



**—** Volume 18, Issue 10

## **President's Message**

Midterm elections are scheduled for November 6, 2018. I want us all to take the time to complete several critical action items:

Plan the time that you will vote on November 6th and book this date and time on your calendar. Having a specific time planned and blocked off in your schedule book will increase your likelihood of following through with exercising your right to vote.

Educate yourself about the candidates and the issues. With 435 seats in the House of Representatives and one third of the Senate seats being open, we have ample opportunity to do our best to fill these seats with elected officials who will champion for our profession and for better mental health outcomes for our state

Encourage your friends and family to vote! We must captivate those in our circles of influence so that we can create dynamic networks of individuals who will join us in our efforts to shape legislation which will challenge the status quo, create positive systemic change and improve the mental wellbeing of all Floridians.

I hope to meet you all at our annual conference in Lake Mary, Florida on January 31, 2019 to February 2, 2019. At the conference, you will be able to receive updates regarding our legislative efforts as well as receive training from leading professionals in the mental health field.

As always, please reach out to me if you have questions to ask, stories to share or feedback to give. I thank you for being a member and key stakeholder of the Florida Mental Health Counselors Association.



Darlene Silvernail and Erica Whitfield from Florida receives a National Leadership award from AMHCA for FMHCA contributions to the National efforts for, Medicare inclusion strategies, License Portability Act and the Seniors Mental Health Improvement Board of Directors 2018 - 2019

**ED Message** 

President

Erica Whitfield

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Michael Holler

**Parliamentarian** 

Laura Giraldo **Executive Administrator** 

**FMHCA Chapters** 

Broward County Central Florida Emerald Coast Gulf Coast Miami-Dade Palm Beach County Space Coast Hello and welcome! I am so excited to report that we have been busy, busy, busy over the summer months and we already have so many new changes to be thankful for!

First and foremost, I want to extend a heartfelt thanks to each and every one of you who have reached out to volunteer on FMHCA's Committees this year. Wow, what a response we have had! I have said it before and I will say it again - FMHCA can only be as strong as its membership. Thankfully, we have some pretty strong members!

So it's that time of year again - time to start planning next year's Annual FMHCA Conference! Believe it or not the process is already underway.

We're also excited to announce so amazing preconference breakout sessions including:

⇒ Treating Anxiety and Phobia: EMDR Level 1

January 31st, 2019 8:00am - 5:00pm & February 1st, 2019 8:00am - 5:00pm

Dr. Benjamin B. Keyes 16 Clock Hours Cost: \$300.00

**⇒ 8 Hours Laws and Rules** 

January 31st, 2019 8:00am - 5:00pm

Michael Holler 8 Clock Hours Cost \$110.00

⇒ Qualified Supervisor Training (QST)

January 31st, 2019 8:00am -5:00pm & February 1st, 2019 8:00am - 5:00pm

12 Clock Hours Cost: \$210.00

⇒ WE ARE MEMORY WORKERS Introducing Neurocise®, EyePointing™ & NeuroPointing™ Guided Eye Movement Strategies to work with Traumatic Events & Memories

January 31st, 2019 8:30am - 6:00pm

Elvis Lester 8 Clock Hours Cost: \$75.00

⇒ Required State of Florida CEUs for Re-Licensure

Ethics – 3 Clock Hours

Medical Errors – 2 Clock Hours

Laws & Rules Refresher – 3 Clock Hours

Bob Decker & Michael Holler Cost \$85.00

Seats are filling up and I encourage you to take avenge of the early bird rate. Register today by CLICKING HERE.

> Darlene Silvernail PhD, LMHC, CAP Executive Director FMHCA



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Early Bird Rates Happening Now until November 1st, 2018 Click Here To Register



