



# GUIDELINES

Vol. 13, No. 2

OHIO ASSOCIATION FOR COUNSELING AND DEVELOPMENT

January, 1986

## ALL-OHIO IS A SMASHING SUCCESS

The All-Ohio Conference drew over 1,000 counselors from various counseling settings throughout the state. Evaluations from participants indicate the keynote speaker, Jessie Potter, and the workshop speakers were very well received! Attendees singled out the diversity of programs as one of the main strengths of the convention. Demonstrating an interest in documenting professional growth, over 500 participants took advantage of securing continuing education units for the sessions attended.

Susan Sears recognized the service of other outstanding profes-

sionals by awarding three President's Awards. The first awards went to the counselor members of the first Counselor and Social Workers Board for their outstanding service to counseling in Ohio: Jay Matthews, Gerry Blomgren, and Bill Nemeč. Also, Youngstown State University's Counselor Education Program was recognized as the first program in Ohio to be accredited by the national AACD accrediting body, and Charlotte Huddle received an award as Past-President of OACD.



Bill Nemeč

Jay Matthews



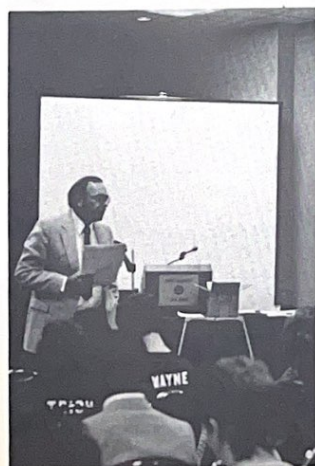
Sears at Opening Session



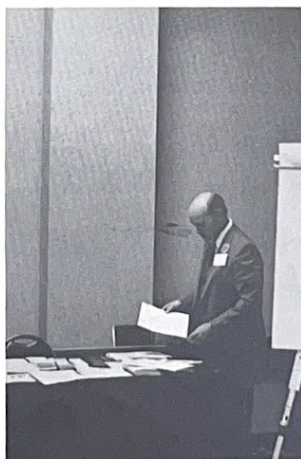
Jessie Potter Speaking



Riccio in pre-convention workshop



Presenters in small workshop sessions



### OACD Award Recipients

OACD recognized the contributions of several individuals during the award ceremony. These individuals and the awards they received are described below:

- The Meritorious Service Award went to Helen Sutton for her work in establishing the current format and quality of the OACD newsletter, Guidelines.

- The Herman J. Peters Award was presented to Jim Glendening for his overall service to the counseling profession and his work on licensure and other legislative issues.

- Jim Herrick received the Chuck Weaver Award for his service to counseling associations, particularly his work as OACD treasurer for several years.

- OACD's You Done Good Award was presented to Alyce Jenkins for her dedication and leadership to the counseling profession as a member of the Counselor and Social Worker Board.



Alyce Jenkins



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## from the President



Susan Sears

### COUNSELOR LICENSURE UP-DATE

The Counselor and Social Worker Board has received approximately 21,000 applications for counselor and social worker licenses. We were surprised by the large number since we were expecting 12 to 13,000. Currently, the staff at the Board office is acknowledging the receipt of each application. Just opening the envelopes, logging the checks, and transferring the checks to the State Treasurer's office has been a major and time-consuming task.

The Counselor Professional Standards Committee comprised of the counselor members of the Board will review each application so it will take considerable time to process the large number we have received. Licenses will be granted in blocks rather than day by day so the renewal of licenses two years from now can be handled in an orderly manner.

Funds continue to be a problem for the Board. Postage and printing monies have already been exhausted. Further, the three member staff is not adequate to deal with the demands of 21,000 applications. As chair of the Board, I will be asking the State of Ohio Controlling Board to consider an additional budget request for staff and for computer services. (Imagine trying to complete the task ahead without computers.) A letter to the Governor's office urging additional funds for the CSWB would help us in our effort to convince the Controlling Board that we need dollars.

PLEASE BE PATIENT. We are working as diligently as we can. Remember, the Board serves only part-time. We have been meeting every other weekend, and are continuing to do so, but this process will take time.

Susan Sears

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## FEELINGS: SYMPTOMS OR CAUSES?

Have you ever heard a client described as a "person who has a great deal of anger under his/her behavior?" It is often recommended that the counselor must therefore "get to the anger" before any progress can occur. The feelings, in other words, are seen to be the root of the problem or the cause.

There is, however, another way to view the interplay of feelings and behavior. It is useful to redefine behavior as having 3 aspects: doing, thinking and feeling.

All behaviors are, thus, composed of three elements, though one or more might be prominent at any given time. Moreover, all behaviors have a purpose. It serves to accomplish something; to maneuver or mold our environment to fulfill specific wants and general needs.

