

**LETTER FROM THE PRESIDENT**

Hello to members of IMHCA. May was a busy month with our Annual Conference May 12<sup>th</sup> and 13<sup>th</sup> 2011. Gerard Jacobs, Ph.D. From the University of South Dakota, Institute for Disaster Mental Health was the keynote speaker and spoke about Counseling Through Crisis. Thanks to all of the presenters and Conference Committee planners for making this year's Annual Conference a success! Please look further in the newsletter for pictures from the conference.

Congratulations are in order to Erik Oostenink IMHCA Past-President (2007-2009) for being elected as the Midwest Regional Director for the American Mental Health Association (AMHCA). As I'm sure he will be busy in this new role, he will continue to serve IMHCA with legislative updates.

Let's give a warm welcome to Sammie Nobles IMHCA Membership Committee Chair and also to Kacey Peterson IMHCA Government Relations

Chair. They are recently appointed and needed to help complete our Board. We still have open positions available and they will be posted on the website for further inquiry. Please don't hesitate to inquire about these positions as we want more members involved on the Board!

*Kelly Wagner,  
MS, LMHC, RPT  
IMHCA  
President*

**SPRING 2011**



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## LEGISLATIVE UPDATE

In spite of the current turmoil with the legislative session in Iowa, it was a successful session for IMHCA. With strong support from Renee Schulte, a Republican Representative who has worked as a Mental Health Counselor, IMHCA was able to accomplish several legislative goals. Emily Piper, our lobbyist, worked on behalf of IMHCA toward goals of achieving Medicaid recognition of LMHC's in Iowa's Administrative Code, Recognition of LMHC's by all private insurance companies (Provider Parity), and ensuring greater confidentiality in criminal cases for victims.

Two of three goals were achieved. LMHC's achieved recognition from Iowa under Medicaid. Although LMHC's have historically been covered by Magellan, services provided under billing through Iowa Medicaid Enterprises such as waiver services for children were not covered. This bill also ensures that should the Managed Care provider change from Magellan in the future, LMHC's are guaranteed cover-

age. This also gives LMHC's in Iowa a key talking point with our Federal legislators in asking for recognition under Medicare. It is expected that the Medicaid rules will be written and adopted by the end of the calendar year. Other sponsors of the Medicaid Bill included Representative Mark Smith and Senators Amanda Ragan and Mary Jo Wilhelm. Please contact these legislators and thank them.

IMHCA was able to work with a coalition of other interested groups in revising language in the Iowa Code to impact an Iowa Supreme Court ruling known as the Cashen decision. The revised language prevents defense attorneys from going on "fishing expeditions" of victims mental health records by requiring a judge to review information to determine if it is relevant to the case and the court will balance the need to disclose information against the privacy interest of the person with mental health records.

A couple of other pieces of legislation that were

signed: Senate File 259 required a presentence investigation to include substance abuse and mental health history. It allows use of those records only if the prisoner agrees. Senate File 327 suspends adjudication of a juvenile while committed for mental health reasons until the child is released.

As many are aware of, mental health reform and system redesign was a major discussion during the legislative session. With a seeming lack of willingness for compromise between the House and the Senate on a number of issues including mental health redesign, there was general agreement to set up subcommittees and stakeholder groups to examine the issue. It is expected this will be a major focal point next year.

For IMHCA to continue to be a player on legislative issues, lobbying will be our primary means of bringing our issues to the legislators. Representative Smith has talked about a goal for next year of rewriting the definition of mental health prof-



essional. There has also been discussion that will continue into next year regarding whether or not LMHC's can be part of re-evaluating mental health committals under Chapter 229. Another issue to be determined is who will be involved in evaluating and approving 24-hour holds for mental health committals. These are just several of the issues to be addressed next year. Please continue to support this effort through encouraging other LMHC's to join IMHCA. It is an expensive endeavor but well worth the results and certainly doing nothing, can lead to LMHC's being left out, as this occurred several years ago when LMFT's and LMSW's received Medicaid recognition.

*Erik Oosternink  
Midwest Regional Director for the American Mental Health Association (AMHCA)*

## ***Coming Full Circle: One Student's Search for a Theoretical Orientation***

In one of the classes at the beginning of my program, I learned that the specific theory and techniques a counselor uses accounts for a surprisingly small percentage of client change. This left me with mixed feelings. On one hand, I was frustrated because it would be far easier to be told what works and learn how to do it. On the other hand, I felt liberated because of the myriad of possibilities and for the flexibility of using what worked out for me and for my clients. I had just taken Counseling Theory the previous semester, and although I had enjoyed it, I left with little idea what my theoretical orientation was. I assured myself I still had plenty of time to figure it out and turned my attention to more concrete and immediate challenges.

Last fall when my internship began, I somehow found myself genuinely astonished to realize that nowhere in my education to date had I learned specifically, step-by-step, how to work with a client who was depressed. Or who had anxiety. Or who... well, you get the idea. Sure, I had read the DSM-IV-TR cover to cover, learned about the counseling process,

various techniques and interventions, and so on. All of these things had been very helpful, but still left some important details missing. In my practicum experience the year prior, I generally tried whatever came to mind and followed anything that seemed to work. After all, specific theory and techniques are not what account for the majority of client change, right? A couple weeks into my internship, that approach no longer seemed appropriate, but I wasn't sure what the alternative was. Soon I realized that it depended on how I saw the client, the client's concern, my role in the helping process, etc. – my theoretical orientation.