# **Conference Schedule has been finalized!**

SATURDAY- FEBRUARY 2nd	WORKSHOP	SALON	TRACK
7:00AM-8:00AM	REGISTRATION	SALON C	
7:00AM-8:00AM	MORNING GRAB AND GO	GRAND FOYER	
8:00 AM-12:00PM 4 Clock Hours	Qualified Supervisor Continuing Education Update Presenter: Dr. Denny Cecil-Van Den Henvel	ORCHID BALLROOM	
8:00AM-9:30AM 1.5 Clock Hour (Keynote)	Counseling in the Modern Era Presenter: Courney Robinson, MACP, LMHC	GRAND BALLROOM	
9:30AM-9:45AM	SNACK BREAK	GRAND FOYER	
9:45AM-11:45AM 2 Clock Hours	Involuntary Commitment to Substance Use Disorder Treatment Saves Lives  Presenter: Joseph Considine, Juris Doctor and Licensed Attorney in Florida	SALON A&B	AT
	The Other Eating Disorders: Pica, Avoidant Restrictive Food Intake Disorder, and Other Specified Feeding and Eating Disorders. What You Need To Know  Presenter: Joann Hendelman, PhD, RN, FAED, CEDS	SALON F	EB
	I AM MORE THAN ENOUGH: Lessons of Transformation from Adult Children of Alcoholics Presenter: Daniella Jackson, Ph.D., LMHC, Certified Health Coach	SALON G	EB
	Immigrant Survivors of Domestic Violence No Longer Protected By Asylum: Implications for Therapeutic Practice  Presenters: Elizabeth Ringler-Jayanthan, LMSW & Martha Vallejo, LCSW	SALONH	TR
12:00PM-1:30PM 1.5 Clock Hours	AWARDS LUNCHEON/ANNUAL MEMBERSHIP MEETING Legislative Update Presenter: FMHCA Lobbyist Corinne Mixon	GRAND BALLROOM	M
1:30PM-3:30PM 2 Clock Hours	Soul Tending: A Warrior's Grief Presenter: Louise Sutherland-Hoyt, LMHC, CCMHC, NCC,MAC	SALON A & B	EB
	The Neuro-biology of Domestic Violence Presenter: Matthew Fox, LMHC	ORCHID BALLROOM	RC
	Culturally Competent Care for the LGBT Community Presenters: Dona Leith LPC, CRTS, CDP & Paula Lupton, LCSW	SALON G	CD
	Trauma Model Therapy: Techniques, Strategies and Case Examples  Presenter: Colin A. Ross, MD	SALON H	TR
3:30PM -3:45PM	SNACK BREAK	GRAND FOYER	
3:45PM-6:45PM 3 Clock Hours	Ethical Considerations in Safety Planning and Legal Issues with Clientele  Presenters: Amanda Patterson, LMHC, NCC, CAP & Adam D. Rossen, Esq.	SALON A & B	RC
	Dealing with Opioid and Heroin Epidemic & Non-Medication Treating of Pain  Presenter: Jim Messina, Ph.D., CCMHC, NCC, DCMHS-T	SALON F	AT
	Using Story Therapy in Counseling Presenter: Nathaniel Webster, LMHC	SALON G	EB
	Trauma Part I.: Creating and Effective Trauma Institute. Presenters: Vanessa Snyder, Ph.D. and Anny Kenney, MA Part I.: Creating and Effective Trauma Institute. Presenter: Earl Hernandez, Post-MBA, EMDM, Dip. EM, Cert. EM, NREMTP, Part 2: Hurricane Maria 2017 - Dominica's Experience. Presenter: Biana Canant, BA CCEMTP, PNCCT. Part 3: Moving Forward, Putting the Past Where it Belongs. Presenter: Diana Canant, BA	SALONH	Ħ





# Pour Partner In Hope Specialized Behavioral Healthcare • Acute psychiatric services • The Meadows Women's Trauma Unit • H.O.P.E. Dedicated Female Military Program • Detoxification services • Residential treatment for female adolescents • Outpatient programs For language assistance, disability accommendations and the non-discrimination notice, visit our website. With limited exceptions, physicians are not



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# **Categories Include:**

Advocate of the Year Chapter of the Year

Mental Health Counselor of the Year
Professional Service and Leadership to a Local Chapter
Researcher of the Year

researcher of the real

Graduate Student of the Year

Volunteer of the Year

Outstanding Community Service

Leadership Award

Counselor Educator of the Year

TO SUBMIT NOMINATIONS VISIT:

WWW.FMHCA.ORG

CONFERENCE TAB>AWARD
NOMINATIONS



Between 3,000 and 4,000 bills are introduced each year of the Florida Legislative Session.

FMHCA PAC (Political Action Committee) contributions will help elect candidates that are 1) likely to support FMHCA's priorities (pro-mental health counseling/health policy) and that 2) have a chance to win their respective seat, regardless of political party affiliation.