Consequently, depression, anger, resentment, guilt, self-pity, and other feelings which are often viewed as "the underlying problem", can be seen as symptoms of another, deeper frustration; unmet wants and needs. For instance, anger is behavior whose purpose is to gain power. When a child throws a temper tantrum upsetting the parents, the child has discovered a very effective way to control others.

Similarly, depression is a way to ask for help. It serves to increase the need for involvement with people. It also serves to maintain one's self-respect when an effective "doing behavior" is not available. For instance, to a person who cannot find a job, it appears logical to become depressed. Though depression is not logical for a non-depressed person, it is often the only behavior accessible to a desperate client.

The practical implication for the re-evaluation of these behaviors is three-fold:

1. If a counselor is to get to the "root of the problem" it is necessary to sort out the unmet wants; what the client wants in his/her life that he/she is not getting . . . at home, from friends, in school, and most especially what the client wants or expects from himself/herself??
2. It is useful to get beneath the behaviors and the wants to the level of general needs. Thus, a counselor can explore the client's unmet needs for Belonging, Power, Enjoyment, and Independence. And, so, when a person is angry or depressed, the counselor should further help him/her examine how he/she is attempting to fulfill the above needs.
3. It is also helpful to discuss the "doing" component of the behavior. A client more easily recognizes that "doing" is controllable, whereas managing feelings is a far more elusive goal. For instance, a depressed person is very reluctant to see the feeling as a behavior designed to achieve wants and fulfill needs. On the other hand, clients more readily admit that sleeping excessively, talking back, screaming, fighting, etc., are behaviors and are within their control.

In summary, feelings can be seen as behaviors which are symptoms of frustrated wants and unmet needs of Belonging, Power, Enjoyment, or Independence. Feelings are thus seen as parallel to "doing" behaviors rather than the underlying problem.

Robert E. Wubbolding, Ed.D. is a Professor of Counseling at Xavier University, Cincinnati, Ohio

## TRUST IS THE KEY TO A GOOD MARRIAGE

When it comes to choosing a mate, the old rule "like marries like" holds true, especially where intelligence and personality are concerned.

But research conducted by psychologist Richard Lewak also reveals that the similarity or difference in a couple's IQ score has little to do with marital happiness. It's the absence of trust that spells marital trouble.

Lewak, on staff at the Del Mar (Calif.) Psychiatric Clinic, gave 81 married couples — half in marriage therapy — standard tests to measure marital happiness, intelligence and personality.

He found that people's IQs tended "to correlate very highly" with their mates', and that they "more or less had the same personality."

This is probably because married couples often attend the same type of schools and colleges and

come from the same socioeconomic backgrounds, Lewak says.

But matching intelligence didn't affect happiness in the marriage one way or the other. Lewak suspects that intelligence plays such a small role in actual marital satisfaction because people "spend most of their lives dealing with basic relationship issues. They don't get a chance to discuss issues that require a lot of intelligence."

Trust, however, is essential to marital happiness — without it, people have difficulty being loyal, dependable and honest, Lewak says.

"In a long-term relationship, it's important to be able to tolerate frustration . . . and stick to the rules. When either partner can't follow rules, it's bad for marriage."

Lewak reported his research in a recent issue of *The Journal of Personality and Individual Differences*.

## from the Editor



Maryedna Fox

Hi! I hope you all had a restful, enjoyable holiday.

I was delighted to see and talk with many of you at the All-Ohio. For those of you with whom I discussed articles for *Guidelines*, I'm looking forward to some new and informative material.

My appreciation to those who submitted material for this issue: James Glendening, Rachilla Workman, Robert Wubbolding and Jan Gill-Wigal.

I hope you approve and will enjoy getting to know your OACD board members better through the new feature, OACD Close-Ups. This month's subjects, Doris Coy and Susan Byer get an A+ and our "thanks" for their cooperation in filling out the questionnaire.

Maryedna Fox

## UPCOMING CONFERENCES

### Opportunities for Professional Growth

If you need to improve your skills, plan to attend OACD's Series of Winter Workshops.

- Reflection and Renewal  
Feb. 1, 1986  
Lenox Inn, Columbus, O.
- Human Sexuality  
Feb. 15, 1986  
Lenox Inn, Columbus, O.
- Eating Disorders  
March 1, 1986  
Lenox Inn, Columbus, O.

\*Each workshop limited to 30 participants, will be scheduled from 9:00 to 3:00 with a registration fee of \$30.00.

OACD members will receive registration materials in the mail. Non-members should contact Chikako Cox, 356 Arps Hall, The Ohio State University, 1945 North High Street, Columbus, OH 43210.

## OACD SPRING CONFERENCE

May 2-3, 1986  
Friday afternoon through Saturday

at

Fawcett Center for Tomorrow  
The Ohio State University  
2900 Olentangy River Rd.  
Columbus, Ohio

Celebrate Spring!  
Expand Professional Network!  
Upgrade Counseling Skills!  
See You There!

Watch your state association newsletter for further information, or write to Chikako Cox, Conference Committee Chair, Department of Human Services Education, 356 Arps Hall, 1945 North High St., Columbus, OH 43210.



