



Counselors Rock!

LPC CONNECTION

Official Publication of the Licensed Professional Counselors Association of Georgia

Advocacy in Action! LPC Day at the Georgia Capitol



Yes, We Filled Those Stairs!

CONTENTS...

Executive Director Report
Gale Macke..... pages 2–3

Presidents' Reports
Tonja Simmons Lee, Keisha Buchanan, and Tracey Pacepages 3–7

LPCA District Reports
Joanna Kester, Loriann Merritt, Dottie Chambers, Jeannie Powell, Olga Maxwell, Jihene Ayadi, and Patricia Whalen..... pages 8–13

PC Compact Report
Greg Sears page 13

Ethical Decision-Making in Public Service
Johnnie Jenkins III..... page 14

The Therapeutic Pause and Choosing Curiosity
David Markwell page 15

National Counselor's Exam Prep Workshop
Johnnie Jenkins III..... page 14

Ethical and Legal Concerns when Counseling Minors
Tracey Pace page 16

HB 219 Passed the GA Senate!
Julianna McConnell page 16

LPC Appreciation Day Proclamation..... page 17

Conducting Therapy with Military Members
Clairice Brown-Allen page 18

Attunement: The Quiet Skill that Changes Everything
Angela Montondo page 19

My Journey and Purpose as a Black Woman in Counseling Education and Supervision
Melissa Seldon page 20

Black Women in History: Dr. Anna Julia Cooper..... page 20

Cultural Community as Clinical Intervention
Tiffeny Davis page 21

Your Body is Your Unconscious Mind
Pamela Chubbuck page 22

Middle School Mental Health Small Group Program
Tamika Hibbert..... pages 23–24

ABA 101 for Mental Health Professionals
Tiffany Minter page 24

Before the Words: Supporting Early Emotional Access
Veronica Motley page 25

Navigate and Manage Your Therapeutic Superpower
Ya'Ron Brown page 26

Stigma to Strength: Why Mental Health Matters to Us All
Ugochi Ebereonwu page 27

From Advocacy to Public Service: New Chapter of Leadership
Keisha Buchanan page 27

EXECUTIVE DIRECTOR

Gale Macke LPCA@LPCAGA.org



LPCA of GA Opens New Office in Roswell!

After ten years at our Norcross location, LPCA of GA moved in March to our new office in Roswell. It boasts of larger square footage for meetings and workshops, as well as better affordability and accessibility. It is conveniently next door to the Roswell City Police Dept allowing us to hold more evening and weekend workshops, such as the one we just held on March 20th, in a safer, more secure environment.



1080 Holcomb Bridge Road, Roswell, Georgia 30076

LPCA of GA office is in the building shown on the right on the third floor

LPCA of GA March 20th Board Meeting

This first in-person board meeting since Covid was attended by LPCA Board members who traveled from Columbus, St. Mary's, Savannah, and far north Georgia. We reported that LPCA's Professional Development Chair, Dr. Kelly Veal had worked to create a policy on "research study" requests. Although LPCA had a policy for those who are in the doctoral degree program to survey our members, there was not a policy in place for non degree candidates. The new policy will be posted on our website within thirty days. We also shared that Georgia is the first and only state in the US to have a Bachelors of Mental Health Counselors Degree creating a track for an entry level college student to begin studies for the counseling profession. Additionally, we had an LPCA PAC policy review regarding supporting specific candidates and legislation which is made possible because LPCA of GA currently has the IRS designation of 501c6.



LPCA President Tracey Pace Conducts the March 20th Board Meeting



Licensed Professional Counselors
 Association of Georgia
 Phone: 770-449-4547
 Fax: 404-370-0006
 Email: lpca@lpcaga.org
 Website: <http://www.lpcaga.org>

LPC Connection is published four times a year.
 Submission deadlines are March 1st, June 1st,
 September 1st, and December 1st.

To submit an article, go to www.lpcaga.org, click on
 Publications tab, then scroll down to Newsletter.

To submit an ad, scroll down to Advertising.

Dory Adams Editor: dadams0454@aol.com

LPCA of GA March 20th Evening Workshop

Roll Play: Enhancing Skills Through Experiential Practice

This is one of our most popular workshops where the LPCs are the clients and our students, recent grads, and APCs are the counselors. Practice therapies included depression and anxiety. This workshop offered 1.5 CEs and proved to be as fun as informative. We will offer this workshop again in the near future. Go to www.lpcaga.org and click on *Calendar* to search for upcoming workshops and events.



L-R Front: Theresa Holt, Terri Konn, Doona Carter, Nicki Covey, Yashvi Hartland
Middle: April Adams, Jennifer Johnson, Angela Grant, Boris Day, Sharon Nix
Back: Jennifer Walcott, Marian Kalvert, Joshua Lee, Quiana Harps, Shelly Northrup, Patricia Jean-Francois



L-R: David Markwell, Nikki Harris, Marcus Prevett, Rachel Carlson, Theresa Holt, Terri Konn, Donna Carter, Nicki Covey, and April Adams

LPCA of GA Roundtables

Virtual meetings to ask questions, discuss issues, and share ideas

Join us for in-depth discussions!

Future Counselors Roundtable

Hosted on the 3rd Thursday of each month
12:00 Noon to 1:00 PM

Supervisors Roundtable

Hosted on the 2nd Friday of each month
12:00 Noon to 1:00 PM

Rural MH Providers Roundtable

Hosted on the 1st Wednesday of each month
12:00 Noon to 1:00 PM

LPCs Roundtable

Hosted on the 3rd Friday of each month
12:00 Noon to 1:00 PM

PRESIDENT-ELECT

Tonja Simmons Lee, PhD, LPC, NCC, CPCS

LPCA Annual Convention and Regional Conference

May 12th–15th

Virtual Kick-off May 10th

Crowne Plaza Atlanta Perimeter at Ravinia

Earn CE Hours

Licensed professionals (APC, LPC, LMSW, LCSW, AMFT, LMFT) can earn valuable Continuing Education (CE) hours to help meet licensure renewal requirements.

Build Your Professional Network

This is a valuable opportunity especially for early-career professionals! Connect with experienced counselors, supervisors, and leaders in the field.

Strengthen Your Professional Identity

- Meet counseling organizations, learn about advocacy efforts, and engage with a community committed to advancing the profession.
- Take engaging, practical courses.
- Choose from interesting, relevant sessions designed to give you real-world tools you can immediately apply in your practice.

May 10th: Virtual Kick-off and Poster Sessions

Engage with innovative research and emerging professionals from the convenience of your home or office.

May 12th: Pre-Convention

Participate in in-depth learning experiences focused on specialized topics.

May 13th–15th: General Convention

Attend the full conference experience featuring keynote speakers, breakout sessions, networking opportunities, and community-building events.

Early Bird Pricing Available through April 15th

For more information or to register, scan QR code above, click on *Events and Training* tab, scroll down to *Convention*.



Crowne Plaza Atlanta Perimeter at Ravinia
4355 Ashford Dunwoody Road, Atlanta, GA 30346



PRESIDENT
Tracey Pace, ThD, LPC, CPCS, CFMHE

LPCA Advocates for LPCs at Legislative Events

January 7, 2026
Governor’s Floor Leaders Reception

The reception for the Governor’s Floor Leaders at Mary Macs Tearoom was a great opportunity to meet with legislative leaders. Usually, they are waiting to hear what legislation LPCA is pursuing but this year we don’t have anything that directly affects Licensed Professional Counselors. There are mental health related bills that are of interest to professional counselors but the LPCA’s mission statement clearly defines our purpose is to advocate for the profession, not for individual approaches, therapies or ideologies. It was nice to be able to answer, “What legislation do you have this year?” with none! When LPCA has pending legislation, our membership is very good at making their voices heard, politely of course. Nice, because legislators get to see that the LPCA Board is active even when we aren’t asking for something.

Capitol City Club Legislative Reception

That evening, I was able to represent LPCA of GA at another legislative reception at the Capitol City Club where I was repeatedly asked about “pending legislation.” With no legislation to discuss, I was able to express LPCA’s frustration over the delay in bringing Georgia onboard with the PC Compact as well as ongoing problems with the new GOALS online platform. Both issues are under the control of the Secretary of State.

During this event, I had the opportunity to speak with Georgia Senator Brian Strickland, a McDonough attorney who is running for Georgia Attorney General in 2026. I was interested in hearing his thoughts about treatment for mental health patients involved in the legal system. The Georgia Senate voted unanimously in late February to include \$409 million in the state budget to fund a 300 bed forensic mental health facility.



Tracey Pace and GA Senator Brian Strickland



Governor’s Floor Leaders Reception
 Georgia Governor Brian Kemp with LPCA President Tracey Pace



Governor’s Floor Leaders Reception
 GA House Rep. Soo Hong (House floor leader), Tracey Pace, GA Governor Brian Kemp, First Lady Marty Kemp

January 14, 2026

Georgia Chamber of Commerce Eggs and Issues

Early in the morning, I attended the Georgia Chamber of Commerce Eggs and Issues event at Mercedes-Benz Stadium.



Eggs and Issues Squeezie



Rep. Tim Fleming

Prior and immediately following the event, I was able to network with sitting legislators and candidates for state office. I had the opportunity to speak with GA House Rep. Tim Fleming, Georgia primary candidate for Secretary of State, about our ongoing challenges with processing applications for licensure via GOALS and the currently stalled registration for participation in the PC Compact. Representative Fleming was well aware of the problem and expressed frustration at the slow progress, something he promised to address should he be elected to office as GA Secretary of State.

I also had the opportunity to discuss ongoing traffic concerns in South Georgia with GA House Rep. Bill Hitchens of Effingham County. The growth of new industry and the Georgia Port Authority make it very difficult for residents of rural communities outside of Savannah to access psychiatric care and psychological evaluations due to hours-long commutes. Many rural counties do not have a psychiatrist or psychologist and must rely on a day long trip to the "big" cities.

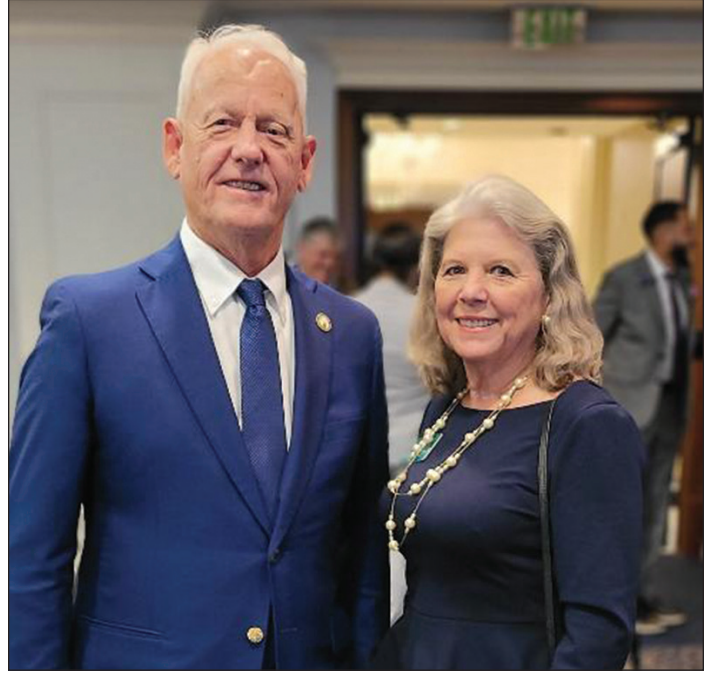


Georgia Chamber of Commerce Eggs and Issues
GA House Rep. Bill Hitchens and Tracey Pace

Commerce Club Legislative Reception

Later that evening, LPCA co-hosted a reception at the Commerce Club in Atlanta welcoming return legislators as the Georgia House and Senate convene for the 2026 Legislative Session. LPCA has co-hosted this event for a number of years along with several trade and building associations. We are occasionally asked by legislators how we got in with this group as it isn't medical. Well, they invited us to join and we said yes.