The FMHCA PAC provides you with the opportunity to have an impact on the election of officials who will shape the future of your practice.

Contribute as much or as little as you like-Every penny counts!

# To donate: Visit FMHCA.ORG click PAC DONATE

https://fmhca.wildapricot.org/page-1075254

FMHCA members that are passionate about legislation & government relations may request to join the Government Relations Committee.

See reverse for more details on FMHCA Committees.

## **FMHCA PRESENTS**

# STUDENT POSTER BOARD SESSION

Happening During the Annual 2019 FMHCA Conference in Lake Mary (Orlando area), FL

The poster session is a great opportunity for students to share their research proposals as well as network with other professionals and students at the conference. Participation in this poster session looks great on a resume and in a professional portfolio!

Deadline to submit proposal is 11/30/18

Calling all Students! Submit a Student Poster Board Proposal Today! https://fmhca.wildapricot.org

https://fmhca.wildapricot.org/page-1075394/6123122



October is Domestic Violence Awareness Month!

https://nrcdv.org/dvam/DVAM history



# BRIDGESINTERNATIONAL

Restoring Families Through Trauma Sensitive Therapeutic Communities

Bridges International's mission is to provide individuals with chemical dependency, mental health disorders and/or criminality, an opportunity to experience freedom and healing through therapeutic communities while maintaining personnel safety and restoring the family unit.



Bridges International is proud to support the Florida Mental Health Counselors Association with their mission of advancing the profession of clinical mental health counseling through intentional and strength-based advocacy, networking, professional development, legislative efforts, public education, and the promotion of positive mental health in our communities.

#### Introduction

The beliefs that families pass down traditions and cultural information to younger members of the family unit is a known phenomenon in the world today. What is less known and not discussed frequently is the propensity for youth in certain cultures to inherit the traumatic experiences of their parents, grandparents, and communities before them. This paper will focus on African American youth from middle child-hood through the adolescence stage of development and the impact that intergenerational and historical trauma has on their growth through the life-span. In addition, a brief view on how the understanding of the treatment of trauma has evolved and the potential intervention strategies will be discussed.

# The Impact of Historical/Intergenerational Trauma (H/I Trauma)

To begin, it is important to understand the differences between intergenerational and historical trauma. Intergenerational trauma is described as the traumatic experiences that a single-family transfers to each new generation of that particular family – the parent's unresolved trauma is essentially transferred through the child through intentional and unintentional methods (Coyle, 2014). Historical trauma has a larger implication in which the history of oppression that targets a particular group of people has a lasting effect on the future generations of families and communities (Coyle, 2014).

While intergenerational and historical trauma can impact an individuals' development across the entire lifespan, the most important developmental periods of concern for this issue are from middle childhood through adolescence because individuals at the younger stages in life are in a critical developmental period (Stevens, 2018).

The impact of intergenerational trauma for African Americans occurs in communities that are predominantly poverty stricken and have a high rate of violent crimes. Approximately 9 million African Americans were living in poverty in the United States in 2016 (Semaega, Fontenot, & Kollar, 2017). In addition, the four top ranked, violent crime cities within the United States in 2016 were made up of populations of predominantly African Americans (Statista, 2017). The impact of historical trauma is much greater because the residual effect of historical trauma encompasses an entire community of historically oppressed people. Coincidentally, as of 2016, about 40

million African Americans are dealing with historical trauma stemming from slavery in the United States, Jim Crow laws, and the Civil Rights movement (United States Census Bureau, 2016; Stevens, 2018).