## OACD CLOSE-UPS

Susan M. Byer,  
Counselor, Dublin Middle School  
OACD Secretary

When I get depressed I usually go: *for a long walk or to the library.*

Working on: Professionally and personally: *My professional plans include getting a certificate in supervision. My personal plans include easing off of my responsibilities as a single parent now that both of my children will be away at college and enjoying some of my greatest pleasures — reading, writing, theatre, and music. I hope to find joy in developing new interests and in overcoming the lack of time just for me.*

My most rewarding experience: *Being a parent.*

My most embarrassing moment: *I opened my mouth to say something to a student and seemingly from nowhere a huge burp came forth. (The student still recalls it.)*

Pet peeve: *People who tell me to "have a nice day".*

Favorite cereal: *Shredded Wheat.*

If I could have dinner with anyone in history, I'd choose: *Mary, Queen of Scots.*

The best advice I ever got: *Buy low, sell high!*

The worst advice I ever got: *N.C.*

If I could choose to take counseling courses from anyone in the world, I'd choose: *Dr. Carl Whitaker.*

When I was in high school counselors were: *Non-existent. The Dean of Women made a stab at it once a year!!*

Favorite counseling task: *Parent conferences and small group counseling, especially divorce groups.*

To me, a perfect evening is: *Being with someone I like a lot, having dinner, going to a concert or just enjoying some wine and music at home. It doesn't take much to make me happy!*

Favorite wine: *Soave and Berinjer.*

Behind my back, people say I: *am such a "together" person!*

Favorite color: *Taupe.*

When no one is looking, I: *fall asleep on the couch.*

Life has taught me that: *Life has a sprinkling of beginnings and middles and ends all the way through, not in the right order.*

The last good movie I saw was: *A Soldier's Story.*

The last good book I read was: *Disturbances In The Field and Do Lord Remember Me.*

My parents always told me: *about the Depression.*

The worst thing about OACD: *Taking minutes at an all-day meeting.*

The best thing about OACD: *The All-Ohio Conference and other opportunities for professional stimulation.*

GUIDELINES would like for readers and members to know the OACD Board better. The Close-Up questionnaires below should provide a little information and fun.

Doris Rhea Coy  
Counselor, Whitehall Yearling High School, Whitehall, Ohio  
OACD Treasurer

When I get depressed I usually go: *to the refrigerator.*

Working on: Professionally and personally: *Dissertation and my 1000th diet.*

Secret fear: *That I might get cancer.*

My most rewarding experience: *My trip to Sam Sharpe Teacher's College in Jamaica.*

My most embarrassing moment: *when I lost my slip at a formal affair.*

Favorite pet: *My dog "Mimi".*

Pet peeve: *People who are late, people who tell untruths and manipulators.*

Favorite cereal: *Hot oatmeal with raisins.*

If I could have dinner with anyone in history, I'd choose: *Albert Einstein.*

The best advice I ever got: *Don't get married until you're 30.*

The worst advice I ever got: *Let's get married and then you can finish college.*

If I could choose to take counseling courses from anyone in the world, I'd choose: *Susan Sears.*

When I was in high school counselors were: *an up and coming occupation.*

Favorite counseling task: *Emphasis on preventive and developmental individual and group counseling.*

To me, a perfect evening is: *Jamaica, wine, and a friend.*

Favorite wine: *Reunite*

Behind my back, people say I: *aggressive and overweight.*

Favorite color: *Blue.*

When no one is looking I: *take off my shoes.*

Life has taught me that: *It's who you know; not what you know.*

The last good movie I saw was: *Cocoon.*

The last good book I read was: *Smart Women.*

My parents always told me: *to be kind, caring.*

The worst thing about OACD: *Its structure - the way the organization is set up.*

The best thing about OACD: *Meeting people - accomplishing credibility for counselors.*

## STRESS REDUCTION ALTERNATIVES FOR GRADUATE STUDENTS

Rachilla Workman  
Graduate Assistant  
Youngstown State University

There are many stressors associated with being a graduate student. The campus alone can produce anxiety whether the student is returning to school after a few years, transferring to a new campus, or beginning a new program. In addition to orienting to the campus environment, maintenance of grades is very important, particularly if high grades are needed to receive a scholarship, grant, or assistantship/fellowship position. The graduate student may be economically dependent on such aid to continue the extended schooling or may be required to work outside the college campus to support himself/herself. Compound these issues with a relationship, marriage, and family ties and the variety of roles and demands become quite evident. It may seem everyone expects something yet there is little time for personal issues.

One personal issue which should not be overlooked is dealing with the various stressors in life and practicing stress reduction techniques. Though the college setting tends to produce much anxiety and demands, it also provides way to alleviate stress if the student takes the initiative to find what is available and is creative in developing new techniques. Some suggestions follow:

1. Since most of the time at school is spent in class with others, the availability of forming friendship networks is quite good. Activities may be very casual such as talking before and after class, going out for pizza after tests, or talking while walking with each other to cars, but they can be of significant benefit.

