. Alexandria, VA: Author.

Association for Counselor Education and Supervision (2011). *Best practices in clinical*

supervision. Retrieved from [www.acesonline.net/wpcontent/uploads/2011/](http://www.acesonline.net/wpcontent/uploads/2011/10/ACES-Best-Practices-in-clinical-supervision-document-FINAL.pdf)

[10/ACES-Best-Practices-in-clinical-supervision-document-FINAL.pdf](http://www.acesonline.net/wpcontent/uploads/2011/10/ACES-Best-Practices-in-clinical-supervision-document-FINAL.pdf)

Association for Spiritual, Ethical, and Religious Values in Counseling (2009). *Competencies for*

Addressing Spiritual and Religious Issues in Counseling.

www.aservic.org/resources/spiritual-competencies.

Bayne, H. B., & Neuer Colburn, A. A. (2014, November). *Ethical supervision practices for*

counselors working with LGBT issues. 3-Hour Post Conference Session, Virginia

Counseling Association Annual Conference, Williamsburg, VA.

Benshoff, J. M. (2009, February). *Through a supervisor's lens: Introduction to clinical*

supervision. Keynote presentation, Clinical Supervision Institute, University

of NC at Charlotte, Charlotte, NC.

Bernard, J. M., & Goodyear, R. K. (1998). Clinical supervision: Lessons from the literature.

Counselor Education & Supervision, 38, 6-23.

Bernard, J. M., & Goodyear, R. K. (2014). *Fundamentals of clinical supervision (5th ed)*. Upper

Saddle River, NJ: Pearson.

Council for Accreditation of Counseling and Related Educational Programs. (2009). *The 2009*

standards. Retrieved from <http://www.cacrep.org/wp-content/uploads/2013/12/2009-Standards.pdf>

Creaner, M. (2009, June). *What is good supervision?* Presentation given at the 5th

International Interdisciplinary Conference on Clinical Supervision, Buffalo, NY.

Elliott, G. R. (2011). When values and ethics conflict: The counselor's role and

responsibility. *Alabama Counseling Association Journal*, 37, 39-45.

Ellis, M. V., D'lusio, N., & Ladany, N. (2008). State of the art in the assessment,

measurement, and evaluation of clinical supervision. In A.K. Hess, K.D. Hess, &

T.H. Hess (Eds.), *Psychotherapy supervision: Theory, research and practice (2nd*

ed). (pp. 473 – 479). Hoboken, NJ: John S. Wiley & Sons.

Ellis, M. V., Siembor, M. J., Swords, B. A., Morere, L., & Blanco, S. (2008, June).

Prevalence and characteristics of harmful and inadequate clinical supervision.

Paper presented at the 4th Annual International Interdisciplinary Clinical
Supervision Conference, Buffalo, NY.

Engels, D. W., Barrio Minton, C. A., Ray, D. C., Bratton, S. C., Chandler, C. K., Edwards, N. A.,
.... & Smith, M. R. (2010). *The professional counselor: Portfolio, competencies,
performance guidelines, and assessment* (4th ed., pp. 144-151). Alexandria, VA: ACA.

Falender, C. A., & Shafranske, E. P. (2014). Clinical supervision: The state of the art. *Journal
of Clinical Psychology, 70*(11), 1030-1041. doi:10.1002/jclp.22124.

Frick, M. H. (2009). Supervisor as supervisee: Factors that influence doctoral students'
self-efficacy as supervisors.. Ph.D. dissertation, University of Virginia, United
States –Virginia. *Dissertations & Theses: Full Text*.(Publication No.
AAT3400921).

Hartwig Moorhead, H. J., Neuer Colburn, A. A., & Stewart, B. (2015, March). *Connecting
across the miles: Spiritual integration in distance clinical supervision*. Poster session.
American Counseling Association, Orlando, FL.

Hays, D. G., & Neuer, A. A. (2010, June). *Tiered supervision: A program evaluation*.

Roundtable session presented at the 6th International Interdisciplinary
Conference on Clinical Supervision, Adelphi University, Garden City, NY.

Hays, D. G., & Singh, A. A. (2012). *Qualitative inquiry in clinical and educational settings*.

New York, NY: Guildford Press.

Kemer, G., Borders, L. D., & Willse, J. (2014). Cognitions of expert supervisors in academe: A concept mapping approach. *Counselor Education & Supervision, 53*, 2-18.

Magnuson, S., Black, L., & Norem, K. (2004). Supervising school counselors and interns: Resources for site supervisors. *Journal of Professional Counseling: Practice, Theory & Research, 32*, p. 4-15.

Magnuson, S., Norem, K., Jones, N. K., McCrary, J. C., & Gentry, J. (2000). The triad model as a cross-cultural training intervention for supervisors. *Clinical Supervisor, 19*, 197-211.

Magnuson, S., Norem, K., & Wilcoxon, S. A. (2000). Clinical supervision of prelicensed counselors: Recommendations for consideration and practice. *Journal of Mental Health Counseling, 22*, 176-190

Magnuson, S., Norem, K., & Wilcoxon, S. A. (2002). Clinical supervision for licensure: A consumer's guide. *Journal of Humanistic Counseling, Education & Development, 41*, 52-60.