The typical course of intervention that is used when treating individuals who have experienced a significant level of trauma in impoverished communities is trauma focused cognitive-behavioral therapy (TF-CBT) (Woods-Jaeger, Kava, Akiba, Lucid, & Dorsey, 2017). The issues with traditional TF-CBT is that techniques within TF-CBT do not focus on the genetic or transferred trauma stemming from generations of familial and communal traumatization. To better understand the impact that a lack of focus on intergenerational and historical trauma has on African American youths, it is important to understand the potential physical and mental health issues that come with the experience of trauma. Trauma influences how the body responds to stressful events. The experience of a traumatic or stressful event increases the activity of the human survival mechanism known as the sympathetic nervous system (SNS) which, in addition, is linked to inflammation in the body (Nelson et al., 2017). Furthermore, inflammation has been linked to non-communicable diseases (NCD) (Hunter, 2012) such as: cardiovascular diseases (CVD), chronic obstructive pulmonary disease (COPD), type 2 diabetes, and obesity. Adults who have experienced trauma in their childhood have a 34 percent increased risk for obesity (Williamson, Thompson, Anda, Dietz, & Felitti, 2002; Karolinska Institutet, 2014). In addition, trauma experienced in childhood has shown to positively correlate with sleep problems in adulthood (Greenfield, Lee, Friedman, & Springer, 2011), gastrointestinal issues, recurring migraines (Goodwin, Hoven, Murison, & Hotopf, 2003; Anda, Tietjen, Schulman, Felitti, & Croft, 2010), and neuroendocrine dysregulation in individuals with fibromyalgia (Weissbecker, Floyd, Dedert, Salmon, & Sephton, 2006).

Overall, with the extensive list of potential health issues that individuals may develop due to facing trauma from middle childhood through adolescence, it is important to address trauma early. In treating a historically oppressed group like African Americans, the treatment of trauma must extend beyond individual experiences of emotional, physical, or sexual abuse. The residual effects of slavery (RES) are present in modern African American families which involve the development of survival techniques that ultimately

stifle natural responses to oppression, such as, anger and psychological pain. Instead, many African American families teach youth to adopt passive behaviors and teach forms of powerlessness to safely navigate society (Wilkins, Whiting, Watson, Russon, & Moncrief, 2013). Ultimately, while the oppression of slavery is no longer present, present time African Americans are faced with the oppression of systematic incarcerations, police brutality, and bigotry.

Each cluster of developmental stages experience differences in intergenerational and historical trauma issues related to physical, cognitive, and social development. In the infancy stage, children are highly dependent on adults. Additionally, fundamental aspects of social learning are developing (Santrock, 2015). The stress experienced at this stage is primarily secondary, stemming from the older members of the family that interact with the infant. Additionally, exposure to interparental violence (EIPV) during the transitional stage between infancy and early childhood positively correlates with intimate partner violence perpetration and victimization by early adulthood (Narayan, Labella, Englund, Carlson, & Egelan, 2017). There is also a significant correlation between trauma experienced by close family members and problems with emotional well-being through adolescence (Herzog, Fleming, Ferdik, & Durkin, 2016). This information identifies the prevalence of obtaining trauma related symptomatology through secondhand experiences. As mentioned earlier, African American families and communities have been passing on cultural survival techniques for generations with the hopes of easing the stress of living within an oppressive society. During times of slavery in the United States, African American families were known to be separated as a form of punishment or financial gain. As a result, parents became vigilant about warning and protecting their children to avoid separation. This development of anxiety about being separated from loved ones has manifested itself over generations. The occurrence of racist events within one year positively correlated with an increase in reported anxiety related symptoms in African Americans (Graham, West, Martinez, & Roemer, 2016). Since 2014, about 40 nationally reported, controversial killings of African Americans by police have occurred (Hobson, 2016; Perez-Pena, 2015; Hafner, 2018; Almukhtar et al., 2018), which increases the potential of the development of anxiety symptoms in African American youth who are within the middle childhood to adolescence stages of development. In

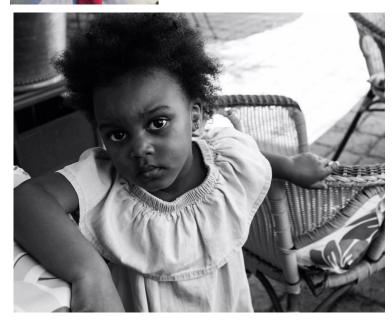
addition, the family and communal environments begin to teach vigilant protective factors resembling efforts from their enslaved ancestors. Ultimately, an intervention that not only addresses typical 'post' traumatic stress, but the historical and ongoing trauma that have not been directly experienced by the individuals yet impacts their overall wellness needs to be implemented.

The typical negative impact in the short term for African American youth are issues academically, issues with regulating emotions, as well as identity confusion as young African Americans are having trouble fitting in with the dominant culture while simultaneously dealing with historical and intergenerational trauma. On the community level, the lack of adequate treatment that addresses trauma specific to the African American community may result in an increase in the skepticism of social service providers in the long term. An additional long term impact is an increase in the mortality rate for African American youth due to violence and health related issues.