The Commerce Club Legislative Reception was well attended by legislators including Speaker of House, Jon Burns, and President Pro Tempore of the Senate, Larry Walker. This event tends to have a festive atmosphere and allows LPCA Board Members to interact with legislators and other stakeholders in a relaxed non-political manner.



Commerce Club Legislative Reception
GA House Representative Gary Richardson and Tracey Pace



Commerce Club Legislative Reception
Former LPCA Atlanta District Rep. Joanna Kester, GA House Speaker Jon Burns, and LPCA Supervision Chair Tracy Kissinger

IMMEDIATE PAST PRESIDENT

Keisha Buchanan, EdD, LPC, CPCS, CCTP

LPC Day at the Capitol: Strengthening Our Voice!

LPCA of GA proudly hosted another meaningful LPC Day at the Georgia State Capitol. This year's event welcomed a large number of first-time attendees and counseling students, bringing fresh energy and renewed commitment to advocacy for the counseling profession.

Throughout the day, members connected with colleagues, took photos, and engaged in conversations about why LPC Day at the Capitol matters. Many participants began to understand the real impact counselors can have when they use the power of their voice with elected officials. Attendees were encouraged to explore the Capitol through self-guided tours, request meetings with their legislators, and spend time building relationships with fellow counselors from across the state.

One of the most meaningful moments came during a conversation with a member who attended for the first time last year. She shared that she almost did not return this year due to fear and anxiety about the experience. However, she chose to come back, worked through those feelings, and fully participated in the day. As a therapist, it was inspiring to hear how she applied the very skills we encourage in our clients. Even better, she has already committed to returning next year.



The day was filled with new friendships, shared experiences, and a growing sense of unity among counselors. Many first-time attendees left with a deeper understanding of the role advocacy plays in protecting and advancing our profession.

LPC Day at the Capitol is about far more than gathering for a photo with the Governor. It is an opportunity for counselors to stand together, exercise their voice, and advocate for the profession of LPCs across Georgia. When counselors show up, engage, and build relationships with policymakers, the entire profession moves forward.

LPCA of GA looks forward to welcoming even more counselors next year as we continue to strengthen our voice and advocate for the communities we serve.



Annie Biers, GA House Rep. Tangie Herring, and Deanna Schultz



Danielle Hammon, Stephanie Stevens, and Vicki Blount



We Filled Those Stairs!



LPCA President-Elect Tonja Simmons and LPCA Executive Director Gale Macke



Front to back: Randi Darby, Chloe Austin, Gabby Self, and Hannah Rule



LPCA Central District Member Hannah Rule and GA House Rep. Robert Dickey



Gabe Salazar and GA House Rep. Gabriel Sanchez



Constance Cromartie and Dr. Erin Mason



Mercer University Students: Lisa, Regina, Lisette, and Alexis



Suneetha Manyam, Kelly Veal, Jessica Koalenz, Keisha Pou-Buchanan, Jihene Ayadi, and Janesta Nairn

ATLANTA DISTRICT

**Former Atlanta District Chair
Joanna Goulding Kester, LPC, NCC, CBTS
(Filling in for Lei Phyu Tun)**



LPC Day at the Capitol on March 5th, had a wonderful turnout this year. Almost 500 counselors registered to attend! I was able to attend and enjoy the positive energy of so many of my colleagues. Most importantly, we were given the opportunity to speak with our legislators and advocate for important mental health issues.

In my conversation with Secretary of State Brad Raffensperger, it was clear the counseling compact had been neglected and the challenges of integrating with other states were not being addressed, let alone resolved. LPCA of GA is working diligently to advocate for this issue being resolved. Please take a few minutes to reach out to the Secretary of State's office to advocate for the continuation of the counseling compact, which was approved in Georgia four years ago. Please also consider joining the LPCA Political Action Committee. Contact the LPCA office for more details.

I want to personally thank all of members for what you do for our profession and our communities.



LPCA Members Engaging with Governor Kemp on LPC Day at the Capitol

FarmResponse®

Free Training Opportunity
3.5 CEs

**Online course developed by national experts
from the AgriStress Response Network**

AgriSafe's FarmResponse Course provides a full range of competencies necessary to provide appropriate mental healthcare for agricultural producers and their families.

This knowledge is critical for a wide range of healthcare professionals to effectively care for a farmer's total health. Learners can earn a digital badge to acknowledge their accomplishment and dedication to serving the unique healthcare needs of the agricultural community!

**Scan the QR code for more information.
For CE certificate go to: CE@LPCAGA.org**



—Calling All Colleges—

Let LPCA Visit Your Campus!

LPCA of GA is Hitting the Road!

Tailored specifically for counseling students, we're traveling to colleges all across Georgia to provide free talks on licensure and more.

Let us bring the resources and guidance your students need to succeed in their journey to becoming LPCs.

Plus, we're bringing bling and food to make it a fun and engaging experience!

Students, tell your professors or program coordinators to email Eric Rodgers at erodgers@lpcaga.org to arrange a visit today.

Don't miss this opportunity to connect with LPCA and get the insider knowledge you need for your career!

Professors, we can't wait to meet your students and support the next generation of professional counselors!



SOUTHERN DISTRICT

Loriann Merritt, LPCA

February Coffee & Chat

L.E.A.F. Therapy Services in Valdosta, Georgia hosted the Southern District's Coffee & Chat on February 28th. Local mental health professionals gathered together for community and networking. Topics of discussion included clinician self-care, ways to advocate for clients, and client populations

that each clinician specializes in.

Coffee & Chats are a fun and engaging way to connect with other clinicians in the area, to find helpful referrals and resources, and build community with those in your area.



Southern District Coffee & Chat

Yummy snacks were included!



Coffee & Chat Attendees: Rosie Valdez, Anna Osborne, Cassie Avellaneda, Becca Thomas, Loriann Merritt, Michaela Brooks, A.J. Ramirez, Dillon Jones



Coffee & Chats are as fun as they are informative!

Follow us on social media:

Instagram (@LPCAGA22)

Facebook (<https://www.facebook.com/LPCAGA>)

LinkedIn: Licensed Professional Counselors Association

NCE Prep Workshop

In-person intensive prep workshop
NCE Exam Practice and Workshop Bundle
Gives You the Tools to Understand
and Master the NCE Exam!

3rd Saturday of each month
 LPCA of GA office in Roswell, GA

8:30 AM – 5:30 PM

(See page 15 for more details)



Dottie Chambers

CENTRAL DISTRICT

Dottie Chambers, LPC, CPCS
Jeannie Powell, LPC, CPCS

LPCA Central District Community Highlights

LPCA Central District had an amazing Coffee & Chat in beautiful downtown Forsyth on February 21st! Even with the rain, nothing could keep us from gathering together. New connections were made, old connections were rekindled, and valuable resources were shared. That's what community is all about!

Our members also had the opportunity to come together with counselors from across Georgia at the State Capitol on March 5th. LPC Day at the Capitol was a meaningful day of connection, advocacy, and celebrating the important work counselors do to support individuals, families, and communities throughout our state.

We kept the momentum going with another wonderful Coffee & Chat at The Woodlands



Jeannie Powell

Coffee Roasters in Kathleen on March 13th. Thankfully, it turned out to be anything but a scary Friday the 13th! Instead, it was another great time to connect, share ideas, and strengthen our professional community.

Thanks to everyone who continue to show up, support one another, and help make the LPCA Central District such a strong and welcoming network of professionals!



Central District Members at LPC Day at the Capitol
Dottie Chambers, Jeannie Powell, Gabby Self, Chloe Austin, Randi Darby, and Hannah Rule



Central District Coffee & Chat in Downtown Forsyth
Amber Flannery, Annie Biers, Rosalyn Chambliss, Rebekah Taylor, Mitch Schumacher, Lisa Schumaker, Courtney Stubbs, Thomas Fibbe, Anita Fibbe, Marcus Prevette, Laura Moir, and Deanna Schultz



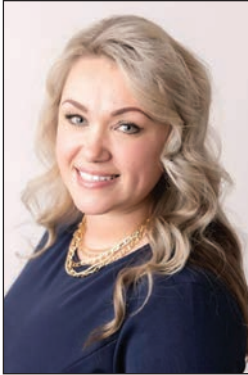
LPCA Central District Members at LPC Day at the Capitol
Darla Jackson, Shannon Williams, Bethany Martinez, Seymone Shannon, Brittney Allen, Jordan Paguirigan, and Dale Smith



Central District Coffee & Chat at The Woodlands Coffee Roasters in Kathleen
March 13, 2026 Coffee and Chat Deanna Schultz, Valerie Crawford, Diane Davis, Dottie Chambers, Sarah Tilley, Ross Perry, Tom Fibbe, Tonja Lee Simmons

WESTERN DISTRICT

Olga Maxwell, LPC, NCC, CPCS



On December 4th, 2025, various LPCA leaders and I were invited to participate in the panel discussion with the students of Troy University. This discussion included a variety of topics, such as licensure, future of the profession, supervision, exam tips and resources, etc. Students were left energized and empowered and had a lot of positive feedback about this impactful forum.

On December 10, 2025 Western District held an Ethics workshop in Columbus. During the morning session, Honorable Probate Judge Marc D'Antonio went over the entire process on being a Mental Health Evaluator for the Probate Court. He answered common questions and provided a multitude of resources on the capacity evaluations for Guardianship in Georgia. During the afternoon session, clinicians completed a review of the 2014 ACA code of Ethics and have done a deep dive into a variety of ethical scenarios and reviewed common violations. At the end of this interactive workshop participants have earned 6 CEs.

On December 13th, I presented at the LPCA Virtual Student Conference on Schizophrenia. This presentation provided an overview of the diagnostic criteria for this illness, common challenges in treatment and evidence-based approaches to treatment.

On March 5th, 2026, I went to the Capitol to participate in LPC Day. It was empowering to see so many counselors from all over Georgia come together to promote visibility and advocacy for our profession. It was wonderful to run into quite a few members from the Western District, counselors from other Districts, and to make new friends.

I had the opportunity to meet with Georgia House Rep. Carolyn Hugley who has represented portions of Columbus since 1992. She has served as House Minority Leader since 2025, and previously served as Democratic Minority Whip from 2003 to 2018.

Governor Kemp has issued a Proclamation for LPC Day in Georgia. Because of LPCA's continued advocacy for the profession, Georgia is the only state in the U.S. to have a dedicated Licensed Professional Counselor Day. I hope to see you all there at next year's LPC Day!



Rep. Carolyn Hugley with Deborah Hammond



LPCA Western District Members at LPC Day at the Capitol
L-R: Shakiyla Benson, Olga Maxwell, Deborah Hammond, Ugochi Eberonwu, Kelly Veal, Skyler King, Lauren Poole, Tiffany Payton, Hana Swales, Nevin Jackson, and Kamel Riggins.