Magnuson, S., & Shaw, H. E. (2003). Adaptations of the multifaceted genogram in counseling, training, and supervision. *Family Journal, 11*, 45-54.

*Magnuson, S., & Wilcoxon, S. A. (1998). Clinical supervision of prelicensed counselors: A qualitative inquiry. *The Alabama Counseling Association Journal, 24*(1), 54-68.

- Magnuson, S., Wilcoxon, S. A., & Norem, K. (2000a). A profile of lousy supervision: Experienced counselors' perspectives. *Counselor Education & Supervision, 39*, 189-202.
- Magnuson, S., Wilcoxon, S. A., & Norem, K. (2000b). Exemplary supervision practices: Retrospective observations of experienced counselor. *Journal of Professional Counseling: Practice, Theory & Research, 28*, p. 93.
- McAdams III, C. R., & Wyatt, K. L. (2010). The regulation of technology-assisted distance counseling and supervision in the United States: An analysis of current extant trends and limitations. *Counselor Education & Supervision, 49*, 179-192.
- Neuer Colburn, A. A., Grothaus, T., & Hays, D. G. (2015). A Delphi study and initial validation of counselor supervision competencies. *Unpublished manuscript (under review)*.
- Norem, K, Magnuson, S., & Wilcoxon, S. A. (2006). Supervisees' contributions to stellar supervision outcomes. *Journal of Professional Counseling: Practice, Theory & Research, 34*, p. 33-48.
- Ratts, M. J., Singh, A. A., Nassar-McMillan, S., Butler, S. K., & McCullough, R. (2015, March). *Revision of the AMCD multicultural counseling competencies: Future directions in counseling practice and research*. Content Session at the ACA Annual Conference, Orlando, FL.
- Scarcia-King, T. J. (2011, Winter). Effective strategies for virtual supervision. *New Directions for Student Services, 136*, 55-67.

Taylor & Francis (2015). Editorial board. <http://www-tandfonline-com.proxy.lib.odu.edu/action/journalInformation?show=editorialBoard&journalCode=wcsu20#.VQ9RKGTF97k>. Accessed 3/22/15.

Vaccaro, N., & Lambie, G. W. (2007). Computer-based counselor-in-training supervision: ethical and practical implications for counselor educators and supervisors. *Counselor Education & Supervision, 47*, 46-57.

Wallace, M. D., Wilcoxon, S. A., Satcher, J. (2010). Productive and nonproductive counselor supervision: Best and worst experiences of supervisees. *Alabama Counseling Association Journal, 35*, 4-13.

Washburn, D. (2015). Assessing perceptions of clinical supervisory best practice. *Unpublished dissertation; Regent University*.

Watkins, C. E. Jr. (2011). The real relationship in psychotherapy supervision. *American Journal of Psychotherapy, 65*, 99-116.

Wilcoxon, S. A., Jackson, J. L., & Townsend, K. M. (2010). Professional acculturation: A conceptual framework for counselor role induction. *Journal of Professional Counseling: Practice, Theory & Research, 38*, p. 1-15.

Wilcoxon, S. A., Norem, K., & Magnuson, S. (2005). Supervisees' contributions to lousy supervision outcomes. *Journal of Professional Counseling: Practice, Theory & Research, 33*, p. 31-49.

Wilcoxon, S. A., & Magnuson, S. (2003). Concurrent academic and pre-licensure supervision: When supervision is not just supervision. *Clinical Supervisor, 21*, 55-66.

Williams, G. (2013, November). *Paxils & Valiums & Bayers....oh my! A demystifying psychotropic medications primer for non-prescribing mental health professionals*. Content session at the Annual Conference for Alabama Counseling Association, Birmingham, AL.

Yelamanchili, A. (2014). Endorsement regarding portability and licensure. *ACA Knowledge Center*, <http://www.counseling.org/knowledge-center/search/2014/11/04/endorsement-regarding-portability-and-licensure>, accessed 03/23/15

**Eddy, J. (1983). Approaches to human rights: Awareness and prejudice defusing.
Published as the *Alabama Personnel and Guidance Journal*, 9 (1), 15-28.**

Abstract

In an age when social science professionals, particularly clinical counselors and their therapist, must be accountable for performance through rigorous evaluation (Bergen & Strupp, 1972, pp. 10-11; Goldiamond, et al., 1975, pp. 110- 128); the author has struggled to understand different approaches used by clinicians to assess their professional competence. As a result of these inquiries, it is apparent that evaluation of psychotherapy and other forms of counseling is a complex, often subjective, and poorly understood process.

Human Rights Revisited

Asha Dickerson, Ph.D., LPC, NCC

Representing which division of ALCA: Alabama Association for Multicultural Counseling and Development

ALAMCD is the representation of the Association for Multicultural Counseling and Development (AMCD) in Alabama. This division is charged with the responsibility of defending human and civil rights as prescribed by law. It encourages changing attitude and enhancing understanding of cultural diversity. Provisions are made for in-service and pre-service training for members and for others in the profession. Efforts are made to strengthen members professionally and enhance their ability to serve as behavioral change agents.