2. Another excellent stress reducer is exercise. Any campus has an ample supply of physical facilities including a weight room, gym, track, swimming pool, and courts for tennis or racquetball. The facilities are often available at various times of the day for students to take advantage of. If possible, an intramural team may be formed or the graduate student

could enroll in an instructed activities class, such as aerobics.

3. A technique often available is the formation of support groups. Counseling programs such as the one at Youngstown State University require the student to complete a group counseling practicum. One group which worked together during the practicum choose to continue after the class ended as a support group. This could be possible in other classes or groups as well. The graduate assistants at Youngstown State have formed a self-hypnosis and relaxation group

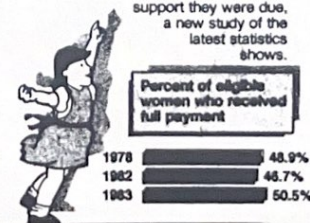
under the direction of an instructor trained in these areas who has volunteered his time.

4. Finally, the college itself may support a counseling center which provides individual counseling free of charge to students.

With the availability of such facilities and groups, the prospect of controlling and managing stress is very favorable. Stress can be damaging to a person's health and functioning, therefore, taking advantage of stress reduction options available to graduate students is a wise decision.

### Child support

Only half the eligible women in 1983 received the full court-ordered child support they were due, a new study of the latest statistics shows.



Source: U.S. Department of Commerce



## DIVISION NEWS

### OACD

The 1985 All-Ohio Guidance Conference was the site of the Ohio Career Development Association's annual business meeting. Items for discussion included the possibility of raising dues from \$3.00 to \$5.00. Also suggested for consideration was a by-laws change which would establish an associate membership for those who wish to join OCDA and not OACD.

Daisy Takacs reported that the National Career Development Association plans to add regional representation in an effort to improve communication. One counselor from each region and two at-large members will be elected to strengthen the organization. Marlene Purdy presented a program on the Career Information Review Service. Occupational literature is reviewed by several reviewers according to NCDA guidelines. If the literature is recommended by several reviewers, the article will appear in publication. Copies of these rating forms are available from Marlene Purdy at Vanguard Vocational Center, 1306 Cedar St., Fremont, OH 43420.

All members are encouraged to complete the OCDA questionnaire which was enclosed with the October newsletter. Information from the questionnaire will be utilized in feature articles submitted to the OACD *Guidelines*. Joan Foucht, OCDA Secretary, will have her "Adopt-a-School" program featured in the next OSCA newsletter.

### OMHCA

The OMHCA Board wishes to thank all those in OACD who worked so hard to make such a successful All Ohio Conference possible. We heard many encouraging and positive statements from our members concerning the offerings and emphasis in the various counseling areas. Keep up the diversification; it makes us all feel a part of the counseling arena.

We welcome two new OMHCA Executive Board Members: Joyce Dangle as Conference Chair and George Schultz as Public Relations Chair.

We are currently engaged in readying a Cruise down to Deer Creek State Park, Mt. Sterling, Ohio, in conjunction with the Central Region States. Embarkation is Friday evening, February 21, with disembarkation Sunday noon, February 23. There will be a Welcome Aboard South Seas party Friday evening. There will also be swimming, sauna, jacuzzi, fellowship and more. Along with the fun will be the opportunity to learn about what's happening on the Counselor Beach Head and to plan strategies for the Third Party Battle. This and other counselor troubled waters will be charted by several national OMHCA leaders. If you'd like to join us and are not a current member of OMHCA, give Retta Trautman a call at 419-381-3521. All reservations must be in by January 21, 1986.

## OHIO DEPARTMENT OF EDUCATION CHANGES CERTIFICATION STANDARDS

School counselors will now have to have three years of satisfactory teaching experience under a standard certificate and a master's degree with thirty semester hours of graduate course work in counseling and guidance with practical application to programs and practices in schools. (In the past, counselors only needed one year of satisfactory teaching experience). The Ohio Association for Counseling and Development opposed the change from one to three years and could receive no explanation from the Ohio Department of Education on why the change was needed.

Another change in the standards that may, over time, have an effect on school counselors is the addition of a "school social worker" category in the Provisional Pupil Personnel Certification area. The Provisional Pupil Personnel Certificate is valid for working with children in school districts in the area of specialization listed on the certificate. An individual with one year of social work experience under a current license issued by the Ohio Counselor and Social Worker Board and a master's degree with twenty semester hours of graduate course work well distributed over the areas of education and psychology of normal and exceptional children, pupil personnel services, and counseling with practical application to programs and practices in schools will be eligible for this certificate. It is important to note that school social workers are not required to have teaching experience while counselors are now required to have three years. When Dr. Robert Bowers of the Ohio Department of Education was asked about the reason for the discrepancy between the requirements, he responded that the Certification Standards Commission had made the decision.