EASTERN DISTRICT

Jihene Ayadi, PhD, LPC, CPCS, NCC, ACS, CCPT, C-DBT

Troy University Counseling Program Hosts LPCA of GA Forum on Georgia Licensure and Professional Practice

The Eastern District recently hosted a highly successful professional forum in collaboration with members of the LPCA of GA Board of

Directors and the Troy University Clinical Mental Health Counseling Program. The event brought together students, faculty, licensed counselors, site supervisors, and professional members for an engaging and informative discussion centered on Georgia licensure, ethical standards, and professional practice.

The forum served as a dynamic platform for dialogue between counselor educators, trainees, and association leaders who are actively shaping the future of counseling in Georgia. Board members generously shared their expertise on licensure requirements, post-graduate supervision expectations, ethics, and statewide advocacy efforts. Participants had the opportunity to ask direct questions regarding the LPCA credentialing process, documentation standards, and pathways toward full licensure, receiving thoughtful and comprehensive responses from association leadership.

The event was a tremendous success and a strong reflection of LPCA of GA's commitment to mentorship, transparency, and professional stewardship. Attendees expressed deep appreciation for the accessibility of Board members and the clarity provided on navigating the licensure process. Due to the overwhelming positive response and at the request of additional students and supervisors, the forum will be offered again in the near future to broaden its reach and impact.

Beyond licensure logistics, the discussion emphasized the importance of professional engagement and advocacy. Students were encouraged to view LPCA of GA membership not simply as a credentialing step, but as an essential component of professional identity development. Early involvement in state associations strengthens ethical practice, legislative awareness, and collective advocacy efforts that advance the counseling profession across Georgia.

The session also highlighted LPCA of GA's leadership role in protecting professional standards, supporting clinical supervisors, and representing counselors at the state level. By fostering open communication between counselor education programs and association leadership, initiatives such as this forum strengthen the bridge between academic preparation and professional practice.

The Eastern District remains committed to empowering emerging counselors while reinforcing LPCA of GA's mission of ethical leadership, advocacy, and professional advancement. The Eastern District looks forward to continuing this collaborative initiative and expanding opportunities for dialogue, mentorship, and engagement across Georgia. Members are encouraged to stay connected for announcements regarding upcoming forums and professional development events.



COASTAL DISTRICT

Patricia Whalen, LPC, CPCS, NCC, CST

Upcoming Events:

March 27, 2026 Workshop

Resilient Responders: Mental Health Needs
Recovery Place, Inc., 835 East 65th Street, Suite 104, 2nd floor, Savannah, GA
Contact number: 912-355-1440.
Limited to 25 participants.

April 3, 2026 Coffee & Chat

8:30–9:30 AM
Recovery Place, Inc., 835 East 65th Street, Suite 104, Savannah, GA
Contact number: 912-355-1440

June 5, 2026 Coffee & Chat

8:30–9:30 AM
Recovery Place, Inc., 835 East 65th Street, Suite 104, Savannah, GA
Contact number: 912-355-1440



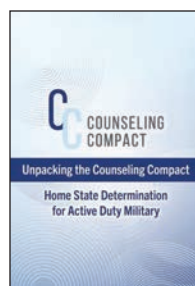
Milestone Moment for Counseling Compact!

**Greg Searls, Executive Director
Counseling Compact Commission**

I am excited to share that the Counseling Compact has officially surpassed 500 privileges issued across Ohio, Arizona, and Minnesota!

This milestone reflects the growing momentum of interstate practice and the commitment to improving access to counseling services while supporting licensees through a streamlined, collaborative process.

Thank you to the member states, partners, and counselors who are helping to make the Compact a success. This is just the beginning! (See map on page 28)



Active-Duty Military

Did you know that the Counseling Compact has special provisions for active-duty military members and their spouses? The Compact is designed to lessen the burden on our military families who relocate every couple of years. You can find details in my latest video in the *Unpacking the Counseling Compact* series by clicking the link: <https://lnkd.in/gxp6Jf6x>.

For those who are reading this article in a printed copy of the newsletter, you can find the video by going to [youtube.com](https://www.youtube.com) and in the search bar type PC Compact Greg Searls. Scroll down through the videos until you see one titled Home State Determination for Active-Duty Military.

Since 2024, Greg Searls has served as the Executive Director of the Counseling Compact Commission to oversee operations and improve access to mental health care. He previously managed multiple licensing boards in Wyoming as the Executive Director for their Professional Licensing Boards. Contact: executivedirector@counselingcompact.gov | [counselingcompact.gov](https://www.counselingcompact.gov).



Ethical Decision-Making in Public Service

Johnnie L. Jenkins III, PhD, LPC, CPCS

Introduction

Walensky, as cited in Keith-Spiegel and Koocher (1985, p.1), states that “a profession has been described as a unique body of

theory or knowledge with its members possessing specific skills or techniques based on that knowledge. Ethics code development is considered an essential step in professionalization of an occupation”. Ethical standards provide structure and guidance to professionals when addressing complex issues that involve competing values or responsibilities.

Similar to the counseling profession, government institutions must also abide by ethical codes in order to regulate and guide the behavior of their members. Ethical guidelines help ensure that decisions made by governing bodies are fair, transparent, and aligned with the public interest.

Ethical Leadership in the City of Stockbridge

The City of Stockbridge operates under a governing structure that includes a board of five members responsible for ensuring that the city functions according to ethical principles. Recently, I was asked to join the Stockbridge City Ethics Committee in order to bring my professional expertise and experience to help ensure that Stockbridge continues to operate as an ethically governed municipality.

Individuals serving on boards or committees are responsible for oversight should utilize a structured framework for decision-making. Ethical frameworks help guide leaders through complex decisions by encouraging them to analyze the facts, consider the perspectives of all parties involved, and apply consistent ethical principles.



Johnnie Jenkins Joins the Stockbridge City Ethics Committee

The Kidder Ethical Checkpoints

One model that can guide ethical decision-making is the Kidder ethical checkpoints model. According to Kidder, as cited in Johnson (2005), ethical decision-making requires a systematic evaluation of the issue at hand. The Kidder checkpoints include the following steps:

1. Recognize that there is a moral issue.
2. Determine the actors involved.
3. Gather the relevant facts.
4. Test for right versus wrong issues.
5. Test for right versus right dilemmas.
6. Apply ethical standards or perspectives.
7. Explore the possibility of a third alternative.
8. Make the decision.
9. Revisit and reflect on the decision.

This model encourages thoughtful analysis and reflection before arriving at a final ethical decision.

The Lewis-Alvin Day-Sad Formula

Another ethical framework that may guide the committee’s process is the Lewis-Alvin Day-Sad formula (Johnson, 2005). This approach emphasizes a structured analysis of ethical problems through three primary phases: situational definition, analysis, and decision.

The first step involves defining the situation. This includes examining the facts of the case, identifying the ethical principles and values involved, and clearly stating the ethical question or issue.

During the analysis phase, decision-makers weigh relevant ethical principles, consider external factors that may influence the decision, examine the duties of all parties involved, and review applicable ethical theories.

The final phase is the decision stage. At this point, decision-makers reconsider the roles of the moral agents, discuss possible courses of action, and apply ethical reasoning to determine the most appropriate resolution to the ethical problem.

Conclusion

As I begin my tenure on the Stockbridge City Ethics Committee, I hope to bring many of the ethical principles that I have learned through my counseling background into the arena of public policy. My goal is to contribute to thoughtful and principled decision-making that benefits the citizens of Stockbridge.

By applying established ethical decision-making models, I hope to help ensure that the city continues to operate according to strong ethical standards. In doing so, Stockbridge can remain a leader in ethical governance and serve as an example of responsible and effective public administration.

References:

Johnson, C.E. (2005). *Meeting the ethical challenges of leadership: Casting light or shadow*, (2nded.). Sage.
 Keith-Spiegel, P., & Koocher, G. P. (1985). *Ethics in psychology: Professional standards and cases*. McGraw-Hill.



The Therapeutic Pause and Choosing Curiosity

David Markwell, LPC, LCMHC, CPCS, ACS

Counselors recognize the moment: a client describes a familiar pattern or a situation that seems obvious from the outside and the urge to give advice quietly appears.

We want to help. We want to move the client forward.

Yet in many cases, the impulse to give advice has less to do with clinical necessity and more to do with *discomfort* whether ours or the client's. Learning to pause at that moment and choose curiosity is one of the most transformative counseling skills.

Advice is not fundamentally harmful. There are times when psychoeducation, guidance, or skill-building is appropriate.

Advice offered prematurely often signals one of three things:

- (1) The counselor feels anxious about the client's distress
- (2) The counselor feels pressure to "do something"
- (3) The counselor feels unsure how to sit with uncertainty

Pausing Before Advice

One of the most powerful interventions at the moment you want to give advice is often a pause. Remember the acronym—**WAIT: Why Am I Talking?**

Pausing or Waiting allows the counselor to examine:

- What is this client needing right now: direction or understanding; soothing or solutions?
- Am I trying to reduce their discomfort, or my own?

Even a few seconds of intentional silence can shift the session. When counselors slow down, clients often do too.

Being Curious When Seeking Information

Replacing advice with curiosity often opens more movement than a list of suggestions ever could. Curiosity invites clients to explore meaning, purpose, and choice.

Instead of offering advice, try asking:

- "What feels hardest about this right now?"
- "What have you already thought about doing?"
- "What makes this decision feel risky for you?"
- "What was happening for you when..."
- "What have you already considered?"
- "What do you think would happen if..."
- "What makes this choice make sense to you?"
- "What would happen if nothing changed?"
- "What feels easier about staying where you are?"
- "I was wondering if you had noticed this pattern before?"
- "What might you guess if you had to?"
- "What makes this choice feel hard?"
- "Where have you felt this before?"

These questions shift the client from being a passive recipient of guidance to an active participant in their own process. Curiosity honors the client's internal logic, even when their choices seem confusing from the outside.

Curiosity Reduces Defensiveness

Defensiveness often emerges when clients sense judgment or pressure to change. Even subtle cues like tone of voice, facial expression, or rushed responses can trigger it.

Curiosity communicates:

- "I'm interested, not disappointed."
- "You make sense, even if this is hard."
- "You don't have to defend yourself here."
- "You are worth understanding."

When clients feel understood rather than assessed, their nervous systems settle. As defensiveness decreases, honesty increases.

Conclusion

Pausing and being curious in the moments you want to give advice is not passivity, it is discipline. It requires tolerating uncertainty, slowing down, and trusting the client's capacity for growth. Often, the most effective intervention is not telling clients what to do but staying curious long enough for them to remember who they are and trust themselves.

David has previously served as the LPCA Clinical Supervision Chair (2018–2020) and LPCA President (2023–2024). He is a long time member of LPCA of GA and is located in the LPCA Atlanta District.

National Counselors Exam Prep Workshop

Johnnie L. Jenkins III, PhD, LPC, CPCS

This one exam stands between licensure and continued employment as a counselor. On average, at least 40% will fail every time.

NCE Exam Practice and Workshops Bundle gives you the tools to understand and master the NCE exam. We've helped thousands of people achieve their dream scores with a success rate of 98% for the last several years.

This is an overview and in-depth approach to understanding theories of psychotherapy and their application in preparation for the NCE licensing examination. The exam candidate is provided the most complete coaching experience, and gets a 3" thick study manual



**March 21, 2026 NCE Prep Workshop
Brandy Bussey and Robin Bellard**

covering the DSM. Each prep course has been designed by experts who know the test inside and out. This workshop is a total of six hours of interactive one-on-one instruction, plus weekly follow-up on the at-home study materials.