My initial thoughts are that although the title stated that the article was about human right and prejudice defusing, that the article barely touched on either. It appeared as though the author focused more on clinician evaluation as a way to begin to touch on the 2 areas, but the author did not specify any human rights violations that the clinicians would be on the lookout for and overall, diversity among clients was not addressed at all. Also, the author did not define the terms and I found it difficult to understand how the he decided on his title.

Was there an important point in the article that you consider relevant today?

The author stressed that “Evaluation is a continuous social process” (pg. 15). This is still true today and clinicians need to continue to evaluate themselves as well as seek supervision and consultation as a form as evaluation from peers and colleagues.

Were there points in the article that have changed significantly since the article was published?

Yes. There was not any attention given to multiculturalism and social justice issues. This article was published in 1983, but the Multicultural Counseling Competencies were not created until 1996. Counselors did not have a set standard of practice for working with diverse clients and although race relations were significantly better than they were in the 1960s and 1970s, it appears that in the 1980s, counselors preferred to simply not address the issues and instead, believe that all people could and should be treated the same with disregard for differences and cultural backgrounds.

Based on your current perspective what do you think is the biggest difference between when this article was first published and now?

One of the biggest differences is that for this article, when the researcher defined clinicians, he included professionals in the disciplines of pastoral counseling, social work, psychology, psychiatry, and even nursing. A “professional clinical counselor” was also considered to hold a Bachelor’s, Master’s or Doctoral degree. Today, the role of counselors has been clearly defined through the assistance of our various counseling boards and associations. Each discipline has been willing to define their jobs and the differences in each and a Bachelor’s degree is no longer sufficient for a “professional clinical counselor.” Under no circumstance would a nurse be grouped into the same category as social worker, counselors, and psychologists.

Based on the differences between then and now, do you think that counseling as become more effective for our clients?

Counseling has become more effective for our clients because many counselors are now willing to acknowledge white privilege and also acknowledge that there are groups of people who are treated less favorably than others. This is partly due to the Association for Multicultural Counseling writing the Multicultural Counseling Competencies in 1996. The Association is now in the process of updating those competencies based on research that has been completed by scholars devoted to multicultural issues and social justice.

Do you think that counselors now are better prepared to work with this topic?

I think that counselors who have been taught in programs that adequately address multicultural counseling and social justice are now better taught to work with this topic. Unfortunately, there are still many programs that do not provide an adequate focus on those issues and do not even provide their students with diverse faculty to learn from. Ultimately, there are many poor reasons still given for why counselors and counselor educators do not engage in “Prejudice defusing” and the lack of diversity seen in many universities in Alabama is a huge issue that many either chose to ignore or make excuses for.

Do you think historical article is still relevant today in our work?

This historical article is still relevant simply because the words “Human Rights” and “Prejudice Defusing” were in the title. There are terms used today that scare people away from reading further. Many are turned off by the thought of having to admit that they may actually have biases and that their power to impose their prejudice on others is an issue of human rights. The author did not delve as deeply into those terms as I would have preferred.

Final thoughts:

Although there were publications that did more than scrape the surface of human rights issues in counseling, I imagine that discussion of such things was still very uncomfortable for some people in 1983. I am also willing to admit that because I was born in 1983, I cannot state that as fact. To some extent, many counselors are still uncomfortable with the topics of diversity, human rights, and prejudice today in 2015. Remaining uncomfortable with open discussion does not promote effective counseling and advocacy. Being unwilling to become aware of ways in which our biases affect our clients and students will only promote lackluster clinical services and produce incompetent counselors. This article has also helped me realize that the definition of a professional counselor and our identity as such is still relatively new (31 years is not very long ago).

Satcher, J., & Leggett, M. (2006). Homonegativity among Alabama counselors. *The Alabama Counseling Association Journal*, 32 (2), 1-11.

Abstract

Members of the *Alabama Counseling Association* were surveyed to examine the extent to which they demonstrate homonegativity (prejudicial attitudes towards homosexuality). The majority of the counselors did not appear to approach homosexuality from traditional prejudices, although almost one-third believed homosexuality to be immoral. The counselors appeared to have mixed views about current issues important to persons who are gay or lesbian, with many expressing homonegative beliefs about equality and social justice for person who are gay or lesbian. Discussion of the findings focuses on the ethical obligations of counselors to respect diversity, promote the well-being of persons whom they serve, and to be advocates for social change.

Homonegativity Revisited

**Jamie Satcher, PhD, Professor Emeritus, The University of Alabama
Mark Leggett, PhD, LPC, Core Faculty, MS Clinical Mental Health Program, Walden University**

Review and Comments

This study examined both traditional homonegativity and modern homonegativity among Alabama counselors who were members of the Alabama Counseling Association. *Traditional homonegativity* is negative beliefs about gay men and lesbians based upon stereotypes, myths, and misinformation. *Modern homonegativity* is negative beliefs as they relate to equality and social justice for gay men and lesbians.