Several OACD officers and members expressed their displeasure with the above changes to both Ohio Department staff and, in testimony, to the Ohio Board of Education. Unfortunately, the protests did not result in any alterations in the final document passed in late December.

### OACES

OACES will be holding its winter meeting Friday, February 20, at the Lenox Inn in Columbus.

The main topic for discussion will be curriculum issues in the Counselor Education programs within Ohio, particularly Masters Degree programs, which are not presently training people for clinical endorsement.

Also to be presented is a program on supervisors and supervisory issues that arise in both clinical training and practice.

## LEGISLATIVE UPDATE WHY CERTIFICATION?

by James Glendening

At present, House Bill 593 is stalled in the House Insurance Sub-Committee. As reported in the October issue of *Guidelines*, House Bill 593, introduced by Representative Jane Campbell of Cleveland, would mandate equal coverage for the treatment of alcoholism, drug abuse, and mental illness in all health insurance and health-care delivery plans in Ohio. The opposition to the bill — mainly insurance companies — do not like mandated requirements and claims the bill does not have the support of consumers. In addition, it claims the major beneficiaries of the bill would be the providers (clinical counselors, social workers, psychologists, and psychiatrists) who would receive insurance reimbursement for the mental health services they provide.

Currently, letters to Rep. Jane Campbell, Ohio House of Representatives, Statehouse, Columbus, Ohio 43215 should (1) thank her for her support of the bill and (2) urge her to continue the inclusion of clinical counselors in the bill would be timely and helpful.

## FOR YOUR INFORMATION

### House Insurance Sub-Committee

1. Mike Stinziano (D) District 30, Chair  
314 King Avenue  
Columbus, Ohio 43201  
(614) 466-5064
2. John D. Thompson, Jr. (D) District 16  
15611 Stockbridge Avenue  
Cleveland, Ohio 44128  
(216) 921-5250
3. Marc D. Guthrie (D) District 67  
228 Sandy Lane, SE  
Newark, Ohio 43055  
(614) 466-4361
4. Robert D. Nettle (D) District 41  
31-31st Street, SW  
Barberton, Ohio 44203  
(216) 825-4514
5. William Batchelder (R) District 4  
P.O. Box 394  
Medina, Ohio 44258  
(216) 725-6666
6. Dale N. Van Vyven (R) District 27  
4799 Fields-Ertel Road  
Sharonville, Ohio 45241  
(513) 563-2541
7. Robert H. Doyle (R) District 65  
3355 Dayton-Xenia Road  
Beavercreek, Ohio 45432  
(513) 429-5600

Certification as a Nationally Certified Counselor (NCC) and/or a Certified Clinical Mental Health Counselor (CCMHC) offers professional credibility. It places you before your colleagues and the public as a competent professional — an advantage over those persons who could not or would not acquire such credentials. Qualifications may be identical. Thus "credibility" issue may be demonstrated in more concrete terms by referring to both the NCC and the CCMHC.

The NCC is primarily a basic generic competency certification for all counselors. The CCMHC, however, is specifically for Mental Health Counselors that specialize in the diagnosis and treatment of mental and emotional disorders.

The boards for both the NCC and CCMHC respectively publish what is called a "national registry". Each of these two registries are separate books listing all those persons who are certified as either an NCC or CCMHC respectively. Copies of both the NCC and the CCMHC registries are sent to persons listed within, and are also sent to governmental agencies, libraries and so forth. In this way, the books may be used by agencies to refer patients to only those qualified Counselors listed, and also permits the public to directly identify a qualified helping professional within a particular geographic area.

The CCMHC registry book is also provided to insurance companies. Thus, an insurance company can use the CCMHC registry to determine whether an insurance claim should be paid to a Counselor. That is, if a Counselor is qualified as a CCMHC, and is included within the CCMHC registry, the likelihood of that Counselor being paid by the insurance company may be greatly increased over a Counselor that is not so included.

Thus, in addition to greater professional credibility, and potentially more referrals, a certification may actually translate into income by means of facilitating payments from insurance companies. Persons that possess the CCMHC in New York or parts of Pennsylvania (just to name two states) have for some time been able to acquire payments from certain insurance companies that provide mental health related benefits. Also, legislation/litigation is currently under way to facilitate the CCMHC's recognition for CHAMPUS payments and for Social Security benefits covering mental health services.

## Schedule- OACD Board Meetings

February 15, 9 - 11:00 a.m., . . . . . Lenox Inn, Columbus, OH  
(Breakfast included)

April 25, 9 - 11:30 a.m., . . . . . Lenox Inn, Columbus, OH  
(Breakfast included)



## MENTAL HEALTH CLOSE-UP: SUICIDE

The National Center for Health Statistics reports that suicides among 15 to 24 year-olds have more than quadrupled — from 1,239 in 1960 to 5,239 in 1980 — and the rate per 100,000 has jumped from 5.2 in 1960 to 12.3 in 1980. Experts say most teen suicides can be prevented if someone — a friend, parent, teacher, counselor — recognizes the plea for help that almost every distressed teen makes before committing that last step. Therefore, it is important for other teens and significant adults to learn the signs that can warn of a person's vulnerability to suicide. These warning signs can be divided into three categories.