Ethical and Legal Concerns When Counseling Minors

Tracey Pace, ThD, LPC, CPCS, CFMHE
LPCA of GA President

As this April issue of LPC Connection was being finalized, the United States Supreme Court issued a key ruling affecting parental rights, *Mirabelli v. Bonta*,

particularly as related to what information schools can withhold from parents. California has a state law that prohibits school employees from notifying parents that their child wished to be addressed by a different pronoun or name than what they were registered as unless the child had specifically given the school's permission to discuss this with their parents. It was alleged that some schools had two sets of names/pronouns that they would use depending on who they were speaking with, the child and other school employees or the parents.

The legal maneuvering is somewhat complicated but, in a nutshell, California law was challenged in district court by two teachers and subsequently, several parents. The district court found in their favor and issued a permanent injunction to the policy. This decision was then appealed to the Ninth Circuit Court who reversed the injunction and ruled in favor of California law. The plaintiffs (parents, the two original teachers and other interested parties) then appealed to the United States Supreme Court. The Supreme Court reversed the Ninth Circuit and reinstated the permanent injunction based on their opinion that if the legal process was allowed to follow its natural course the plaintiffs would likely prevail.

While this case specifically involves California, the United States Supreme Court has signaled through this decision that any other states or entities who have similar policies would ultimately lose if challenged in court. Interestingly, some Georgia parents are challenging Georgia Law using the same argument that led the Supreme Court to find in favor of the parents in the California case. Parents who oppose Georgia's ban on gender transition surgical or hormonal care argue that it is a parent's right to make decisions concerning their children. Opposite sides of the same coin of parental rights.

This is just another reminder that counseling minors comes with a unique set of ethics and laws that counselors do not face in the adult population. LPCA offers Georgia-focused courses on counseling minors and the challenges facing work with this population.

Reference:

25A810, *Mirabelli v. Bonta*, (March 2, 2026) United States Supreme Court

Increased Mental Health Screening

Tracey Pace, ThD, LPC, CPCS, CFMHE
LPCA of GA President

Legislation currently pending in the Georgia House would provide for scheduled comprehensive mental health screening and follow-up care as needed for pregnant and up to one-year postpartum women. HB 1346 is sponsored by Representatives Anissa Jones, Carolyn Hugley, Tangie Herring, and Todd Jones.

"Mental health is health," said Rep. Jones. "Too many mothers silently struggle with depression, anxiety and other perinatal mood disorders. This legislation would ensure that screening and treatment are not optional luxuries; they are part of comprehensive maternal care."

HB 1346 was successfully reported out of House committee on February 26, 2026.

HB 1346

A BILL to be entitled an Act to amend Chapter 1 of Title 33 of the Official Code of Georgia Annotated, relating to general provisions relative to insurance, so as to provide for coverage for comprehensive maternal mental health screening and care; to provide for such screenings at specific points during and after pregnancy as deemed necessary by a physician or other healthcare provider; to provide for reports; to amend Article 7 of Chapter 4 of Title 49 of the Official Code of Georgia Annotated, relating to medical assistance generally, so as to provide for maternal mental health screenings for perinatal mood and anxiety disorders; to repeal conflicting laws; and for other purposes.

LPCA will be watching as this bill makes its way through the legislative process. To read the entire proposed bill and follow its progress go to www.legis.ga.gov, scroll down to *Find Legislation* and type in HB 1346.



HB 219 Passed the GA Senate!

Julianna McConnell
LPCA of GA Lobbyist

March 12, 2026 marks an historic day for Georgia's LPCs, MFTs, social workers and nurses with the passage of HB 219 in the Georgia Senate! This legislation was first introduced in a mental health parity bill (HB 520) in the 2023 session. After four years of advocating for this legislation, it was finally passed in HB 219. The bill now heads to the Governor's office for his signature.

HB 219 authorizes the Georgia Board of Nursing and the Georgia Composite Board of Licensed Professional Counselors, Social Workers, and MFTs to establish a professional health program for monitoring and rehabilitation of impaired healthcare professionals. Impaired healthcare professionals (as defined in HB 219) means "the inability of a healthcare professional to practice with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, chemicals, or any other type of material, or as a result of any mental or physical condition."

A special thank you to the legislators who sponsored the bill in the House and carried to the Senate: Georgia House Representatives Ron Stephens of Savannah, Viola Davis of Stone Mountain, David Clark of Buford, and Georgia Senator Chuck Hufstetler of Rome.

LPCA joined with advocates from UAPRN, GNA, and MFTs working for the passage of HB 219. The Georgia Mental Health Policy Partnership also added HB 219 as one of their top legislative priorities and advocated for its passage.

Special thank you for this major group effort to pass HB 219. We now wait for the Governor's signature to sign the bill into law.



BY THE GOVERNOR OF THE STATE OF GEORGIA

A PROCLAMATION

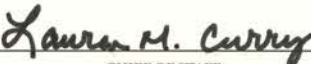
LICENSED PROFESSIONAL COUNSELORS APPRECIATION DAY

- WHEREAS: Licensed Professional Counselors (LPCs) in the State of Georgia provide vital mental health services and actively work to bridge the gap in mental health disparities, ensuring that individuals from all backgrounds, races, socio-economic statuses, and cultures have equal access to quality mental health care; and
- WHEREAS: These dedicated Licensed Professional Counselors (LPCs) undergo rigorous training and education, encompassing crucial areas such as psychopathology, testing and assessment, ethics, research, diversity, career development, and human development, equipping them to address multifaceted challenges faced by our citizens; and
- WHEREAS: The State of Georgia proudly recognizes and supports over 8,740 Licensed Professional Counselors and over 1,600 licensed associate professional counselors, each of whom contributes significantly to the mental and emotional well-being of our community members, reinforcing the strength and resilience of our great State; and
- WHEREAS: Inspired by the mission from the Licensed Professional Counselors Association of Georgia (LPCA of GA), which aims to support the profession and professionalism of professional counselors, we acknowledge the pivotal role LPCs play in mental health treatment, ensuring that every individual in need receives the quality care and support they deserve; and
- WHEREAS: The establishment of the 988-crisis line, an essential helpline for those in dire need, now has a more extensive network of dedicated practitioners to refer to, thanks largely to the commitment and expertise of our Licensed Professional Counselors; and
- WHEREAS: We commend the autonomy and comprehensive capabilities of our LPCs who are sanctioned to practice independently, bill insurance companies directly, diagnose clients, administer vital clinical assessments, and conduct thorough mental health evaluations independently; now
- THEREFORE: I, BRIAN P. KEMP, Governor of the State of Georgia, do hereby proclaim January 22, 2026, as LICENSED PROFESSIONAL COUNSELORS APPRECIATION DAY in Georgia.

In witness thereof, I have hereunto set my hand and caused the Seal of the Executive Department to be affixed this 16th day of January in the year of our Lord, Two Thousand and Twenty-Six.




GOVERNOR

ATTEST

CHIEF OF STAFF



Conducting Therapy with Military Members: Cultural Competence, Clinical Integrity, and the Path to Effective Care

Clairice Brown-Allen, MBA, MA, LPC, CPCS, CTMHP, CAMS

Working with military service members, whether active duty, reservists, or veterans, requires more than clinical skill. It demands cultural humility, a willingness to learn, and a deep respect for the unique experiences that shape military life. While the military community is diverse, it is also bound by shared structures, values, and stressors that profoundly influence mental health and help-seeking behaviors. Therapists who approach this population with curiosity, honesty, and a commitment to competence are far better positioned to build trust and deliver effective care.

Military culture is not simply a set of rules or traditions, it is a worldview shaped by discipline, hierarchy, cohesion, and sacrifice. For many service members, these values become deeply ingrained and continue to influence their identity long after their service ends.

Therapists who lack familiarity with military culture may unintentionally misinterpret behaviors, minimize experiences, or overlook critical contextual factors. For example, a client's reluctance to express emotion may be rooted in training that equates vulnerability with weakness; a strong sense of duty may conflict with self-care, making treatment adherence difficult; hypervigilance may not only be a symptom of trauma but also a learned survival skill from deployment environments. Understanding these nuances helps therapists avoid pathologizing adaptive behaviors and instead explore how those behaviors function in the client's current life.

While no therapist can know everything about the military, certain areas of knowledge are essential. Branch differences: the experiences of a Marine differ from those of an Airman or Sailor. Each branch has its own culture, traditions, and operational demands. Deployment cycles such as pre-deployment stress, deployment trauma, and reintegration challenges, each carry distinct psychological impacts. Unit cohesion fosters a strong sense of belonging; losing that community can be a major source of grief for veterans. Stigmas around mental health such as fear of career impact, clearance issues, or being perceived as weak, can deter service members from seeking help. Therapists who invest time in learning these elements demonstrate respect and increase the likelihood of building therapeutic rapport.

Rank is not just a title, it is a social structure that shapes identity, responsibility, and interpersonal dynamics. Misunderstanding rank can lead to miscommunication or inadvertently disrespecting a client's lived experience. Rank influences leadership responsibilities, exposure to trauma, stress levels, decision-making authority, and relationships within the unit.

For example, a junior enlisted service member may feel powerless to refuse unsafe orders, while a senior officer may carry the burden of decisions that affected the lives of others. These distinctions have meaningful clinical implications.

Military terminology is extensive, and clients often use acronyms or jargon without realizing it. When therapists repeatedly ask, "What does that mean?" it can disrupt rapport or make the client feel misunderstood. While it is appropriate to ask for clarification when needed, therapists should proactively learn common acronyms (e.g., PCS, MOS, TDY, CO), deployment related terms, branch specific vocabulary and slang, and informal expressions. This effort signals respect and reduces the emotional labor placed on the client.

One of the most common mistakes therapists make is assuming that all service members share similar experiences. Military life varies widely based on branch and occupational specialty, deployment history, combat history, length of service, gender and race, type of discharge, and personal history before joining the military. Two veterans may have served in the same conflict but carry entirely different psychological wounds. One may have experienced direct combat; another may have endured moral injury, sexual trauma, or the strain of repeated separations from family.

Therapists must approach each client with openness rather than relying on stereotypes such as; "all veterans have PTSD," "combat is the primary source of trauma," and "military members are always resilient." These assumptions can invalidate the client's lived experience and hinder therapeutic progress.

A thorough assessment should explore; the client's role and responsibilities, their perception of their service, traumatic or morally injurious events, reintegration challenges and identify shifts, and leaving the military. This individualized approach ensures that treatment is tailored, relevant, and respectful.

Therapists sometimes feel pressure to appear knowledgeable, especially when working with populations they admire or deeply respect. However, pretending to have military experience, or implying expertise that one does not possess, can damage trust and compromise care. Military clients are often highly attuned to authenticity. If a therapist exaggerates their experience or uses terminology incorrectly, the client may feel misled or disrespected. Being honest about one's level of experience builds credibility, models integrity, encourages collaboration, and allows the therapist to seek consultation or training when needed. A simple, honest statement such as, "I haven't served, but I'm committed to understanding your experience and providing the best care possible," can strengthen rapport rather than weaken it. Misrepresentation can lead to inappropriate treatment choices, misinterpretation of symptoms, missed opportunities for culturally informed interventions, and erosion of trust. Therapists must practice within their competence and seek supervision, training, or referrals when necessary.