The majority of the counselors responding did not appear to adhere to traditional homonegative beliefs. However, almost one-third believed homosexuality to be immoral, which we considered to be a meaningful percentage. Substantial percentages of the counselors responded negatively to most items measuring modern homonegativity, with their negative beliefs focused on resistance to equality for gay men and lesbians.

Our initial thought is that little has probably changed nearly a decade after the study was conducted and the results published. Alabama remains a state where resistance to equality for gay men and lesbians is strong. We believe that modern homonegativity likely continues to exist among substantial percentages of counselors in Alabama.

One comment we made in the article was that counselors who could not meet their ethical obligations to sexual minority clients should reconsider their decision to be a counselor. We received several emails from counselors who strongly disagreed with this statement. We believe, however, that the point was relevant then and remains relevant today. Around the time the article was published, the prevailing practice in counselor education programs was to advise students to refer clients to another counselor if the presenting issue (e.g., homosexuality) conflicted with the counselor's personal beliefs. This practice has evolved since then, with the prevailing ethical view being that counselors should be prepared to work with all clients regardless of the counselor's personal beliefs. The 2014 *Code of Ethics* of the American Counseling Association addresses nondiscrimination in section C.5 and personal values in section A.4.b (see below). Where counselors hold homonegative beliefs that may influence their ability to ethically practice with gay men and lesbians, they have an obligation to educate themselves about the source and validity of those beliefs, and they have an obligation to seek training about the struggles and challenges faced by gay men and lesbians.

The biggest difference between when this article was first published and now has been the advocacy efforts of ALGBTICAL as a division and by its individual members. The ALGBTICAL website provides a wide array of resources (e.g., articles, LGTBQ websites, and speaker panel) for counselors seeking information about LGBTQ issues and concerns. ALGBTICAL's annual winter workshop provides an invaluable resource for continuing

education related to working with LGBTQ clients. The presence of ALGBTICAL members among the leadership of ALCA promotes advocacy and awareness at the state level.

We continue to be hopeful that counselors in Alabama have become more effective when working with LGBTQ clients, not so much as a result of this article, but rather as a result of the advocacy efforts of ALGBTICAL and its leaders. We further believe that there remains resistance among many counselors in Alabama to issues important to the gay men and lesbians with whom they may be asked to work, primarily issues of equality.

Finally, we believe the following statement to be as relevant today as it was when the article was published in 2006: “Counselors in Alabama are encouraged to explore their values and belief systems and to critically examine the impact of those values and beliefs on ethical obligations when working with persons who are gay or lesbian.”

C.5. Nondiscrimination

Counselors do not condone or engage in discrimination against prospective or current clients, students, employees, supervisees, or research participants based on age, culture, disability, ethnicity, race, religion/spirituality, gender, gender identity, sexual orientation, marital/partnership status, language preference, socioeconomic status, immigration status, or any basis proscribed by law.

A.4.b. Personal Values

Counselors are aware of—and avoid imposing—their own values, attitudes, beliefs, and behaviors. Counselors respect the diversity of clients, trainees, and research participants and seek training in areas in which they are at risk of imposing their values onto clients, especially when the counselor’s values are inconsistent with the client’s goals or are discriminatory in nature.

Baltimore, M. (1993). The training of marriage and family counselors/therapists: A “systemic “controversy among disciplines. *The Alabama Counseling Association Journal*, 19 (1), 34-44.

Abstract

There appears to be a growing controversy between disciplines in the training of marriage and family counselors across the nation. Counselor education programs and marriage and family therapy institutions have both promoted the unique and distinctive nature of their programs. The implications for training and the need for collaboration are discussed.

Training Marriage and Family Counselors Revisited

Charlotte Daughetee Ph.D., LPC, LMFT, NCC

Professor of Counseling and Chair of the Department of Counseling and Leadership, University of Montevallo

About the author: Dr. Charlotte Daughetee has been counseling individuals, couples and families for over 25 years and has been a counselor educator for 16 years. Her graduate training was from the University of South Carolina, a CACREP institution, and she currently teaches at the University of Montevallo, which has three CACREP accredited tracks: School Counseling; Clinical Mental Health Counseling and Marriage; Couples and Family Counseling. She has been a long-time member of both ACA and AAMFT and holds LPC and LMFT licenses

My initial impression upon reading Baltimore’s article from 1993 is how clearly it captured the discordant relationship between AAMFT (American Association for Marriage and Family Therapy) and CACREP (Council for Accreditation of Counseling and Related Educational Programs) during the 1990s. The article addresses the fact that many members of AAMFT were graduates of CACREP counselor education programs. There was, and still is, a very clear interest in working with families and couples in the counseling profession. In my own graduate training at a CACREP institution in the late 1980s and early 1990s, I encountered many

faculty and mentors who were members of both ACA (American Counseling Association) and AAFMT, and who encouraged students to be active in both organizations. The contentious relationship that arose between ACA and AAMFT was disconcerting to counselors who wanted to work from a systemic perspective. However, out of this unsettled time, positive outcomes emerged. The IAMFC (International Association of Marriage and Family Counselors) became a significant and influential ACA division and CACREP developed the Marriage, Couples and Family program standards for accreditation. Baltimore's article is noteworthy in that it clearly articulates the discord of the time. Additionally, it provides historical context for the development of CACREP's Marriage Couple and Family Counseling program standards.