## **Click Here To Continue Reading**



Matthew A. Wallace
Author Agency/
University/FMHCA
Affiliation



# Hope Within Reach

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# **October is National Bulling Prevention**

**Month**, so to raise more awareness about bullying, counselors, professors, health care organizations, and researchers work together to foster understanding and to educate the population on actions to prevent and stop bullying. Bullying Prevention Month became a nation-wide campaign in 2006 when the Parent Advocacy Coalition Educational Rights (PACER), a program funded by the US Department of Education, initiated a movement to reach not only American society, but populations around the world.

Even though bullying has been traditionally viewed as a "normal passage of childhood/ adolescence," it is if fact a social problem, affecting someone psychologically and physically. In fact, studies have revealed that at least one in five students report suffering bullying at schools yearly in the United States, a typology that can vary from emotional abuse through name calling and/or making fun of someone to sporadic or continued physically attacks. Since adolescents are the most impacted group, organizations should intensify the promotion of dialogues about bullying related-issues not only in schools but in communities as well, pushing for increased actions at local levels for bullying prevention.

Every year in October counselors have the opportunity to promote the need for adequate support for those are and/or were bullied, and to emphasize a sense of community for effective prevention of bullying.

Counselors can especially help in spreading information about bullying and available services at schools and/or communities, and in encouraging victims and their families to get involved in this national campaign against bullying. Counselors play an important role in education others the need of bullying prevention and intervention and how to report bullying cases not only into schools to help in prevent and stop bullying. As counselors, we need to be active in creating safe and supportive schools and communities.





Paula Lazarim Mental Health Counseling Graduate Student

The NBCC needs your support to increase the substance use disorder workforce. Congress is in the process of developing opioid legislation and H.R. 5102/S. 2524, The Substance Use Workforce Loan Repayment Act of 2018, is under consideration. H.R. 5102/S. 2524 provides student loan repayment to counselors and other behavioral health professionals. H.R. 5102 passed the House on June 12 and now we must work to gain support for the legislation in the Senate https://www.votervoice.net/ NBCCGrassroo.../Campaigns/.../ Respond

## FMHCA Seeks License Portability, Hopes to Bolster National Medicare Efforts



The Florida Mental Health Counselors Association Government Relations Committee is busy preparing for the next legislative session. The 2019 Florida Legislative Session, a 60-day joint meeting of the Florida House of Representatives and Florida Senate, begins March 6th.

During this time, the Legislature will determine which changes should be made to Florida Statutes. As with all years, many of the changes made during the 2019 Session could affect the LMHC profession and the patients you treat.

Our lobbying team at Rutledge Ecenia, P.A. and the members of the FMHCA Government Relations Committee are excited to share our recent

progress in preparation for the 2019 Session. We have been collaborating on a bill draft that will make strides toward allowing for national licensure portability and streamlining national standards. If FMHCA and its collaborating partners are successful in securing a bill sponsor and passing the legislation, we feel that these changes will increase AMHCA's ability to advocate for Medicaid reimbursement and bring forth other positive changes.

The bill draft has been created among several groups and now includes the input of the following: legal counsel of the Office of the Attorney General Pam Bondi, staff from the Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling, American Mental Health Counselors Association, National Board of Certified Counselors, National Association of Social Workers (Florida Chapter), and Florida Association of Marriage and Family Therapy.

The goal of the group was to create more streamlined standards for the Board to review when licensing the above professions. One change that we are brining forward requires that new licensees, graduating after July 2025, will need to have graduated from a CACREP accredited program. Any current licensees (and anyone graduating before July 2025) would be grandfathered into licensure. The bill will also make it far easier for out of state licensees to become provisionally licensed in Florida and for Florida licensees to be provisionally licensed in other states. All of these changes come with additional conditions. One example is that out of state licensees will need to take Florida's 8-hour laws and rules course.

The language is still in formation. Given the number of stakeholders involved, FMHCA will continue to garner plenty of feedback. Please contact the FMHCA office with questions.

Corinne Mixon FMHCA Lobbyist, Rutledge Ecenia, P.A.