While no single therapy works for everyone, certain evidence-based treatments have shown strong effectiveness with military members, particularly those experiencing trauma-related symptoms. Commonly effective therapies include but are not limited to: Cognitive Processing Therapy (CPT)—helps clients reframe unhelpful beliefs related to

trauma, guilt, or moral injury; Prolonged Exposure (PE)—supports clients in gradually confronting trauma memories and avoided situations; Eye Movement Desensitization and Reprocessing (EMDR)—facilitates processing of traumatic memories through bilateral stimulation; Acceptance and Commitment Therapy (ACT)—helps clients build psychological flexibility and align actions with values; Trauma-Focused CBT—particularly effective for younger service members or those with co-occurring issues; Group Therapy—offers camaraderie and shared understanding, reducing isolation; Family or Couples' Therapy—addresses reintegration challenges, communication issues, and relational strain.

Not every military member needs trauma-focused therapy. Some may seek help with depression, anxiety, relationship issues, identity transitions, grief, and substance use. Therapists should avoid assuming trauma is the primary issue and instead allow the client's goals to guide treatment. When clients feel understood and respected, they are more likely to engage fully in therapy.

Clairice has been a proud member of the LPCA for eight years and calls the Atlanta district home. She is passionate about serving veterans and their families, ensuring they receive the understanding, respect, and support they deserve.

Attunement: The Quiet Skill That Changes Everything

Angela Montondo, MA, LPC, NCC, CCTP

There's a moment early in therapy, before the interventions, before the treatment plan, before the client even knows if they can trust you. It's the moment when everything hinges on a question they won't say out loud:

"Are you really here with me?"

Attunement is how we as therapists answer that question. It isn't a technique. It's not something you pull from a manual or slot into an intervention grid. Attunement is a way of being with another person. It's reading the emotional temperature in the room, adjusting your pace, noticing what's said and what's avoided, listening to tone as much as content. It's the therapist matching the client's emotional rhythm enough that the client feels met rather than handled.

And when it happens, you can feel it in the room.

How Attunement Shows Up in the Room

It's subtle. It's usually quiet. But it's powerful. When a client pauses mid-story, attunement is waiting with them rather than rescuing the silence. When a client's voice tightens, attunement catches the shift and gently mirrors back the emotion they're trying to outrun. When a client minimizes their pain with humor, attunement hears the ache underneath. When a client spirals into shame, attunement provides steady ground, not by arguing with the shame, but by staying present through it. Attunement makes clients feel seen in a way they might never have experienced before. And that changes the whole trajectory of the relationship.



The Point Where Healing Starts to Take Root

There comes a day when the client sits down and exhales for the first time. You can sense the difference in their posture. The shoulders unclench. There's no rush, no guarded energy, just a quiet presence.

They are Starting to Trust the Process

Not because of a brilliant intervention or a textbook-perfect cognitive exercise, but because the attunement between you has created a space where their nervous system can finally settle and where their story can unfold without bracing for judgment or misunderstanding. Therapy techniques work best in that environment, not the other way around.

Attunement is the soil; the interventions are the seeds.

Why Attunement is so Often Overlooked

We live in a clinical world that loves measurable outcomes. Manuals. Protocols. Evidence-based models with clean acronyms. But the truth is: no model functions without relationship. Research on attachment, interpersonal neurobiology, and trauma recovery all point to the same reality—humans heal in connection. A regulated, attuned presence has a measurable effect on a dysregulated nervous system. Clients can sense when a therapist is with them versus when the therapist is simply performing therapy. The body knows the difference.

The Gift of Being Seen and Met

When clients experience attunement, they begin to experience themselves differently. They start to take emotional risks. They name things they've never said aloud. They explore parts of their story that have been locked up for decades.

And eventually, they ask quieter, deeper questions:

"Do you think there's hope for me?"

"Do you think I can change?"

"Do you see something good in me?"

Attunement lets us answer with more than words.

It lets us answer with presence.

The Heart of it All

Attunement is the therapist saying:

"I'm with you."

"I see you."

"I hear what you're saying and what you're not yet able to say."

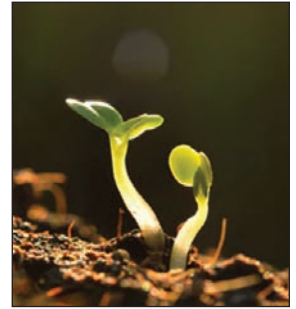
"We'll take this step by step, and I'll stay beside you as you find your way through."

That's the work that changes people.

That's what earns the right to go deeper.

That's where true transformation begins.

Angela Montondo is the owner and Clinical Director of Still Waters Counseling & Assessments in LaGrange, Georgia. She has been a member of LPCA of GA since 2022 and resides in the Central District with a clinical focus on trauma, first responders, and faith-integrated counseling.





Unseen but Unshaken: My Journey and Purpose as a Black Woman in Counseling Education and Supervision

Melissa A. Seldon, MS, NCC, LPC

My name is Melissa Seldon, and I am a CES PhD student in Counseling Education and Supervision at Walden University. My journey into the counseling profession has been challenging but deeply meaningful and grounded in a lifelong commitment to supporting often isolated people. My mission is to help others feel seen, heard, and valued. Despite the challenges in today's societal climate, I remain grounded in purpose and fueled by lived experience, passion, and a deep commitment to advocacy, equity, and healing.

What Has Shaped Me

My background and identity as a Black woman have shaped me because I have experienced the burden of being discriminated against, misunderstood, and unseen. Thus, I want to change this narrative and support those who are often unseen or misunderstood. My educational journey has been challenging, as I have often been in situations where people question my education and credentials just because I am an African American woman. These circumstances motivated me to excel and dispel the narrative associating Black American Women with low academic achievements. Mentorship and discrimination in the community have encouraged me to advocate for other people's wellness. Systemic inequities have also presented the need to champion community mental health and engage in advocacy to reduce barriers like discrimination. Consequently, these practices have enabled me to advocate for community mental health, healing, and equity.

What Drives Me

The urgency of today's social and political climate creates the need to advocate for mental health. For instance, the erasure of African American history and DEI initiatives motivates me to advocate for mental health and eliminate existing inequalities. In addition, the underserved populations are losing access to health care, community based resources, mental health care, exposing them to adverse mental health conditions, complications, stigma, and poor quality of life. Furthermore, attacks on women's rights, LGBTQ rights, and the deportation of citizens are rampant, threatening individuals' mental health and exposing them to disorders like anxiety, depression, and psychological trauma. Underserved populations need mental health advocates, and my principles of empathy, advocacy, and justice as a mental health professional drive this initiative. Also I am driven by the recent dismantling of education and cuts to science and research, which leads to delaying medical advancement, missing opportunities in the development of game-changing solutions in education, deterrence with studies in mental health, hence worsening mental health outcomes. Overall, education, practice, personal experiences have provided me

with an understanding and expertise in mental health and have created a deeper understanding of the issue in my future role as a counselor, educator, and supervisor.

What I Am Working Towards

I believe that earning my PhD will not just be a personal achievement, but a big step towards transforming systems. I will use my academic expertise and professional experience to transform systems, become a leader, educator, and mentor to the next generation of counselors, especially those from marginalized backgrounds. I will also use my expertise and influence to advocate for policy reform, equity in mental health care, and inclusive, trauma-informed practices. My position will allow me to amplify the voices of those who are silenced or ignored, enabling them to attain their full potential. My education and experience with the marginalization of ethnic minorities will guide me in developing culturally responsive curriculum, research, and supervision models that benefit them. These initiatives are achievable and have immense benefits for underrepresented populations.

Conclusion

I am committed to helping others feel seen, heard, and valued, and I will use my education and experience with marginalized communities to attain my mission. The injustices in today's community are derailing people's mental health and wellness, exposing them to mental disorders. People need resilience and purpose to overcome these challenges and protect their mental health. Therefore, mental health in marginalized populations is achievable and believing in others and supporting them eliminates barriers to the issue and boosts resilience.

Melissa Seldon is a PhD candidate in Counseling Education and Supervision at Walden University. Her research explores burnout among BIPOC counselors in community mental health agencies through the lenses of Critical Race Theory and the Job Demands-Resources Model. She has been an active member of LPCA for four years and currently resides and practices within the Western LPCA District.

Black Women in History Dr. Anna Julia Cooper

Dr. Anna Julia Cooper was an African American author, educator, and activist. Born into slavery in North Carolina in 1858, she pursued higher education at Oberlin College in Ohio, where she earned a Bachelor of Arts in 1884 and a Masters of Mathematics in 1887. On May 18, 1893, Anna delivered an address at the World's Congress of Representative Women in Chicago. Her speech to this predominately white audience described the progress of African American women since slavery. In 1925, at the age of 67, she received a PhD in History from the University of Paris in Sorbonne.





Cultural Community as Clinical Intervention: How Culturally Grounded Networks Strengthen Unity, Advocacy, and Wellness in Counseling

Tiffeny Davis, PhD, LPC, NCC, CCTP

Abstract: Culturally grounded communities such as sister circles, affinity groups, and mentoring networks are emerging as essential sources of professional growth, resilience, and unity in counseling. This article explores how cultural community functions as a clinical and developmental intervention, particularly for Women of Color navigating invisibility and marginalization in professional spaces.

Unity in Counseling Through Cultural Community

The counseling profession is rooted in connection, yet many counselors, educators, and students, particularly women of color and other marginalized groups, continue to experience isolation, invisibility, and cultural disconnection within academic, clinical, and organizational spaces. As LPCs across Georgia embrace the theme *Many Trees Make a Forest: Unity in Counseling*, it becomes clear that unity is not symbolic. It is cultivated through intentional, culturally grounded relationships that support identity, wellness, and collective strength.

Why Culturally Grounded Networks Matter

Culturally affirming communities, sister circles, affinity groups, mentoring networks, and collaborative professional pods, function as therapeutic ecosystems. These spaces reduce isolation, counteract the emotional toll of marginalization, and create environments where authenticity, advocacy, and identity can flourish. They are not supplemental; they are essential to emotional wellbeing and professional sustainability. Within these communities, counselors gain clarity, confidence, and the courage to lead.

Connecting to the Research

A central reference point for this work is the dissertation *Navigating the Margins: The Impact of Intersectional Invisibility on the Professional Advancement of Black American Women in Counselor Education*. A key concept shaping this research is intersectional invisibility, a phenomenon in which individuals with multiple marginalized identities, such as Black women, are overlooked because they do not fit the dominant stereotypes of any single group. This invisibility operates in two forms. *Hostile invisibility* occurs when contributions are dismissed, labor is undervalued, and legitimacy is questioned. *Benign invisibility* occurs when being overlooked creates protected space to act authentically, develop confidence, and pursue self-aligned opportunities. Both forms shape emotional wellbeing, professional identity, and access to advancement.

Research participants in the study described emotional fatigue, self-monitoring, and the internal work required to maintain confidence in environments that frequently overlooked their contributions. Yet they also identified cultural community as a primary source of resilience, identity

affirmation, and professional growth. These networks offered emotional grounding, accountability, and a sense of belonging that helped counteract the psychological and professional burdens of marginalization.

Findings revealed that cultural community was not simply helpful, it was transformative. Sister circles, mentoring relationships, and culturally grounded networks emerged as the primary sources of professional growth, providing strategic guidance, identity affirmation, and the support needed to navigate environments where their contributions were often minimized. Cultural community became a site of healing, empowerment, and professional expansion.