When the article was written, AAMFT and CACREP were challenging one another's applications for recognition by COPA (Council on Post-Secondary Accreditation). This argument was resolved with AAMFT's accrediting body COAMFTE (Commission on Accreditation for Marriage and Family Therapy Education) and CACREP both being approved as accrediting bodies by COPA; that approval continues today under COPA's successor CHEA (Council on Higher Education Accreditation). At the heart of this particular battle was the question of whether or not marriage and family was a distinct and unique discipline or a sub-set of a larger counseling identity.

While this point is still argued today, albeit with less intensity than in 1993, the training overlap between the two disciplines belies a unique distinction. Many CACREP Marriage, Couples and Family accredited programs meet the licensure requirements for both the LPC and LMFT licenses in their states, and many practitioners are qualified for and seek dual licensure. In the article, Baltimore noted the call in the counseling literature for communication between AAMFT and CACREP as the counseling field moved toward the development of training

standards for marriage, couple and family counseling. It is unclear to what extent such communication may or may not have occurred, but CACREP marriage, couple and family training standards were ultimately developed and implemented, and while there are differences between COAMFTE and CACREP accreditation guidelines, the core concepts are comparable and counselors who wish to work with couples and families can find appropriate training and experience in a CACREP Marriage, Couples and Family program.

This article is of notable historical importance to practitioners who work from a systemic perspective. Baltimore clearly captured the events and the tone of a rather combative time between marriage and family therapy and marriage and family counseling. There is still a disconnect between the two disciplines; however, the intensity of the conflict has been mitigated by the fact that all states now have both LPC and LMFT licensure. Quite accurately, Baltimore anticipated the effect of legislative licensure efforts on professional recognition disputes between organizations. Now that both disciplines have obtained licensure, and the turf wars that result from state licensure struggles have mostly waned, a more collaborative posture can be fostered in the field of mental health. In 1993, Baltimore cited literature that predicted increased collaboration between mental health disciplines. Additionally, in the discussion section of his article, he called for a more collaborative and cooperative spirit between disciplines. I believe this cooperative spirit has been evolving within the field of mental health over the past 22 years. New professionals go to work in agencies and settings where they practice in partnership with colleagues from a variety of mental health disciplines. As Baltimore called for in 1993, there has emerged a clear emphasis on interdisciplinary collaboration in today's workplace and such cooperation ultimately results in best practice for our clients.

Cecil, J. H., & Cecil, C. E. (1984). Excellence: Opportunity and challenge for Alabama's school counselors. Published as the *Alabama ACD Journal*, 10 (2), 3-9.

Abstract

Events of the past few months have converged to provide not only the greatest challenge, but the greatest promise, for school counseling professionals that have been forthcoming in this state in several decades. The work of the Alabama Association for Counseling and Development (AIACD) Task Force on Elementary School Counseling (Huckaby, 1983) and the Alabama State Department of Education Task Force for Writing a State Plan for Guidance, coupled with the recent publication of *A Plan for Excellence: Alabama's Public Schools* (Teague, 1984) have served to produce a climate that makes possible unprecedented progress in school counseling. Progress, of course is not a given, but will necessitate the mobilization of the school counseling profession throughout Alabama.

Revisiting School Counselors' Challenges

Dr. Jan Chandler, PhD., NCC

ALSCA, ALCA Journal Manuscript Submissions Reviewer

Retired School Counselor, Counselor Educator

ALSCA is a state division of ASCA and a division of ALCA.

“The vision of ALSCA is to encourage, enhance, and promote the work of the professional school counselor as a vital link in the education experience of students.”

(ALSCA Policies and Procedures Handbook 2014-15).

Goals include (as stated in the Handbook):

- To foster a closer relationship among school counselors and counselors in other settings.
- To improve the standards of professional school counselors.
- To assume an active role in promoting understanding and support of school counselor services.

- To develop working relationships with administrators, educational associations and state agencies.
- To advance the profession of counseling in order to maximize the academic, career, and personal/social growth of each individual.
- To promote the ASCA National Model for Standards.
- To publish educational and professional material.

Initial Thoughts: The authors of this article had a clear and accurate foresight into the future of school counseling and the need for advocacy and the use of data for evidence-based practices.

Relevant Point: In my opinion, the recommendation for the use of data in school counseling programs by the authors is still quite relevant. Convincing policy-makers of the value of school counselors has historically been very difficult. Because there were no set goals or curriculum in the beginning, counseling services were based on responding to the needs of the moment. Thus there was little opportunity to measure results. As of 2003, ASCA and the ALDE published written models for school counseling programs, including job descriptions, goals, activities, and ways to collect and use data to manage programs.

