Dear ORCA members,

Inspired by President Obama’s recent 2014 State of the Union address, I thought I might take advantage of this opportunity to offer a brief update on the state of our association and our recent activities.

In our first year after a major reorganization, ORCA, with the guidance of a dedicated governing board, has taken major steps to put into place new systems and practices that will allow our “new” association to mature and grow, while also remaining nimble enough to meet the evolving needs of our members.

As I see it, ORCA is emerging from its “awkward teenage” stage and we are starting to see a more mature, sophisticated, and savvy association blossom. It has all been very exciting, and yet – as counselors we know too well that – with growth and development comes inevitable growing pains.

I’m proud to say that our leaders have stepped up to the challenge, have walked boldly through the foggy moments, have graciously dealt with change and ambiguity, and have creatively and persistently nurtured ORCA’s development into our emerging adulthood.

With all of this change and transition, one might think ORCA’s actual accomplishments would be few – but no! Here is a sampling of what your ORCA board has been up to:

- ORCA’s public policy and advocacy partnership, COPACT, with the guidance of our lobbyist is vigilantly monitoring proposed legislation concerning or impacting LPCs and LMFTs throughout the 2014 legislative session which will run from Feb. 4 through Mar. 3.

- The Fall Conference Committee has secured a date and location for the 2014 Conference which will be held at Portland State University on Oct. 4-5, 2014. Mark your calendars!

- The Practice Development & Education Committee is holding their next CE event in April or May and has revised and updated policies for ORCA members who wish to offer CEs through co-sponsorship.

- ORCA is hosting a networking event in Tigard on Tues. February 11 at the Symposium Café from 5:30-7:30pm. Please consider bringing a colleague and introducing them to ORCA.

- A membership task force has met regularly over the past several months and has developed a membership recruitment strategy that will be implemented in the coming months.

- Our Technology and Communications teams have collaborated on a new website that is scheduled to be unveiled this year.

- ORCA formally endorsed a proposed nation-wide consensus licensure title and scope of practice for counselors, as part of the American Counseling Association’s Building Blocks for Portability project designed to facilitate licensure portability across the country.

- Fellow board member Roy Huggins and I will represent ORCA at the ACA 2014 Conference & Expo, March 27-30 in Honolulu, Hawaii.

In closing, I would like to express my appreciation to our volunteer governing board for their hard work and impressive accomplishments so far this year. If you have interest in joining our dedicated team, please email me at president@or-counseling.org to discuss the many opportunities to get involved.

Matt Morscheck, MS, LPC
ORCA President, 2013–2014
Many of us, who advocate for nature, and for the importance of nature in our lives, focus on what is often called “nearby” nature or backyard nature. Nature might involve sitting under a favorite tree in a neighborhood park, digging in one’s garden, romping with one’s pet, or walking a favorite trail.

Domestic nature is important. It’s what most of us have close by in our increasingly urbanized communities. People can access it easily and garner immediate benefits from interacting with it. But if the truth be told, domestic nature is only part of what we need. The other part is wild nature. For as a species, we came of age in a natural world far wilder than today, and most of that need for wildness still exists within us—body, mind, and soul.

Elsewhere, I have defined wildness in nature as that which is big, untamed, unmanaged, self-organizing, and unmediated by technological artifice. We can love the wild. We can fear it. We
are strengthened and nurtured by it (Kahn & Hasbach, 2013). Wildness offers us the opportunity to experience ourselves embedded in the natural world and reminds us of our place in the order of things. It invites feelings of awe, appreciation of beauty, a feeling of aliveness, and a sense of humility.

But we are increasingly separated from wild nature—partly because there are fewer wild lands and less wild nature to connect with, and partly because we are seduced into the comforts of our domestic life and virtual experiences via our two dimensional screens. Research indicates that the average North American child currently spends 4-7 minutes per day outdoors (Hofferth & Sandberg, 2001), and stares at screens 7.5 hours per day (Rideout, Foehr, & Roberts, 2010). What are we losing in the process?