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# LMHC Exam Preparation 26 Oct 2018

# 2:00 PM - 4:00 PM CE Broker Tracking :# 20-601745.



Exam preparation for the LMHC exam (National Clinical Mental Health Counseling Examination, or NCMHCE) that includes guidance on the areas addressed in the exam such as information gathering, theories, and diagnosis.

Great training for counseling students, registered interns, counselor educators, and qualified supervisors!

#### **Learning Objectives:**

- Develop confidence in preparation for the exam.
- Demonstrate knowledge and application of exam material.
- Build skills in responding to items on exam areas.
- About the Presenter:



#### **About the Presenter:**

Scott Jones currently works in private practice in Orlando and supervises interns with special attention to LMHC exam preparation. He serves on the Internship Committee of the Florida Mental Health Counselors Association and has a heart for interns.





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# Professional Services (for professional men and women)

**Research Presentations** 

Based on Dr. Daniella Jackson's qualitative multiple-case study

# Supervision for Florida Mental Health Counselor Interns

Dr. Daniella Jackson utilizes a strength-based model for intern supervision

## **Professional Meetings**

Every other Month

## Mental Health Counseling Services (for adult men and women)

Dual disorders, addictions (i.e., alcohol, illicit substances, food, technology), addiction related problems, impact of addictions on self, ACOAs, adult children of addicts, early and long-term recovery problems, codependency, and more

Individual Therapy Group Therapy Family Therapy

## Health Coaching Services (for adult men and women)

For professional women, university students, graduate students, doctoral students (before and during the dissertation phase), parents, grandparents, women before, during and after pregnancy, women over 40, and more

# **Individualized Wellness Sessions**

#### Wellness Classes

JAWS Pregnancy Class – face-to-face class

JAWS Family Class (for men and women) – face-to-face and online classes JAWS Longevity Class (for women over 40) – face-to-face and online classes

Daniella Jackson, Ph.D., LMHC

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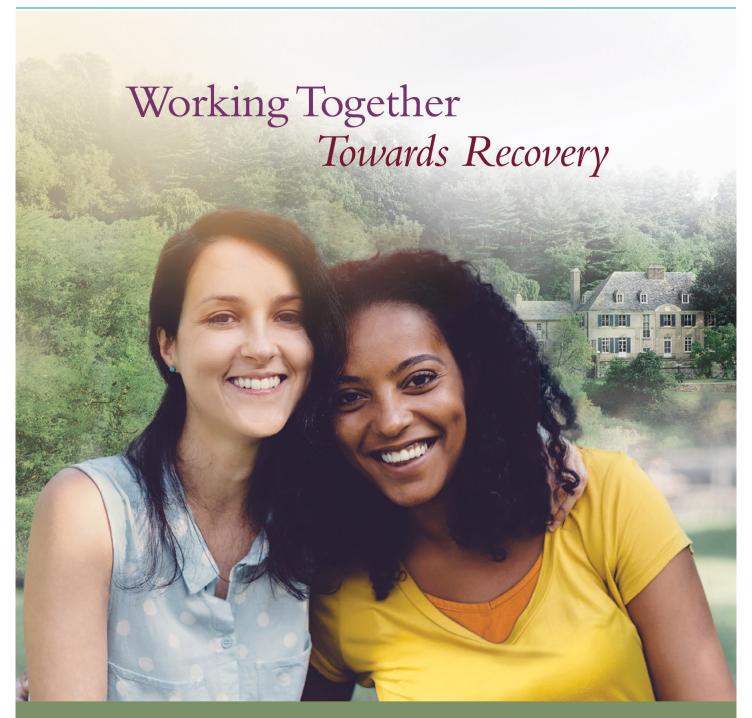
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For over three decades, more than 75,000 adolescent girls and women from all walks of life have chosen The Renfrew Center to help them overcome their eating disorder. Through Renfrew's community, women learn to embrace hope, perseverance, strength, and gratitude to live the life they deserve.

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# Mental Health Providers & Substance Abuse Specialist

# GREAT OPPORTUNITY TO JOIN THE LARGEST MENTAL HEALTH & SUBSTANCE ABUSE NETWORK FOR LAW ENFORCEMENT OFFICERS

The BlueLine Support™ model is a volunteer peer support officer based program. The program utilizes a network of trained police oriented Mental Health Professionals and operates within a geographic region to serve all officers in that area regardless of status (wounded/active/retired), rank, or agency. BlueLine Support™ provides:

- Intervention
- Prevention
- Resiliency
- Self-care Services,

in a safe and confidential setting.