(In 1997, the first national standards were published by the American School Counselor Association. The first *ASCA National Model: A Framework for School Counseling Programs* was published in 2003,

and subsequently revised in 2005 and 2912. Alabama was one of the first states to adopt the model in 2003, when the ALDE published *The Comprehensive Counseling & Guidance Model for Alabama's Public Schools, Bulletin 2003, and No.89*. An updated version of Alabama's model is currently being reviewed.)

Changes Since Article Was Published:

Cecil and Cecil gave six recommendations to advance the school counseling profession in Alabama.

1. Provide program objectives, examples of recommended experiences, and methods of assessing the effectiveness of those experiences. Accomplished with the publication of Alabama's Comprehensive Model.
2. Educate stakeholders and the public as to the role and functions of school counselors and the preparation standards for "truly professional counselors."

Ongoing with the education of administrators as to proper activities for counselors, job descriptions published in school information venues, and public awareness packets provided by ALSCA to state legislators, education officials, and news outlets with invitations to visit counselors at their schools.
3. Provision of professional inservices and other training opportunities for practicing counselors.

Ongoing with opportunities provided by ALDE, universities, and national, state, and local counselor associations.

4. Formation of a statewide collection of outcome data from programs used in Alabama schools. Ongoing with publications in professional journals, and websites established by ALCA, ALSCA, and ALDE, such as *EDUCATEALABAMA*.
5. Establishment by ALDE of a roster of veteran counselors and counselor educators available to practicing counselors as consultants for assistance with program accountability and other issues. Still needed.
6. Enactment of legislation to promote excellence in Alabama's school counseling programs.

Ongoing with the acceptance of ALDE's Comprehensive Model with specific program guidelines and role descriptions. However, legislation is necessary to establish manageable student-counselor ratios and to relieve counselors of extremely time-consuming non-counseling duties such as testing and registrar responsibilities.

Current Perspective: In 1984, Cecil and Cecil wrote with incredible foresight. The concepts of school counseling program standards and the use of data for accountability were implausible for elementary counselors who were just starting their brand new programs, as well as for high school

counselors who were following in the footsteps of inherited roles from predecessors. Today those same roles have been identified and clarified in the 2003 Models published by ASCA and ALDE. The difference today? There is more awareness of the correct roles for counselors and the need for accountability to improve activities and programs.

Is Counseling More Effective for Clients:

For students in most schools, services have greatly improved because of changes in counselor education, expectations of stakeholders, and an overall appreciation for how school counselors help students in so many areas.

Counselor Preparation:

School counselors are definitely better prepared to provide comprehensive programs which address the various needs of diverse populations. On the other hand, world events and unpredictable life and environmental changes challenge even the best prepared.

Relevance of Article Today:

Although awareness has improved, the topic of data use for program improvement and public support is still vague to some counselors, not just in Alabama, but nationally. Articles continue to be published on a regular basis in professional journals. In fact, ASCA's *School*

Counselor March/April 2015 edition just included an article entitled *Theory Into Action* by Carey Dimmitt, Ph.D. which outlines the effectiveness of using data to customize counseling programs to the specific needs of individual schools.

So, yes, much of this article is relevant today.

Final Thoughts:

This article by Cecil and Cecil represents the progressive attitude in Alabama toward school counseling that led to the early adoption of the ASCA National Model and creation of its own model for Alabama school counseling programs. However, there is still much to be done to improve school counseling programs, i.e., decreasing student/counselor ratios and eliminating non-counseling responsibilities. Effective use of data, public awareness, and legislative support remain areas that school counselors could employ more efficiently.

Elliot, G. R. (2005). Gay, lesbian, bisexual and transgender issues in counselor education and supervision. *The Alabama Counseling Association Journal*, 31 (2), 36-43

Abstract

As a means of raising awareness, providing knowledge, and enhancing skills related to gay, lesbian, bisexual, and transgender issues in counseling, this article describes from the perspective of advocacy counseling illustrative issues faced by counselor educators and supervisors and identifies resources for responding to these issues in sound, ethical, and therapeutic ways.

Gay, lesbian, bisexual and transgender issues revisited

Glenda R. Elliott, Associate Professor, Emerita, UAB Counselor Education Program

LPC-SC, NCC

Representing ALGBTICAL

Please include a paragraph about your division and the goals and mission of that division:

ALGBTICAL was originally formed to raise awareness of and provide reliable information and resources related to lesbian, gay and bisexual (LGBT) issues in counseling. The purpose has been expanded to include transgender issues in counseling.

Your initial thoughts on the article you reviewed:

While the article was intended for counselor education programs in general, it was directed primarily to counselor education programs in the state of Alabama. I believe the intent of the article along with most of the information it contains remains relevant today as there is little evidence to suggest LGBT issues are embedded throughout the curriculum of most counselor education programs in the state. The article was written just prior to the publication of the 2005 American Counseling Association (ACA) Code of Ethics while the 1995 Code was still in effect. Thus, the references to the 1995 Code need to be brought in line with the 2014 Code which would make the points in the article even stronger regarding the ethical responsibilities of counselor educators and counselors.

Was there an important point in the article that you consider relevant today?