In his excellent book, *Birthright: People and Nature in the Modern World* (2012), Stephen Kellert imagines what it would be like to live in a world where wild and living nature had become a rarity. He writes, “I suspect it would be perceived as dull beyond belief, monumentally ugly, homogenous and stupid—a place where children largely cocooned themselves within vicarious and virtual realities, and adults had lost their power to communicate in more than technical terms. It would be a place where intellectual and emotional development had become stunted, and human interactions and relationships were impaired and fitful if not often frightening” (p. 31).

More than 60 years ago, Aldo Leopold (1970/1949) wrote, “We all strive for safety, prosperity, comfort, long life, and dullness…but too much safety seems to yield only danger in the long run. Perhaps this is behind Thoreau’s dictum: In wildness is the salvation of the world” (p. 133).

Wildness exists not only “out there” in relation to the external world, but also within. We are human nature. The primal, the wild, exists within us and in our relations to one another. That energy fuels our passions and allows us to experience deeply and feel fully alive.

Ecotherapy is an emerging treatment modality that enlarges the traditional scope of treatment to include the human-nature relationship. Drawing on the theoretical constructs of ecopsychology (that I discussed in my earlier article for this newsletter – Spring 2013),
ecotherapy employs nature-based practices that include encouraging clients to (re)connect with the more-than-human world. Rewilding is a new direction in ecotherapy that encourages direct sensory experience in wilder nature and offers the opportunity to reawaken deeper feelings of connection, belonging, wakefulness, and mindfulness in our clients.

Patricia H. Hasbach, Ph.D., LPC, has a private practice in Eugene, OR, and is a faculty member at Lewis & Clark College and Antioch University Seattle. She is a frequent conference speaker and offers continuing education programs on ecotherapy, ecopsychology, and human rewilding. She recently published two books with MIT Press: Ecopsychology: Science, Totems, and the Technological Species (2012) and The Rediscovery of the Wild (2013). Visit her webpage at www.northwestecotherapy.com.

References


COPACT, the lobbying organization representing ORCA and OAMFT, has hired Elizabeth Remley to replace Maura Roche who has retired from active lobbying to pursue other interests. We are both grateful to Maura for her diligent service to LPCs and LMFTs and excited to hire Elizabeth to fill her shoes. Elizabeth has many years of experience representing health care providers and insurers. She knows both sides of the issues and will be a very strong representative for COPACT.

Last year we worked on three bills that passed and were then implemented January 1, 2014. The first bill amended the Practice Act to situate LPCs and LMFTs better under the requirements of Health Care Reform. It also made it possible for LMFT interns to get licensed within the same time frame as LPC interns. The second bill we wrote and passed added LPCs and LMFTs to the list of mental health providers who have been legally entitled to work with self-referring teen clients age 14 and up for the last 28 years. That means that LPCs and LMFTs can now work with adolescents from troubled families that either cannot or will not support their teens in getting mental health care. And the final bill we supported gave independent mental health clinics in Oregon the ability to submit claims to insurers as a clinic. That gives those clinics more options to hire LPC and LMFT interns.

COPACT is excited to be moving into a new legislative session starting in February. This will be the short session that happens every other year. It is supposedly focused on budget issues, but other bills have a way of sneaking in. COPACT will be monitoring what bills are proposed and worked on that could have an impact, positive or negative, on LPCs and LMFTs. We are excited to have Elizabeth at our side in this effort.

Stay tuned to the ORCA listserv for updates on the February legislative session (see page 11 of this newsletter for instructions on how to join if you are not already part of the listserv).

Larry Conner, MA, LPC, is the ORCA Public Policy and Advocacy Chair and the Treasurer of COPACT.
In terms of mental health technology, especially for private practitioners, 2013 was HUGE. We saw a new HIPAA law, *DSM 5* (need I say more?), the early stages of the Affordable Care Act, and roadblocks for Stage 2 of the Meaningful Use program for Electronic Health Records. 2014 looks to be the year of adjusting to the changes. So let’s take a look back at what changed and try to prognosticate about what to do to prepare for 2014.