Mental Health Providers & Substance Abuse Specialists utilized in the BlueLine Support Network are carefully selected to include only those who have demonstrated an understanding in:

- Police culture
- Agency dynamics
- Officer Experiences

Most often this is achieved by the Providers and Specialist having dealt previously with law enforcement officers (LEO) in their private practices, having LEO family members, or having been an LEO themselves. Each selected Provider and Specialist is also trained by BlueLine Support™.

#### **Provider Benefits:**

- Access to a potential client base of well over 800,000 members.
- Access to BlueLine Support sponsored mental health and substance abuse studies.
- Invitation to participate in nationwide law enforcement studies.
- Seminar and Training Opportunities
- Access to future BlueLine Support Emersion Centers.
- Opportunity to grow your practice.

#### **BlueLine Support Regional Programs:**

Politics and culture of law enforcement differ throughout out the United States. BlueLine support is most effective when mental health professionals and peer support officers share wounded officers' regional challenges as well as their perspectives as law enforcement officers.

The first regional program of BlueLine Support is being established in Central Florida. This regional program will be serve 5 counties containing 65 agencies with an estimated client base of over 14,000 active and retired officers. This region will serve as the model for establishing other regional programs throughout the United States.

#### **How to Become a Network Member**

Please contact David San Filippo, Ph.D., LMHC, Clinical Director, BlueLine Support for an application to join our BLS-MHP Network **or** scan the code below.

David.SanFilippo@woundedofficersinitiative.org



Learn More About the Wounded Officers Initiative at





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#### **EVENT PROMOTION**

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Designated HR Representative Information: Doug Murphy 203-415-2751 dmurphy2@paychex.com



opportunities available throughout Florida.



or information on opportunities located in thern & Central FL, contact Shanda Bourne







The Florida Mental Health Counselors Association is the leading organization advocating for Mental Health Counseling Professionals. Our objective is to provide education, legislative oversight, and networking.

# **Get Involved**

Become a Member Join a committee! Committees include:

Ethics Committee Membership Committee Registered Intern and Graduate Student Committee Chapter Relations Committee Finance Committee Nominations & Elections Committee Government Relations Committee Conference Planning Committee Education, Training Standards & Continuing **Education Committee** Military Service Committee Research Committee Bylaws Committee

# Let your Voice be Heard!

Get Involved and Make a Difference www.FMHCA.org

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# We Need Your Help!!!!

Benefits for using a Lobbyist- but we cannot do this alone and need your attention

Florida Mental Health Counselors Association benefits from using a lobbyist to get our voice heard in government. Your voice is important to us! Our membership fee's help to support our legislative presents and contribute in making a difference for our members and the client's we serve. Did you know that lobbyists can take your message to Congress? Lobbyists enable organizations to draft legislation, develop strategies for new regulations, connect and stay informed, and proactively reach out to elected officials prior to new policies being drafted. Florida Mental Health Counselors Association is asking that you take a look at the direction of our healthcare and industry, wont you help us make a difference?

Re-new your membership today Ask a colleague to join FMHCA <u>www.FLMHCA.org</u>



**EDUCATION AND ADVOCACY FOR DID** 

#### WHAT WE DO

- Supportive low/no cost therapies such as yoga, equine, and art.
- Outreach and education on the truth of DID to dispel myths and increase acceptance.
- Therapist training to improve the quality of care for survivors with dissociation and DID.
- Online resource clearinghouse.



An Infinite Mind also offers our annual conference called Healing Together for survivors with dissociation and DID, their loved ones, and mental health professionals to come together in healing.

The Healing Together conference will be held in beautiful Orlando, FL February 9–11, 2018. CEUs are offered.

For more information, please visit www.AnInfiniteMind.com

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# **Unparalleled Care. Dedicated Staff.**

PALM BEACH
ach provides specialized addiction

Located in beautiful South Florida, Retreat at Palm Beach provides specialized addiction treatment planning at its new state-of-the-art facility in Palm Springs. The campus offers high end amenities with comfort and safety in mind while providing a full continuum of care by a caring and credentialed staff.