The statistics cited in the introduction could be updated which will show that discrimination against LGBT individuals remains relatively widespread throughout the United States and particularly in the state of Alabama as there are still no state laws or policies protecting LGBT individuals from discrimination.

Were there points in the article that have changed significantly since the article was published?

The point made regarding the possible conflict between a counselor's personal values and ethical responsibilities became a very significant issue in 2009 and 2010 with the two cases brought against two counselor education programs for disciplining students who refused to counsel gay and lesbian clients based on their religious views (Shallcross, 2010). I addressed this obvious conflict between a counselor's personal values and ethical responsibilities and provided an additional perspective for resolving the conflict to the perspectives outlined in the 2005 article (Elliott, 2011) It should also be noted that the strong defense of ACA on behalf of the counselor education programs in question was part of the larger consideration of the ACA in revising the current Code of Ethics.

Based on your current perspective what do you think is the biggest difference between when this article was first published and now?

There is an increased awareness today of the issues faced by LGBT individuals and families as well as an increase in some states of laws and policies protecting LGBT individuals, including the right to marry in a majority of states. Nevertheless, there remain those states that do not provide protection or the granting of the right of same sex partners to marry.

Based on the differences between then and now, do you think that counseling has become more effective for our clients?

Hopefully, the growing awareness of the issues faced by LGBT individuals and families, along with the now ready availability of reliable information and resources, is being translated into the curriculum of all counselor education and continuing education programs resulting in ethical and sound counseling practice.

Do you think that counselors now are better prepared to work with this topic?

I believe better prepared counselors are those who have attended counselor education and continuing education programs that provide reliable information about LGBT issues and, very importantly, those counselors who are willing and able to provide ethical and competent counseling practice.

Do you think historical article is still relevant today in our work?

Yes, not only the statistics and facts but also the personal experiences clients continue to bring to counselors strongly indicate the need for advocacy on the part of counselor educators, supervisors and counselors remains.

Your final thoughts:

I believe there is a continuing and important need for counselor education and continuing education programs to emphasize the integration of ethical guidelines with competent therapeutic practice, emphasizing a foundation of counseling practice based on the core conditions of the counseling process: unconditional positive regard, empathy, and congruence (Elliott, 2011).

References

- Elliott, G. R. (2011). When values and ethics conflict: The counselor's role and responsibility. *Alabama Counseling Association Journal*, 37 (1), 39-45.
- Shallcross, L. (2010, November). Putting clients ahead of personal values. *Counseling Today*, 32-34.

Day, R. W., Cecil, J., Comas, R., & Smith, R. (1977). Projecting future directions: A proposal for evaluating counselor education programs. Published as the *Alabama Personnel and Guidance Journal*, 4 (1), 67-78.

Abstract

In an educational setting there is a professional obligation for responsible internal review and evaluation of programs. To be meaningful, such self-study must, among other things, (a) focus on relevant issues and concerns, (b) inventory current functioning and assess anticipated needs, and (c) involve input from all available legitimate sources. Our belief is that the failure to comprehensively and systematically review and evaluate counselor education programs, particularly with regard to philosophy, methodology, and terminal objectives as perceived by all constituents, has contributed substantially to an increasingly factionalized and disillusioned profession, plagued with controversy.

Revisiting counselor education programs

Nancy J. Fox, Ph.D.

2014-2015 ALACES President

Associate Professor of Counselor Education, Retired

Pro Rata Adjunct Faculty of Counselor Education

Internal review, evaluation of programs and subsequent professional identity highlight the article written and published in 1977 by Drs. Day, Cecil, Comas, and Smith of The University of Alabama. Some of the concerns addressed in the historical article seem to have been addressed and perhaps the established article placed a light on significant topics, thereby yielding recognition and pointers for reconciliation. Some of the issues written about long ago, however, continue to resonate today in our training programs. Let's revisit the article and see how these thoughts shake out for Alabama counseling training programs in this new century.

The authors write that a counseling program "self-study must, among other things (a) focus on relevant issues and concerns, (b) inventory current functioning and assess anticipated

needs, and (c) involve input from all available legitimate sources.” (Day, et al., 1977 p. 67). Doesn't that sound somewhat familiar? The authors state their belief that the failure to review and evaluate programs “has contributed substantially to an increasingly factionalized and disillusioned profession, plagued with controversy.” (Day, et al., 1977 p.67). The authors mention a crossroads in the profession calling for training programs to stop allowing outsiders to determine our path, and rather to respond from within with answers and guidelines.

It seems the authors were truly ahead of their time, as the purpose of their article was to set up an evaluative system for use to structure counseling programs to meet contemporary needs. One suggestion of the authors and investigated in their literature review falls in the alignment of counselor education program guidelines to the accreditation standards current at the time of the publication, the standards provided by the Association for Counselor Education and Supervision (ACES). Certainly, ACES continues to play a current and guiding role. However, today there are more stringent guidelines provided by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). These guides for self-study are set from the accrediting agency and come with specific guidelines as well as self-study training workshops offered via CACREP. How many have attended one of those to better learn how to conduct self-study?