What the Literature Shows

Research across counseling and higher education reinforces these findings. Studies on (other) sistering, doctoral sister circles, and culturally congruent mentoring demonstrate that culturally grounded relationships foster psychological safety, strengthen professional identity, and open pathways for advancement. These communities operate as hubs of collective wisdom, resource sharing, and leadership development, key ingredients for sustained professional growth.

Implications for Counselors and Counselor Educators

Culturally rooted networks help counselors and counselor educators navigate identity, counteract marginalization, and build resilience. They model the kind of unity the profession strives for, unity grounded in cultural affirmation, shared purpose, and collective healing. Strengthening unity in counseling requires creating culturally safe spaces, integrating community-based models into practice and supervision, advocating for institutional structures that protect culturally grounded networks, and recognizing the emotional and cultural labor carried by marginalized counselors. Building collaborative communities that sustain resilience and professional growth is essential to the health of our profession.

A Forest Rooted in Collective Strength

As the counseling profession continues to advance equity and wellness, one message is clear: *when cultural community is honored as a legitimate site of professional growth and healing, the entire forest grows stronger.*

References:

- Barber, C., & Ting, S. (2023). Culturally congruent mentoring and the professional development of counselors of color. *Journal of Multicultural Counseling and Development*.
- Brown, L., & Boyd, R. (2024). Sistering as resistance: Community care and professional identity among Black women in counseling. *Counseling Education Review*.
- Chance, S. (2021). Affinity groups as sites of resilience for marginalized counselor trainees. *Journal of Counseling Research and Practice*.
- Davis, T. (2025). *Navigating the Margins: The Impact of Intersectional Invisibility on the Professional Advancement of Black American Women in Counselor Education* (Doctoral dissertation, Capella University).
- Smith, A. N., Watkins, M. B., Ladge, J. J., & Carlton, P. (2019). Making the invisible visible: Paradoxical effects of intersectional invisibility on the career experiences of executive Black women. *Academy of Management Journal*, 62(6), 1705-1734.
- Tiffeny Davis currently serves as a PTSD therapist with the Veterans Health Administration and teaches in the Counselor Education program at the University of Southern Maine. She earned her PhD in Counselor Education and Supervision from Capella University in September 2025, with research centered on intersectional invisibility and the professional experiences of Black women in academia.*

Your Body is Your Unconscious Mind: Interrelatedness of Psychology and Medicine

Pamela L. Chubbuck, PhD



Modern science is beginning to get excited about what ancient Greeks practiced in Athens and Crete, and indigenous people all over the world have known for thousands of years. Science proves that mind and body are clearly not only interrelated, they are one. We are bodymind.

Candace Pert, PhD, an internationally known and highly respected neurobiologist, has proven that emotion is not generated in the brain; it is generated in the cells themselves—all over the body. Therefore, our bodies are truly our subconscious minds. Dr. Pert, author of “Molecules of Emotion”, with her husband Dr. Michael Ruff, were the first to begin study in what is now well known as psychoneuroimmunology. Pert says that emotions are chemically instigated at the cellular level, which is where unexpressed emotions are stored.

This overwhelmingly indicates that mental, emotional and physical trauma, and shock, when not expressed at the time the event occurs, creates energetic blocks which lead to later problems.

We now know that what Sigmund Freud termed the “subconscious mind” is actually a measurable physical process. Freud explored awareness outside consciousness and showed that when we banish traumatic experiences to our subconscious mind, they later emerge as physical and mental ailments. Our suppressed emotional events influence our physical well-being.

On the cellular level, emotions are literally created chemically. As we store unexpressed emotions on a cellular level, illness can be caused by this stored and trapped information. Therefore, it stands to reason that to heal from our illnesses, we must express the information accumulated in our bodyminds.

Wilhelm Reich, MD, a student of Freud, is world renowned for his innovative therapy which treats human beings as living, moving entities full of the life energy, that he called orgone. Reich stated that when life energy is blocked due to emotional distress, illness is produced.

Dr. John Pierrakos, a student of Reich, creator of Core Energetics, has studied the interface between held emotions and illness, for over forty years, and has taught that specific developmental wounding creates specific disease processes. Dr Pierrakos’ book *Core Energetics: Developing the Capacity to Love and Heal*, explains how Core Energetics combines psychology, new physics, spirituality, and energy field and charka system theory. Once considered to be only in the realm of the spiritual and metaphysical, Dr. Candace Pert’s research is now revealing the scientific underpinnings of the charka system. Pert says that charkas are “minibrains”: points of electrical and chemical activity that receive, process, and distribute information from and to the rest of the body.

Alexander Lowen, MD, also a student of Reich, co-creator of Bioenergetic Analysis, with John Pierrakos, MD, writes extensively on the interface and impact of the emotions on the body. In his book, *Love, Sex and Your Heart*, Lowen explains that difficult childhood experiences impact the human body and particularly the human heart.

Many people in our culture suffer from heart disease. Certainly, diet and modern day stresses contribute to failing hearts. Most importantly, says Lowen, children who suffer lack or loss of love in childhood suffer heartbreak. To survive they suppress their pain by rigidifying the chest wall, which limits breathing, movement and feeling, therefore creating continuous stress on the body. Dr. Lowen says, “It is the existence of this kind of stress, in my opinion, that predisposes so many people to heart disease.” He goes on to state clearly that, “Only a person who is not afraid to love can be reasonably secure that his heart will remain healthy.”

It is well known that people with “type A” behavior are statistically seven times more likely to have heart disease and heart attacks. People with “type A” behavior have tight mouths and jaws, tense bodies and body postures, rapid finger tapping, are competitive, compulsive, etc. People who exhibit these behaviors are defending themselves from painful childhood histories or current emotional stressors and can help heal themselves by expressing held emotions which will soften and relax their entire bodies, making them less likely to be physically and mentally ill.

Examples of bodymind influence from my own practice are numerable. Two representative cases are: a forty-year-old man, who presented with serious long term irritable bowel syndrome/colitis, was able to express his unresolved childhood pain of his mother’s death, and his physical symptoms resolved in just a few months. A thirty-five-year-old woman, who for years, had daily severe migraines, was able to release the energy that was blocking her emotions, rage at an abusive father, and her headaches soon vanished.

Physical symptoms of dis-ease are clearly emotionally connected. Working energetically with deep emotional and spiritual issues can move and transform the stuck energy that creates dis-ease such as, fibromyalgia, ulcers, irritable bowel syndrome, some types of chronic pain, migraines, sexual dysfunction, and TMJ among others. Working with the body and its energy also helps to heal the issues we commonly consider psychological, such as, panic attacks, depression, anxiety etc. People who work with all aspects of themselves report feeling more alive, having more sexual feeling, singing better, and being more spontaneous and joyful.

What can assist you in your quest for healing your bodymind? Many modalities assist the bodymind healing. Bioenergetic Analysis, massage, Rolfing, osteopathic and chiropractic are among them. Modalities that work the emotional, mental and spiritual levels of existence are Homeopathy, Acupuncture and Core Energetics. Among them Core Energetics uniquely addresses the psychological, emotional, and spiritual directly through work with the bodymind.

Pamela Chubbuck, PhD, Certified in Bioenergetic Analysis and Core Energetics, is the director of Core Energetics South, which trains professionals in the Core Energetic Evolutionary Process. Pam is part of the senior international faculty of the Institute of Core Energetics. For more information visit: www.VitallyAlive.com.

Implementation and Outcomes of a School-Based Mental Health Small Group Program in a Metro Atlanta Middle School

Tamika Hibbert, EdD, LPC, NCC, CPCS, NCSC



Abstract: The article evaluated a school-based mental health program serving sixty middle school students in Metro Atlanta. Weekly small group sessions focused on stress, emotional regulation, and self-identity. Six-week surveys showed positive improvements in students' mental, social, and emotional well-being.

Keywords: school-based mental health, middle school counseling, small group intervention, emotional regulation, student wellness

School-based Mental Health Programs

Adolescent mental health concerns have continued to increase nationwide, highlighting the need for accessible, preventative interventions within school settings. Middle school students face developmental challenges related to identity formation, academic demands, and social relationships. Without appropriate support, these challenges may contribute to heightened stress, anxiety, and emotional dysregulation.

School-based mental health programs have been identified as effective mechanisms for addressing these concerns by integrating emotional learning within the educational environment. The present study described the implementation and evaluation of a Mental Health Support Specialist Small Group Program at a middle school in the Metro Atlanta area. The program aimed to enhance students' coping skills, emotional awareness, and self-concept through structured group counseling sessions.

Program Design and Leadership

The program was coordinated by a Licensed Professional Counselor, Dr. Tamika Hibbert, who served as the primary point of contact. Implementation occurred in partnership with an approved community-based organization. This collaboration ensured that services adhered to professional standards and incorporated evidence-based practices.

Program leadership emphasized ethical compliance, student confidentiality, and culturally responsive service delivery. Regular coordination meetings supported program fidelity and alignment with school goals.

Participants and Group Structure

Participants included sixty middle school students enrolled across grades six through eight. Each grade-level group consisted of up to twenty students. Student participation required documented parental or guardian consent.

Grouping by grade level supported developmental appropriateness and facilitated peer engagement. This structure promoted shared experiences and fostered supportive group dynamics.

Setting and Session Schedule

Sessions were conducted in a designated school-based space designed to ensure privacy, safety, and comfort. The physical environment supported open dialogue and collaborative learning.

Each group met once per week for 60 minutes during scheduled grade-level connections periods. Session time included structured instruction, guided discussion, experiential activities, and transition periods. This consistent schedule supported relationship building and skill reinforcement.

Recruitment and Enrollment Procedures

Recruitment was conducted through electronic communication with families. Parents and guardians received informational emails outlining program objectives, participation requirements, and documentation procedures. A secure Google submission system facilitated the collection of consent forms and related materials.

This approach promoted transparency and encouraged active family involvement in student mental health initiatives.

Intervention Framework and Curriculum

The intervention curriculum was delivered sequentially across three primary thematic areas:

Managing Stress and Anxiety

This phase focused on identifying stressors, developing relaxation techniques, and implementing adaptive coping strategies. Students practiced mindfulness, problem-solving, and cognitive reframing techniques.

Emotional Regulation

Students learned to recognize emotional triggers, interpret emotional responses, and apply self-regulation strategies. Instruction emphasized communication skills, impulse control, and conflict resolution.

Self-Identity and Expression

The final phase supported students' exploration of personal values, strengths, and goals. Activities encourage self-reflection, creative expression, and positive identity development.

The curriculum was designed to be developmentally responsive and culturally sensitive, promoting relevance and engagement.

Assessment and Evaluation Methods

Program evaluation relied on student self-report surveys administered at six-week intervals. Survey instruments assessed perceived changes in emotional awareness, stress management, social functioning, and self-confidence.

Data was analyzed to monitor trends in student outcomes and identify areas for program refinement. Qualitative feedback was also reviewed to capture student perspectives on program effectiveness.

Results

Analysis of survey data indicated overall improvements in students reported coping abilities, emotional regulation skills, and interpersonal relationships. Participants demonstrated increased awareness of stress triggers and greater confidence in applying learned strategies.