4020 Lake Worth Rd, Palm Springs, FL 33461 www.RetreatPB.com | 855.859.8810



post-session score	s for each of the symp	otoms		
			= Pre-Se	ession
4.5			= Post-S	ession
4 -				
5	🛛			
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Streets Realing Thoughts	<b>V</b>	BON Muscle Tersion He		
40		4		-

SYMPTOM	DECREASE
Stress	57%
<b>Racing Thoughts</b>	53%
Angry	48%
Depressed	47%
Fearful	47%
<b>Body Aches</b>	54%
Muscle Tension	56%
Headache	44%
Cravings	46%
Impulsive	52%

#### **General Criteria**

- · 800+ client sessions
- Min. of 5 sessions per client
- · Min. 30 minutes each session

Complete article, study and statistical data available upon request.

Data collected electronically, study correlated and compiled by William B. Secor PhD Researcher and Richard D. Froilán-Dávila PhD



Innovative Therapeutic Solutions

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Phone: 888-495-1946

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# SELF-AWARENESS

KNOWING WHAT YOU NEED AND
WHEN TO MAKE APPROPRIATE CHANGES



CONTACT US! 561-228-1871

www.bluelogicitsolutions.com

IMPLEMENTING ESSENTIAL CHANGES WILL IMPROVE HOW YOUR BUSINESS FUNCTIONS



# MANAGED IT SERVICES

Growth-oriented companies need a well-organized IT infrastructure so that they can focus on the business instead of trying to solve IT failures, whether they are a micro or small business. However, most owners don't know how to troubleshoot & manage networks, applications, systems, hardware or know what changes to implement.

Fortunately, we provide a solution to meet your needs, by managing your IT infrastructure which allows you to do more of what you enjoy.

## CLOUD SERVICES

Would you need to buy and maintain additional equipment if you used the cloud's scalable capacity to either increase or decrease usage of servers, storage, analytics, and more, at lightning speed?

Avoid the hefty hardware purchases in favor of monthly subscriptions. Pay for exactly the capacity you need and Blue Logic IT Solutions will manage and secure your information.

# ARE YOU HIPAA COMPLIANT?

Understanding what compliance really means is ensuring that all required physical, network, and process security measures are in place and followed with protected health information.

We treat IT security like you treat a client:

- Gather information about current situation
- Conduct an introductory session to further investigate needs and requirements
- Propose a unique treatment plan that is suitable to your current business needs, with optional risks assessments.



# Thank You to our Amazing Sponsors!

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FMHCA's website gets hundreds of hits a day from members, nonmembers, and prospective members. Becoming a sponsor with FMHCA lets other professionals know that you're out there - it's a terrific way to network and grow as a professional.

There are two ways to becoming a sponsor - you can purchase a flashing banner across the top of our pages or one of the sponsor blocks at the bottom of our website pages. Best of all, you get a full year of sponsorship for one low price!

Artwork must be submitted in one of the following formats: png, jpg, tif, tiff, or psd. After you have completed payment, submit your artwork to us at

office@flmhca.org

















A mind for truth. A heart for God.®









Joining a committee is a great way to participate in our organization and increase your presence in our community.

# To see details on each committee's role in FMHCA:

# Visit the FMHCA WEBSITE at FMHCA.ORG HOVER over "HOME" Click COMMITTEES

https://fmhca.wildapricot.org/Committees

# To join a committee:

Send an e-mail request to join to the committee chairperson E-mail addresses for all committee chairpersons are listed on the committee webpage.

**Ethics Committee** 

Membership Committee

Registered Intern & Graduate Student Committee

Chapter Relations Committee

Finance Committee

Nominations & Elections Committee

Government Relations Committee

Conference Planning Committee

Military Service Committee

Research Committee

Bylaws Committee



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• THE MISSION OF THE FLORIDA MENTAL HEALTH COUNSELORS ASSOCIATION •

# IS TO ADVANCE THE PROFESSION OF CLINICAL MENTAL HEALTH COUNSELING THROUGH INTENTIONAL AND STRENGTH-BASED

ADVOCACY, NETWORKING,
PROFESSIONAL DEVELOPMENT,
LEGISLATIVE EFFORTS, PUBLIC
EDUCATION

AND THE PROMOTION OF POSITIVE MENTAL HEALTH FOR OUR COMMUNITIES.