Even with CACREP's more strident evaluation system, self-study continues to follow the UA professors' basic map with effective review and evaluation. Their literature review also suggested the importance of using survey assessment information for program development. The CACREP assessment process moves along a circular path, with survey information utilizing review of outcome data and implementing what is learned therein into program development and maintenance for CACREP accreditation. The authors were well on the right path when they

indicated a need for student “voices” to be heard and implemented into program development. Current students, faculty, and employers, as well as graduates, provide input and are an integral part of the CACREP site visit and resulting accreditation. The UA professors were able to envisage and embrace the value of survey information in the program improvement process.

The authors constructed a four-step implementation model and each is included below with a brief ALACES president response.

“1. Cooperation among institutions in gathering and synthesizing data, and in avoiding program duplication among local institutions via reciprocal agreement in the provision of specialty programs.” (Day et al., 1977, p. 72). This first goal is one perhaps we could continue to strive to better to achieve today. We are somewhat separated across the state, but stronger and more active involvement in the Alabama Association for Counselor Education and Supervision (ALACES) could provide a bridge to strengthen our attempt to meet this goal.

2. “Involvement of graduate students in the entire process with appropriate course credit through such means as research seminars and program development courses.” (Day et al., 1977, p. 72) This goal seems to show progress, but continued work is needed to involve students more actively in research.

3. “Utilization of state, regional, and national ACES cooperative efforts such as in the development of standard survey instruments and the pooling of data. (Day et al., 1977, p. 72)”. As I reflect on this, it seems that CACREP has currently provided the structure and guidance for meeting this goal.

4. “Cooperative efforts between ACES and other divisions of APGA to develop role statements and accrediting bodies.” (Day et al., 1977, p.72). My view of ACES and the

American Counseling Association (ACA) (ACA replaced the American Personnel and Guidance Association which was the current name at the time of the author's published article) is that there is good communication and collaboration between these two organizations today in many joint adventures. However, most of the program standards routinely seem to be reviewed by CACREP.

The authors' primary outcome stated in the article was "the strengthening of existing counselor education programs by attuning educational experiences to identified needs and philosophies" (Day et al., 1977, p.72). Their light on the subject certainly has led to meeting these endeavors by Alabama university counseling programs.

In addition to the main outcome the authors provided six more outcomes presented below along with a brief ALACES president's response.

1. "The establishment of a model for the systematic evaluation of the counselor education program." (Day et al., 1977, p.72). CACREP demands this so it would seem this outcome has come to pass.
2. "Identification of strengths and weaknesses of the program in order that effective areas of training can be recognized and subsequently strengthened." (Day et al., 1977, p.72). Counselor Education faculty review data and implement solutions from the data into the annual program review so this is something that is an ongoing and ever-evolving activity for strong programs.
3. "Location of specific competency areas where skills are needed but not presently being provided." (Day et al., 1977, p.72). Practicum and internship feedback from university and field experiences site supervisors are constantly reviewing skills in students' clinical experiences with feedback provided to faculty. Resulting modifications to instructions occur in the appropriate

courses and most certainly in the practicum and internship supervision experiences. This is also an ongoing process that seems to ebb and flow in accuracy but should be a continued goal for all counselor education programs.

4. “Increasing professional commitment of students and counselors by their involvement in the processes of evaluation and program development .” (Day et al., 1977, p.72). CACREP seems to be the answer to many of these program evaluation and development decisions and again this seems to be currently another area of improvement due to CACREP’s strident standards and expectations.

5. “Provision of significant learning experiences for all who participate in the process.” (Day et al., 1977, p.72). This goal is a never-ending for every university counselor education program. It is solved today through student evaluations, and the feedback reports of employers, graduates, and alumni. CACREP again provides answers and the expectation of feedback, so programs are utilizing this data to maintain accreditation.

6. “Serving as a model for evaluation of other behavioral science disciplines.” (Day et al., 1977, p.73). This one is a really idealistic goal! We feel that we have made strides in this endeavor, however, the recent legislative action of one such sister discipline in the state has continued to keep us on our toes. We feel strength and respect resulted, but this act alone shows the need we have to work harder to meet this goal stated so long ago by the authors of this article who have provided incredible Alabama counseling insight and leadership.

Reading this historic article brought to the forefront feelings of immense pride that such visionary leaders have gone before and laid such a stronghold of stepping-stones for current ALACES members to follow. The light in this article shines on internal review, evaluation of

programs and subsequent professional identity, all linger to shine brightly today. Thanks to the perseverance of these early, prominent leaders and their keen discernment, much has been accomplished. However, much remains for Alabama Counselor Education Programs to “carry the torch” passed on by these fortuitous leaders and shine the light to further improve and grow our counseling programs.

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An official publication of the Alabama Counseling Association, The Alabama Counseling Association Journal is an electronic journal published twice a year. A primary purpose is to communicate ideas and information which can help counselors in a variety of work settings implement their roles and develop the profession of counseling. The Journal may include thought-provoking articles, theoretical summaries, reports of research, and discussions of professional issues, summaries of presentations, reader reactions, and reviews of books or media. The ALCA Journal is located on the ALCA website (www.alabamacounseling.org).

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