**VERBAL:** It is a myth that people who talk about suicide do not do it. Statements such as "I wish I'd never been born" or "I wish I could go to sleep and never wake up" should be taken as definite distress signals.

**BEHAVIORAL:** Any change in eating or sleeping habits or a change in energy level — sudden agitation or sudden lethargy — is a sign of trouble. A teen thinking suicide might start giving away prized possessions or taking risks, such as driving recklessly. Counselors especially should be alert for a drop in the level of performance at school.

**SITUATIONAL:** Behind most suicides is a loss. It might be the loss of a friend or a parent, or it might be loss of self-esteem. Troubled teens often feel isolated.

Dr. Susan Blumenthal, Director of Suicides Research at the National Institute of Mental Health, says a person who shows four of the following symptoms daily for longer than two weeks needs professional help:

- Change in appetite
- Change in sleep pattern
- Decreased concentration
- Decreased interest in activities that were a source of pleasure.
- Sudden agitation or sudden slowing down in level of activity
- Feelings of hopelessness, worthlessness and self-reproach
- Inappropriate or excessive guilt
- Suicidal thought

What can you do if you recognize these warning signals? The following tips may help guide you.

- Address the subject of suicide directly. "Are you feeling as if life is not worth living?" or "Are you thinking about killing yourself?" This directness may give permission to the troubled person to open up to you and discuss his/her concerns.
- In a crisis, do not leave the person alone.
- Don't try to win an argument about suicide, but do give emotional support for living. Give assurance that depression won't last and stress that suicide is irreversible.

If you believe you are competent to counsel suicidal clients, then, of course, you proceed accordingly. If not, refer to a qualified counselor as soon as possible.

## KIDS NEED TO LAUGH AT LIFE

The highest-achieving, most emotionally healthy children have the best sense of humor.

And the girls even turn humor into a tough shield that protects them under stress, new research suggests.

Past studies have found that adults with a keen sense of humor are less shaken by stressful events. But this is the first time psychologists have explored the link between humor and personal competence and stress in youngsters.

Psychologist Ann Masten of the University of Minnesota in Minneapolis studied 169 children in grades four to eight. Using 30 completed Ziggy cartoons and another 15 cartoons lacking punch lines or captions, she measured both humor appreciation and the ability to create funny lines. Masten had the kids explain the cartoon humor to check their comprehension.

The children also took achievement tests. Then teachers and peers rated their emotional and social adjustment.

A life events questionnaire asked the youngsters how many recent stressful experiences they's had, such as moving to a new school, parents getting divorced, the loss of a friendship or death of a pet. The top children in intelligence and social skills had the best sense of humor, reports Masten. Creative humor (providing that punch line or caption) showed the strongest link to overall competence.

"Good humor takes quite a bit of social know-how and verbal ability," says Masten. "A lot of predicaments that have to do with humor are social, so you have to understand social situations and know how to express yourself to be humorous."

## NEW INTEREST IN HELPING CHILDREN OF ALCOHOLICS

Adult alcoholics have received increased attention over the last decade. Recently, more interest is being expressed in the effects on children who grew up in alcoholic homes. The National Association of Children of Alcoholics has developed a list of characteristics that children who grew up in alcoholic households seem to share. These adult children of alcoholics seem to:

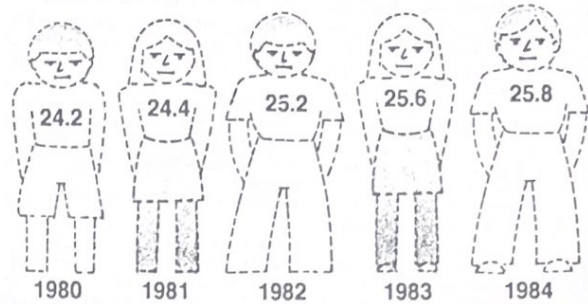
- become isolated and afraid of authority figures
- are frightened by angry people and any personal criticism
- either become alcoholics, marry them — or both — or find another compulsive personality such as a workaholic to fulfill our sick need for abandonment
- have an overdeveloped sense of responsibility, and it is easier for them to be concerned about others than it is for them to be concerned about self
- become addicted to excitement
- confuse love with pity and tend to love people they can pity and rescue
- judge themselves harshly and have a low sense of self-esteem

As counselors, it is important for us to remember that alcoholism is a FAMILY DISEASE.

## More childless couples

More American couples are living without children at home, according to newest figures:

(in millions)



Source: U.S. Census Bureau

## Men's healthy need for intimacy

Men who want closer relationships are more immune to stress and have fewer health problems than men who don't want very intimate ties, a new study reveals.