(continued on page 24)



ABA 101 for Mental Health Professionals

Tiffany Minter, APC, NCC
Affiliation: LACP Member, Douglasville

I recently had the opportunity to attend the CEU training *ABA 101*, led by Dr. Shaqwan Kunnnavatanaporn, which explored the pivotal role Applied Behavior Analysis (ABA) plays in supporting mental health care for individuals with

co-occurring conditions such as ADHD, depression, and anxiety. Dr. Kunnnavatanaporn illustrated ABA's positive influence on daily living skills, coping strategies, and social confidence. The training emphasized understanding the underlying functions of behavior and the specific needs those behaviors fulfill. By evaluating the events that precede and follow behaviors, clinicians are better equipped to identify what reinforces or diminishes them, leading to more effective intervention.

A notable takeaway from the session is that contemporary ABA prioritizes autonomy, choice, and practical relevance. The approach centers on teaching meaningful skills that are directly applicable to everyday life, expanding ABA's usefulness into areas such as smoking cessation, memory enhancement programs, and senior care.

The training also underscored the importance of motivation in shaping behavior. One key message was that positive reinforcement, rather than punishment, is the most effective strategy. Reinforcement not only encourages the development of new skills but also promotes lasting behavioral change beyond simply suppressing unwanted behaviors.

Overall, the training highlighted how ABA offers a clear, evidence-based framework for understanding and addressing client behaviors. This approach enriches the therapeutic process and lays the foundation for sustainable emotional and behavioral growth.

Tiffany Minter works with people from different cultures, backgrounds, and walks of life. She helps clients navigate anxiety and depression by focusing on what matters to them. Tiffany believes every story is different and approaches each session with curiosity and respect for individual experiences. Beyond her clinical work, she actively promotes mental health awareness and education in her community.

Live In-Person Trainings Accepted by the Licensing Board



National provider of internet based continuing education courses with several years of experience in developing content specifically for the nascent field of e-learning, utilizing advanced e-learning programming capabilities. For social workers in twenty-nine states and the District of Columbia under the National Provider program of NASW, and now for Licensed Professional Counselors and an approved provider for NBCC.

<http://www.YourCEUs.com>

(continued from page 23)

Implementation and Outcomes of a School-Based Mental Health Small Group Program in Atlanta Middle School

Qualitative responses suggested that students valued the supportive group environment and reported enhanced feelings of belonging and self-efficacy. These findings supported the program's intended outcomes of promoting resilience and emotional competence.

Discussion

The findings highlighted the effectiveness of structured, small group interventions within middle school settings. Consistent scheduling, professional leadership, and community collaboration contributed to positive student outcomes.

The grade-level grouping model supported developmental relevance, while family engagement strengthened program legitimacy and participation. The sequential curriculum allowed for cumulative skill development and sustained application.

Limitations included reliance on self-report measures and the absence of a control group. Future research may benefit from incorporating longitudinal designs and multi-informant assessments.

Implications for Practice

Results from this initiative supported the integration of small group mental health programming within school systems. Schools seeking to implement similar interventions should prioritize professional oversight, family communication, and systematic evaluation procedures.

Sustainable funding, staff training, and community partnerships were identified as critical factors for long-term program success.

Conclusion

The Mental Health Small Group Program demonstrated the potential of school-based interventions to enhance middle school students' emotional well-being and personal development. Through targeted instruction, consistent support, and collaborative leadership, the program contributed to improved coping skills, self-awareness, and social functioning.

These findings underscored the importance of embedding mental health services within educational settings to promote holistic student success.

Dr. Tamika Hibbert earned a Doctor of Education Degree from Argosy University in Atlanta, GA, an MS in Counseling from Brooklyn College in Brooklyn, NY, and a BA in Psychology from York College in Jamaica, NY. She's also a Counselor Educator and a Certified Professional School Counselor. She is the Founder/Director of Hibbert Counseling and Educational Services, Inc. in Metro Atlanta. She has been a member of LPCA since 2015 and resides in the Atlanta District.

Want to submit an article or ad to LPC Connection?

Submission deadlines are March 1st, June 1st, September 1st, and December 1st

To submit an article, go to www.lpcaga.org, click on Publications tab, then scroll down to Newsletter. To submit an ad, scroll down to Advertising.



Before the Words: Supporting Early Emotional Access

Veronica J. Motley, EdD, LPC, CPCS

Abstract: Many clients arrive in session feeling something deeply but unable to name it. This article explores why emotional access often begins in sensation and state before language, and how counselors can reduce performance pressure by offering permission,

structure, and alternative entry points that support earlier, safer emotional engagement across clinical and community settings.

Emotional Access

If you've practiced for any length of time, you've likely heard some version of: "I don't know how I feel. I just feel... off." Increasingly, I no longer hear this as avoidance. I hear it as a starting point.

Across counseling offices, schools, medical settings, community programs, and everyday life, many people are not lacking emotion—they are lacking safe, structured ways to access and communicate it. For many individuals, emotional awareness does not first arrive as language. It shows up as sensation, tone, energy, or a subtle internal shift.

Yet in fast-paced systems, we often ask for emotional explanation immediately.

Research in emotional granularity, trauma-informed care, and somatic integration continues to reinforce something important: emotional access often needs to precede articulation. When systems prioritize speed, clarity, and early categorization, clients can internalize the message that if they cannot name what they feel quickly, something is wrong—or that their experience doesn't count yet.

For individuals who have learned that emotional exposure can carry risk—culturally, medically, relationally, or historically—being asked to label emotion too quickly can feel less like support and more like pressure.

When we move rapidly toward precision, clients often provide what they believe is the "right answer." They may offer diagnostic language, insight statements, or terminology acquired from prior systems. It can look like engagement. But sometimes it is distance.

When we reduce the demand for immediate emotional accuracy, something shifts.

People often stop performing understanding and start noticing what is actually present. That noticing may begin as:

- **A body sensation**
- **A change in energy**
- **A sense of heaviness, tightness, buzzing, or flatness**
- **A simple awareness that something inside feels different**

When this early noticing is permitted without urgency, emotional language frequently emerges on its own—more accurate, more personal, and more usable—because it was not forced before it was ready.



Small Clinical Shifts That Support Early Emotional Access

These adjustments are simple, but clinically meaningful:

- **Normalize uncertainty**
"You don't have to have the right word yet."
- **Offer structured choice instead of open-ended demand**
Color, number scales, visual anchors, or state descriptors can reduce performance pressure.
- **Allow sensation and energy descriptions first**
Heavy, warm, restless, numb, buzzy, tight, steady.
- **Reduce the pressure to 'say it correctly'**
Emotional exploration is not a vocabulary test.

These shifts support regulation before explanation. When clients feel less pressure to immediately translate experience into language, they often engage faster, with greater honesty and less defensiveness.

In my clinical work developing structured emotional access approaches, including my *serenata*[™], I've witnessed what many LPCs have likely seen in their own rooms: when emotional safety is established first, clarity tends to follow. When people feel permitted to notice before they must explain, regulation and reflection tend to follow more organically.

As our profession expands further into integrated care, school-based services, community health partnerships, and interdisciplinary systems across Georgia, LPCs are uniquely positioned to influence how emotional access is supported at the earliest point of contact — not only in-depth work, but in brief encounters, intake spaces, and collaborative settings.

Sometimes the most therapeutic place to begin is not with the perfect question.

Sometimes it is simply permission.

You don't have to have the words yet.

Dr. Veronica J. Motley resides in LPCA's Northern District, and has been an LPCA member for twenty years. She is the founder of my serenata[™], a structured emotional access framework. Information about the framework is available at www.myserenata.com.

How to Effectively Navigate and Manage Your Therapeutic Superpower

Ya’Ron Brown, LPC, CPCS



Abstract: Therapists possess a powerful capacity for empathy and attunement but without intention and boundaries. That gift can become draining. This article explores how to manage your therapeutic superpower through self-awareness, regulation, and relational accountability so your presence remains effective, grounded, and sustainable over the long term.

Being Human is OK, too

If you’re a therapist, you already know this truth in your bones: people feel better just being around you. They exhale. They say things they’ve never said out loud. They calm down, open up, and trust you, sometimes without fully knowing why. You have an ability to attune, empathize, hold emotional complexity, and create a level of care and safety for others. It is powerful, and if unmanaged, it can quietly cost you your vitality, clarity, and sense of self.

These are your therapeutic superpowers and, at times, your vulnerabilities. Your work is to hone them intentionally and use them wisely without allowing them to consume you. It’s not just empathy. It’s your ability to feel with someone without immediately flinching, to sit in silence without rushing, to sense what’s happening underneath the words, and to notice the shift in someone’s shoulders before they know they’re shutting down. And if we’re being honest, this ability didn’t come out of nowhere.

For many of us, it was forged early by needing to read emotional rooms, manage moods, anticipate reactions, or keep relationships intact. What once helped us survive became the very thing that makes us good therapists. But here’s the part we don’t talk about enough—that same superpower can quietly exhaust you if you don’t manage it.

Most therapists don’t burn out because they don’t care. They burn out because they care automatically. You stay a few minutes longer. You think about the client after session. You replay the work in your head. You feel oddly responsible for whether it lands. Nothing dramatic, just a slow erosion of energy and self connection. Over time, the work can start to feel heavy, even when you love it. You may notice yourself feeling flat, irritable, or disconnected outside the therapy room, or catch a subtle resentment creeping in toward clients, the system, or even yourself. That’s not a failure of compassion. It’s a sign your superpower needs structure.

The goal isn’t to care less. It’s to care on purpose. There’s a difference between attunement that comes from grounded choice and attunement that comes from reflex. Reflexive attunement is fast, anxious, and body driven. It often shows up as urgency, the internal pressure that says, I need to help, fix, regulate, or reassure right now. Intentional attunement is slower. It comes from your regulated adult self and asks, what is actually being asked of me here? Is presence enough in this moment? What belongs to me and what doesn’t? That pause is everything.

Therapists are trained to track clients, but managing your superpower requires tracking yourself just as closely. Your body will tell you when you’re slipping into over functioning. You may notice a tight chest, shallow breathing, leaning forward without realizing it, or a subtle pull to do more. These sensations aren’t problems. They’re signals. They are invitations to slow down, ground yourself, and choose rather than react.

Many therapists struggle with boundaries because they confuse limits with distance. But good boundaries don’t shut people out; they create safety. Boundaries keep you resourced. They model self respect. They prevent resentment. They allow clients to grow their own capacity instead of borrowing yours. You are not meant to carry your clients. You are meant to walk with them, with your feet firmly on the ground.

This work also requires that you have spaces where you don’t have to be attuned, steady, or insightful. You need places where you can be messy, unsure, quiet, or held. Supervision, consultation, friendships, movement, and rest are not extras. They are what make your therapeutic power sustainable. You cannot pour from an endlessly generous nervous system without replenishment.

Your therapeutic superpower is real. It matters. It changes lives, and it was never meant to cost you your body, your joy, or your sense of self. When managed well, that same gift becomes steadier, cleaner, less draining, and more effective. You don’t lose your impact when you slow down. You deepen it. The real work is not learning how to hold more. It’s learning how to stay connected to yourself while you hold.

That’s not just good therapy. That’s a sustainable life. It means learning to live in a way where your capacity to care does not come at the expense of your own well being. It means your nervous system is not constantly on call, your empathy is not fused with responsibility, and your worth is not tied to how much you can carry for others. Sustainability looks like being fully present in the therapy room and still having energy for your family, your friendships, your creativity, and your own healing. It means you can sit with pain all day and still experience joy without guilt. It means your boundaries are not walls, but steady edges that protect your vitality. When you manage your therapeutic superpower wisely, you are not just extending your career. You are building a life where connection includes you too, where care flows both ways, and where the work you love does not slowly consume the person you are.