Unfortunately, I was not much closer to figuring it out than I had been at the end of my first semester Theory class. In all honesty, I assumed I'd be eclectic because there were parts of many theories that I liked, other parts I disliked, and because I usually resist being boxed into one way of doing anything. However, I felt like I needed a theoretical orientation, like, *yesterday*, because

I was actively working with clients! The resources and supervision at my internship site tended to be primarily cognitive-behavioral. I felt most influenced by Person-Centered (though I was too directive to be truly Rogerian) and Existential (ideas I thought were important but wasn't sure how to "do" in therapy). As a temporary compromise, I ended up with a humanistic-CBT hybrid while I continued to explore.

What I desperately wanted was a resource that would show me how a counselor would work with specific concerns/diagnoses from multiple theoretical approaches, complete with demonstration videos. With this resource, I would simply find the approach that looked and felt most like me and learn it. Unfortunately (or fortunately, as the case may be) I was not able to find such a resource. Instead, I began learning about Acceptance and Commitment Therapy (ACT), an approach I had once heard about, though I can't recall exactly when or where. As it turns out, ACT appealed to me immedi-

ately, kind of like the way a great pair of jeans *just fits*. Needless to say I've spent quite a bit of time reading and learning ACT and trying to incorporate it into my work with clients. Is it my theory? Maybe. Quite possibly, if I had to choose just one, though thankfully I don't. What I can say for sure is that ACT has definitely influenced my work as a counselor and I expect that to continue.

Then recently, as I was putting together a class presentation on ACT, I ran across a journal article that made me smile, in that sort-of ironic, knowing way that happens only after you've gained some perspective on a challenge. In the opening paragraph, the author mentioned that ACT is hard to classify, and as a result, has sometimes been called an "existential humanistic cognitive behavioral therapy." In a way, it seems I may have come full circle. If that is the case, though, it is only after struggling through and coming out the other side with more knowledge, confidence, and direction. Like so many things, it was the process, not the end point, which made the difference.

*Jessica DeBoom,  
UNI 2011*

## 2011 ANNUAL IMHCA CONFERENCE WRAP-UP

The Iowa Mental Health Counselor's Association (IMHCA) hosted its annual conference on May 12—13, 2011 at the Holiday Inn on Merle Hay Road in Des Moines.

Conference organizers received positive feedback from attendees, both verbally and through completed surveys. "We had some great speakers this year including Dr. Gerard Jacobs from the University of South Dakota on Disaster Mental Health," reported Christy Johnston, Conference Chair. Other presentations included Animal Assisted Therapy, Trauma Focused Care,

Dream Interpretation, Working with Refugees, Legislation issues and Spirituality in Counseling.

"We received positive feedback on each of these breakout sessions as well," said Johnston.

During the annual meeting, held during the conference, board members announced that the board is working on re-vamping the member recruitment process and improving the member dues renewal process.

"Our goal is to also have the option to pay for the conference online next year," said IMHCA President Kelly Wagner. "This will also streamline registration, producing an automatic confirmation."

Board members have established a goal of increased conference attendance in 2012.

The 2012 annual conferences has been tentatively scheduled for April 12—13. According to Johnston, student availability to attend the conference will be a deciding factor in finalizing the date.

Topics of interest for 2012 include an ethics workshop, and a session on private practice. Conference organizers continue to ask for feedback on speakers, including the main speaker. Feedback can be sent to the IMCHA board at

boardmembers@imhca.net.

"Thank you to all the people who helped make this a great conference," said Johnston.



### **2<sup>nd</sup> Annual IMHCA Golf Outing Friday August 26, 2011 Rolling Hills Golf Course (615 Hwy 28, Norwalk, 515-981-1500)**

Come join us and invite your significant other, family and friends and help us make this event a big success. Bring your own foursome or register as an individual, couple or threesome and we will fill out your group. Golfers of ALL skill levels are welcome to come and have fun.

Check-in at 8:30 am, Tee at 9 am. Cost is \$40 per person which includes golf, cart, and lunch. Lunch is available to non-golfers for \$12/ person. For more information or questions please contact Isabel Lewis at 641-751-8644 or Jim Wilwerding at 515-771-1847.



Conference attendees enjoyed a keynote presentation by Dr. Gerald Jacobs, as well as breakout sessions on Animal Assisted Therapy by Board member Cindy Boyle and Linda Nebbe, PhD.

**Save the date:**  
IMHCA Annual Conference  
Late April 2012



# Iowa Mental Health Counselors Association

A Chapter of the American Mental Health  
Counselors Association  
[www.imhca.net](http://www.imhca.net)

**Board of Directors, 2010—2011**  
[boardmembers@imhca.net](mailto:boardmembers@imhca.net)

Kelly Wagner, President  
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Kristin O'Conner-Sherrets, PR/  
Website  
Christy Johnston, Conference  
Jessica DeBoom, Student Rep.

## MARK YOUR CALENDAR

### AMHCA

#### Annual Conference

“Power of Partnerships,  
Effective Pathways to  
Mental Health”

July 14—16  
San Francisco

### IMHCA

#### Board Meeting

Saturday, September 10  
9 a.m.

#### Waterloo SKYPE

**location:** 722 Water  
Street, #407

#### 2<sup>nd</sup> Annual IMHCA Golf Outing

Friday August 26, 2011  
Rolling Hills Golf Course  
(615 Hwy 28, Norwalk,  
515-981-1500)

#### Des Moines SKYPE

**location:** DMACC  
Urban Campus, Bldg. 1  
Room 107