"If they want more intimacy, they seem to be coping with their problems better, they feel less anxious," says psychologist Fred Bryant of Loyola University, Chicago. Bryant and Loyola psychologist Dan McAdams tested and interviewed 1,200 USA adults and found some striking differences between the sexes where intimacy is concerned:

- A high drive for intimacy in women was linked to greater happiness with life. But it didn't affect their physical health or provide a stress buffer.

- Among men, a powerful urge to be close to others didn't lead to more happiness. But men's strong urge for intimacy correlated with high tolerance for stress and fewer physical ailments.

- Women's desire for closeness declined greatly from the 30s through the life span. Men didn't change.

"What the research suggests is the importance of the intimacy motive for men," Bryant says. "It's a potent coping strategy. It reduces distress."

Women's declining need for closeness as they grow older has been suggested in past research, which has found that USA women become more interested in work and other activities and less concerned with nurturing others from middle-age on.

## Why Johnny can't achieve

Undetected learning problems — not "laziness" or neglectful parents, as often claimed — turns many youngsters age 9 to 15 into underachievers, suggests a study released Tuesday.

Restless, fatigued kids who fall behind academically in late elementary and early junior high years are more likely to suffer from unsuspected disorders than parents or doctors have realized. Dr. Melvin Levine told the American Academy of Pediatrics annual convention in San Antonio, Texas.

Random testing of 700 children in three New England cities found 17 percent with undiagnosed developmental problems, says Levine, pediatrics professor at University of North Carolina Medical School at Chapel Hill.

Among common disorders: subtle memory deficits, language disabilities and attention disorders.

"There are bypass strategies that can be taught to a kid. A lot of these problems can be remedied or at least accommodated," Levine says. But first someone has to suspect the disorder and test for it.

"The field of learning disabilities has focused much more on younger children, so in this age group there's been tremendous neglect," he adds.

Instead, underachievers often are accused of being lazy and thought to have emotional problems, or parents take an unfair rap when their child has trouble.

## LIABILITY INSURANCE TIGHT FOR COUNSELORS AND PSYCHOLOGISTS

AACD dropped psychologists from its insurance program and increased premiums for counselors due to the tightening market for professional coverage. AACD's insurer, Interstate Indemnity Co. of Chicago, dropped its coverage of psychologists as of Nov. 1. The insurer claimed increased costs as its reason for raising premiums to counselors. Premiums increased from \$25 to \$46 per year for counselors insured up to \$500,000, while those insured to \$1 million paid \$60 instead of \$37.50 per year.

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## WHAT COUNSELORS SHOULD KNOW ABOUT EXERCISE

Continuation of an article begun in the last issue of Guidelines

The simplest form of exercising is walking. It can be done anywhere and at anytime. The large muscles of the legs are prime movers. The stress of the skeletal-muscular system is so low that injuries or even muscle aches are virtually non-existent. The pace should be brisk enough to elevate your heart rate to approximately 60% of its maximum.

A quick way to calculate your maximum heart rate is to subtract your age from 220. For example, a person who is 53 years old would have a maximum (theoretical) heart rate of 167 beats per minute. In reality, this value would vary somewhat depending upon the individual's state of conditioning, but it is sufficient for most purposes. To calculate a target heart rate of 60%, simply multiply the maximum heart rate by .6. For our 53 year old, that would give a target heart rate of 100 beats per minute.

The most widely accepted form of exercise is running. It is as convenient as walking. Additionally, the physical adaptations occur much faster than from walking. Unfortunately, the risk of injury is higher due to the stress on joints, tendons and ligaments unaccustomed to such movement. One other disadvantageous aspect is that some people are so competitive they tend to press much harder than necessary. This is especially true if two or more people run together.

Running can be a natural progression from walking if one feels the need. I would like to emphasize at this point that it is not necessary to do marathon-type training to maintain basic cardiovascular fitness. Again, all that is necessary is 30 minutes of exercise, three times weekly.

Bicycling is another form of exercise which fills the aerobic bill. It is particularly good in that it is a "weight supported" exercise. There is none of the pounding as in running. The adaptation to exercise is fairly rapid. The expense can vary, but a 10-speed racer is not required. A stationary bike is necessary if one is to continue during inclement weather or winter.

Team and racquetball sports lose points as good aerobic exercises as there is not a steady period of action involved. Access to courts and the need for partners are significant drawbacks.

Once the idea of an active lifestyle is established, we can supplement our physical well-being during normal day-to-day activities. Machines have taken away our will as well as our physical capabilities in the late twentieth century. Newspapers and magazines increasingly chronicle the inability of our school children to perform simple physical tasks due to poor conditioning. This problem extends through all ages.

In our high-mental-stress society, we must be physically fit to cope with the challenge of life. Whenever possible, we should walk instead of ride, take the stairs instead of the elevator and otherwise use our bodies instead of the machines. It has never been more true that "if we don't use our bodies, we will lose them."