Ya’Ron Brown, LPC, CPCS, is a Georgia-based clinician and supervisor. He has been a member of LPCAGA since 2011 and a Certified Professional Counselor Supervisor (CPCS) since 2014. He currently serves as Co-Chair of the Supervision Committee and resides in the Northern District, where he remains actively engaged in advancing the counseling profession.





From Stigma to Strength: Why Mental Health Matters to Us All

Ugochi Ebereonwu, LPC

For generations, mental health has been whispered in hushed tones, hidden behind closed doors, and cloaked in stigma. Yet the truth is undeniable: mental health is

not a private issue—it is a public one. It touches families, workplaces, schools, and communities. Whether we acknowledge it or not, mental health shapes how we live, love, and work.

Today, the conversation is shifting. Around the world—and here in the U.S. and across Africa—people are breaking the silence, transforming stigma into strength, and recognizing that mental health matters to everyone.

The Weight of Stigma

Stigma is more than just a word; it's a barrier. It prevents people from seeking help, isolates families, and fuels misunderstanding. Consider the young student who hides her anxiety because she fears being labeled "weak," or the father who struggles with depression but avoids treatment because he worries about being judged.

Stigma doesn't just silence—it harms. It delays care, worsens outcomes, and perpetuates cycles of suffering.

Quote to Remember

"Mental health is not a weakness—it is a vital part of being human."

Why Mental Health Matters to Us All

- **Health is holistic**
Mental health is inseparable from physical health. Stress, depression, and trauma affect the body as much as the mind.
- **Families feel it**
When one person struggles, the ripple effects touch parents, children, and siblings.
- **Workplaces depend on it**
Productivity, creativity, and teamwork thrive when employees are mentally well.
- **Communities grow stronger**
Societies that prioritize mental health see gains in safety, wellbeing, and opportunity, and reductions in crime, substance use, and poverty.

Conclusion

Mental health matters because people matter. The journey from stigma to strength is about reclaiming dignity, building resilience, and ensuring no one suffers in silence. When we normalize care, invest in services, and support one another, we create a future where mental health is not hidden, but honored—because it truly matters to us all.

Ugochi Ebereonwu provides community-based mental health services. She supports individuals navigating life stressors, emotional challenges, and psychosocial barriers through a clientcentered, strengths-based approach that fosters emotional regulation, resilience, and overall stability. Ugochi has been an active member of LPCA of GA since November 2025 and remains committed to ethical practice and ongoing professional development.

From Advocacy to Public Service: A New Chapter of Leadership

Keisha Buchanan, EdD, LPC, CPCS, CCTP

For many years, my work in the counseling profession has been grounded in one mission—advocacy, service, and strengthening our communities through mental health leadership. Through my involvement with LPCA of GA, I have had the privilege of working alongside many of you to advance our profession, advocate for policy changes, and ensure that counselors have a voice in the decisions that impact the people we serve.

Today, I am honored to share that I have officially qualified as a candidate for **Henry County District 3 Commissioner** in the upcoming **May 19th primary election!**

My leadership journey within LPCA of GA has prepared me for this next step in public service. As former LPCA President and Immediate Past President, I have worked closely with policymakers, community stakeholders, and professionals across Georgia to advocate for mental health access, professional standards, and responsible decision-making that benefits our communities. Those same principles will guide my work if elected to serve the residents of Henry County.

Carrying Advocacy into Public Leadership

The counseling profession is built on the values of integrity, service, compassion, and accountability. These values do not stop at the therapy room—they extend into the communities where we live, work, and raise our families.

Public service is ultimately about people. The counseling profession has taught me the importance of listening, collaboration, and thoughtful leadership—principles I will carry forward as I seek to serve the residents of Henry County.

Continuing the Work of Advocacy

While this campaign represents a new chapter, my commitment to the counseling profession remains strong. The work we do as counselors, advocating for people, strengthening systems, and improving lives, translates naturally into public leadership.

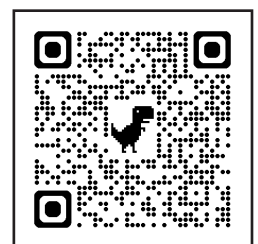
I am grateful for the many colleagues and professionals who have encouraged me along this journey and who continue to support efforts that elevate both our profession and our communities.

Learn More or Get Involved

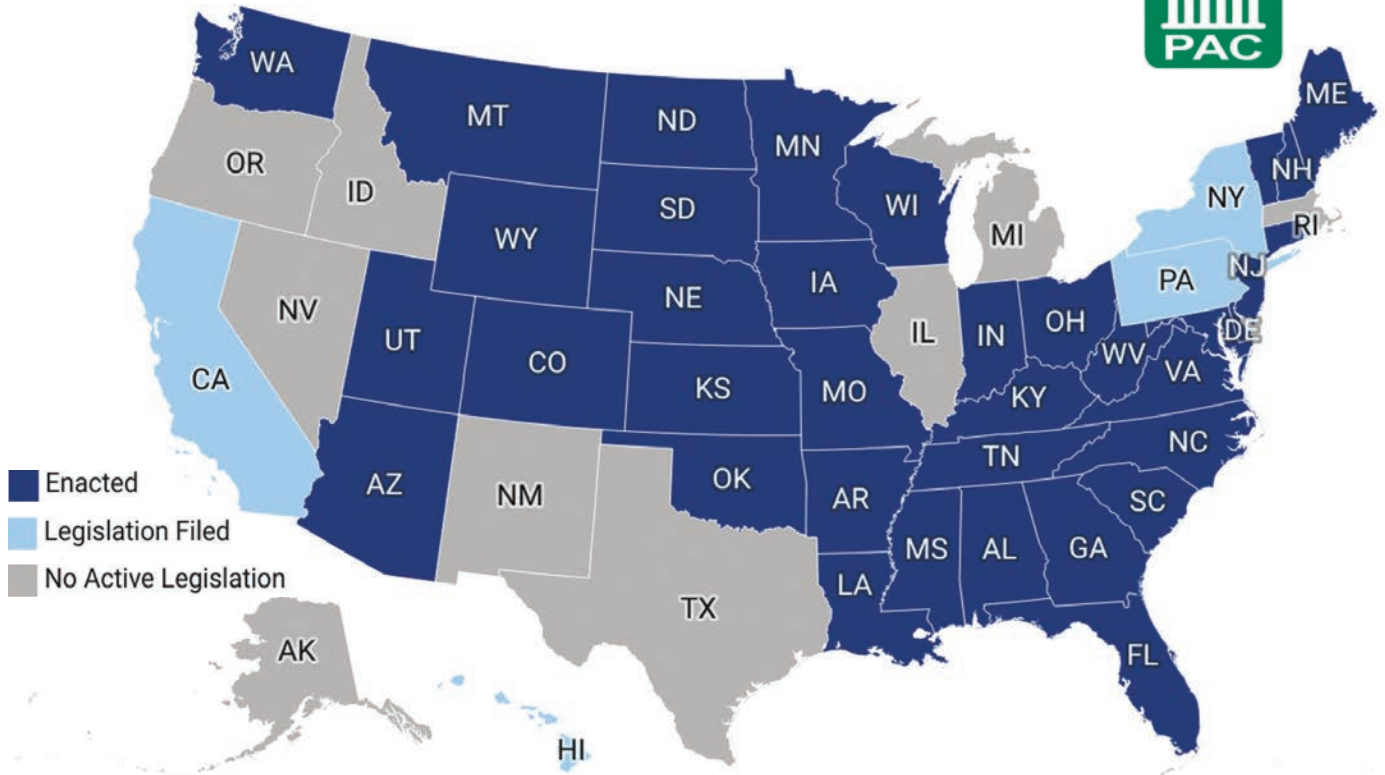
I invite you to learn more about the campaign and ways to support the effort. Support can come in many forms: sharing ideas, volunteering, or contributing to the campaign.

For more information go to:

www.VoteForKeisha.com



Counseling Compact Act



HOPE IS

1,600+ specialists focused on curing cancer

At City of Hope®, we turn hope into reality by providing personalized, world-class treatments for all stages of cancer. With leading-edge research, we deliver innovations from lab to patient with lifesaving speed, pioneering technologies that have led to cancer treatments used worldwide and finding new ways to give hope to those who need it most. City of Hope is now serving patients throughout the Southeast, with a location in South Metro Atlanta.



Appointments available in as little as 24 hours.
cancercenter.com | 855.939.HOPE



Dr. Beomjune B. Kim
 Head and Neck and Microvascular
 Reconstructive Surgeon

Dr. Kristin Higgins
 Chief Clinical Officer

Dr. Priya Vishnubhotla
 Chief, Medical Oncology



TALK
FORWARD



Clinical Supervision for LPCs

Bryan Stephens, MA, MBA, LPC, CPCS, is offering individual supervision and group supervision (as numbers allow). With over 30 years of experience in the field, Bryan brings a wealth of knowledge to focus on the development of the therapist while ensuring the well-being of the client. He provides a supportive space to practice, make mistakes and grow.

Talk Forward Counseling

www.talkforwardcounseling.com

Call, text or email:

404-969-5247

Bryan@talkforward.com



***Liability insurance
built around you
year after year***

Exclusively recommended by LPCA of GA for over 20 years.

cphins.com/LPCA-GA



Training you'll actually enjoy

Our goal is to make continuing education enjoyable, practical refreshing, and fun. But also chock full of down-to-earth tips you can actually use regularly in your counseling practice.



Carolyn Ramp Consulting offers Synchronous Workshops for Core and Related Hours of Continuing Education for LPCs, LMFTs, and LCSWs in a variety of topics.



Ethics



Personality Disorders



Clinical Supervision

Contact us.

www.CarolynRamp.com

cramconsulting@gmail.com

937-403-0909





LIGHTHOUSE *for* FAMILIES

A Ministry of The Methodist Home for Children and Youth

SCAN ME



Providing high quality community counseling services for children, individuals, and families in Macon and Columbus. For more information about the services offered, scan the QR Code to visit our website.

Macon: (478) 464-3001

Columbus: (706) 596-5129

ETHICS DEMYSTIFIED™

Maintain your license. Keep your license.

Eric Groh, LPC
A Full Range of Licensing Services
for Mental Health Counselors

Register now at concentrateonyou.net

ethicsdemystified.com
404-985-6785

Eric Groh, LPC CPCS ACS ICGC II
Supervision
CE Workshops
Dissociative Disorders

"This workshop answered questions I've had about our industry for 20 years."
- Richard Blankenship

I wish I had taken this workshop when I was initially licensed." - Tamara Ashley

"Highly qualified and knowledgeable presenter..." - Faith Arkel

"The least torturous ethics workshop I have attended" - Jaclyn Devore

"Extremely valuable information for our new supervision program."
- Angela Wheelus

Scan for 10% off promo code.



Eric Groh LPC has been approved by NBCC as an Approved Continuing Educational Provider, ACEP No. 6921. Programs that do not qualify for NBCC credit are clearly identified. Eric Groh LPC is solely responsible for all aspects of the programs.



1080 Holcomb Bridge Road, Suite 300, Roswell, GA 30076
<http://www.LPCAGA.org>

LPCA of GA 38th Annual Convention & Regional Conference

*Many Trees Make a Forest...
Unity in Counseling*



**Connect with
Colleagues...**

**Collect
CEs!**

May 11–15, 2026

**Crowne Plaza
Atlanta Perimeter at Ravinia
Atlanta, Georgia**