For further information on exercise as a form of stress management feel free to call or write:

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Youngstown, OH 44555  
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## CALL HER A WOMAN TO SHOW RESPECT

Girl, lady or woman . . . does it matter what you call her?

It matters a great deal — and you'd better call her a woman because the terms carry different status, a UCLA study finds.

"Woman" is the descriptive form of choice for those who want to be paid respect. It's more favorably rated on dimensions of importance to the workaday world than is 'lady,' and it is used to address women of status," says UCLA psychologist William J. McCarthy.

Girls aren't to be taken seriously; ladies are low-status or unfamiliar. McCarthy and his team looked at the attitudes and language habits of 342 college students and 124 employees of a high-tech firm.

Participants were offered 48 vignettes that altered age, status and familiarity; they were asked whether the character should be called "girl," "lady" or "woman." Sexiness, intelligence, strength and independence were also rated.

Major findings:

■ Girls are the most dependent and least sexy. They're also lazier and less considerate than either women or ladies. "These ratings suggest no redeeming feature that would make a woman prefer to be called a 'girl' rather than a 'woman,'" says McCarthy.

■ While lady draws the highest ratings in theory on beauty and popularity, in practice the term is reserved for unfamiliar, low-status women. "The typical lady," says McCarthy, is weaker, less sexy, less intelligent and less of a leader than the typical woman."

■ Woman captures the lion's share of favorable ratings, and is also used in practice for the most respect-worthy woman.

■ Woman are significantly more likely than men to use the term "woman;" men are more apt to refer to "ladies."

## COUNSELORS AND HIGH TECH.

Our society is riding the third wave of fundamental change. The high-tech third wave hit the United States around 1955, creating the need for technological and computer literacy. This new wave will continue to change society further, creating a plethora of new occupations (90% of which will be information-oriented, and demanding improved educational standards to allow us to compete successfully in the world.

Ideas about the role of the counselor in this high-tech society are just beginning to emerge. Current writers suggest these foci for counselors:

- Counselors must keep abreast of emerging trends and opportunities.
- Counselors must take the initiative to learn about computer technology to discover how such technology can help them improve the delivery of guidance services.
- Counselors must be aware of the importance of science, math, technology, and foreign language studies, as well as the social studies and humanities, to avoid the crisis of technological innovation.
- Counselors must emphasize equal access to technological innovation.
- Counselors must develop the ability to see through and beyond high-tech hype.

## TODAY'S TEEN: SATURATED BY VIOLENCE

During grades seven-12, kids listen to an average 10,500 hours of rock music. During grades nine-12, they see 18,000 murders in 22,000 hours of TV, twice the time they spend in 12 years of school, says a U.S. News & World Report story published recently.

"What Entertainers Are Doing to Our Kids" says that such exposure produces "a perception that contemporary life is more dangerous than it is."

The problem is the current level of saturation:

■ More than half of the projected \$4 billion worth of movie tickets sold this year will be bought by patrons age 10 to 24.

■ One quarter of all MTV viewers are under age 15. Every hour, videos average 18 acts of violence.

■ 64 percent of all records are purchased by listeners 10 to 24 years old, and one third of the nation's 8,200 radio stations broadcast rock at a time when lyrics have never been more sexually explicit and violent.

## DEADLINES

Deadlines for receiving copy to be published in future issues of Guidelines are:  
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- Representing your interests in Ohio and nationally.
- Working toward improving the counseling profession.
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**CHILD ABUSE CASES  
DOWN DRAMATICALLY**

Child abuse cases in two-parent families dropped dramatically in the past 10 years, a study recently shows. Experts credit increased public education and awareness.

About 1 million children were kicked, bitten or otherwise seriously abused, down 41 percent from 1.7 million in 1975, says the study, funded by National Institute of Mental Health.

"There have been real behavior changes" in society, says Richard Gelles of the University of Rhode Island, who did the study with Murray Straus of the University of New Hampshire.

Aiding the decline: couples marry later and wait longer to have children and unwanted pregnancies are down.

Researchers interviewed 714 couples with at least one child between ages 3 and 17.

Among other findings:

■ Parents who admit they've severely abused a child dropped from 3.6 percent in 1975 to 1.9 percent in 1985.

■ 63 percent of parents used some violence in 1975, 62 percent in 1985.

A survey by the National Committee for Prevention of Child Abuse shows reports of child abuse nationwide increased by 9 percent this year.

"Tremendous public attention paid to this problem and an explosion of prevention programs may explain why the actual incidence is going down even as . . . reports are going up," says Anne H. Cohn, committee executive director.

Gelles' study also showed:

■ 54.9 percent slapped or spanked their child in 1985, 58.2 percent in 1975.

■ 30.7 percent of parents pushed, grabbed or shoved their children in 1985, vs. 31.8 percent in 1975.

Gelles presented his study at a conference in Chicago.