**In 2013… HIPAA Updated**

Those who were able to attend ORCA’s continuing education event last September know all about the changes to HIPAA that happened in January of 2013. We saw new Business Associate rules that make Skype and FaceTime pretty much unusable under HIPAA (don’t worry, you can use VSee if you liked Skype), and totally change the way we can use online data backup providers. On the bright side, we also saw a clarification that under HIPAA, clients can consent for us to send them plain old unencrypted emails* and self-pay clients can forbid the release of their information to insurance companies. There were many other changes, as well, but these are the main ones that I have found mental health professionals need to be aware of in terms of how HIPAA changed the way we use technology.

* The OBLPCT is not so permissive regarding use of email to exchange information of a therapeutic nature, however.

**What About 2014?**

I’ve been hearing a lot of concern that the Feds will start cracking down on all of us for HIPAA compliance in 2014. It is true that the Office of Civil Rights (OCR) has announced that they will ramp up the random audit program again this year. However, security experts generally agree that solo and small group mental health practices are unlikely to be chosen for random audit. For us, HIPAA compliance is more about protecting clients and protecting ourselves in the case of a complaint or if a security breach occurs. Additionally, those who wish to work within the new systems of managed care under the Affordable Care Act may find themselves required to prove HIPAA compliance to become paneled.

How does compliance work? HIPAA Security requires you to start with a formal risk analysis. Indeed, the OCR has announced that they will be focusing on risk analysis in their audits this year. You can do a risk analysis yourself with the help of someone with deep information technology knowledge or with a security professional, such as someone who holds the CISSP certification.

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In 2013… The Meaningful Use Program for Electronic Health Records Hit Some Snags

You may have been hearing the rumors that all of us will be required to use Electronic Health Record systems in 2014. At the moment, for mental health clinicians (other than psychiatric providers), that is not true. The federal Meaningful Use program has been the driver for adopting these systems and the program doesn't include those of us who are non-medical providers. However, in 2013, a bill was put forward in Congress to add Psychologists and Social Workers to the incentive program.

What About 2014?

I predict that many of us will adopt EHR even though we don't have to, for one reason or another. Many of us will do it for convenience of record-keeping and billing and to make HIPAA compliance easier. Others may do so because an employer adopts such a system, or a contract with a third-party biller requires it. What I can't predict is whether or not psychologists and social workers will win inclusion in the Meaningful Use program. Inclusion would mean some pretty large financial incentives to adopt such systems and use them in “meaningful” ways (generally, the cash incentive awarded from Medicare comes to a whopping $44,000 per clinician when the practice adopts an EHR system in a “meaningful” way.) Inclusion would also mean penalties on Medicare payments down the line for those who don't adopt them.

As professional counselors, it is not currently possible for us to be included in the Meaningful Use program because our professions are not part of Medicare.

In 2013… The Affordable Care Act Started Rolling Out

With 2014 here, many more Americans will have insurance of some form that differs from state-to-state. The new system of managed care will be looking for ways to cut costs and will also require clinicians to submit data on the outcomes of treatment. In many states, some clinicians will start to form integrated care groups to help consolidate the costs of administration and also provide a more attractive provider group for third-party payers.

What About 2014?

I predict… things will not be as harsh as many fear they will be. Private practitioners are concerned that managed care will intrude on their style of practice, which may be true. Those with cash practices are concerned that the proliferation of insured clients will reduce how many are willing to pay with cash. This may also be true. Consider, however, that the coverage provided by the new system for mental health may not be what all your clients want from their provider. They may be willing to pay to get the kind of care and service they want (which you are probably already providing.) Alternatively, if you provide services that match well with the new system, then it may be a good fit for you anyway.

Historically, changes in managed care have created turmoil and worry but predictions of doom to our industry as we know it have rarely come true in their entirety. I imagine 2014 will certainly be filled with adjustments and probably a bit of turmoil for some of us. Many more of us will probably pick up electronic systems for keeping records and managing our practices. We will also likely see online therapy as a more attractive way to serve clients, but I doubt we will have to give up on who we are.

This article is reprinted with modifications from the Person-Centered Tech newsletter: http://www.personcenteredtech.com. Roy Huggins is the director of Person-Centered Tech.

Upcoming workshops for counselors

March 14 • 6 CEUs
Rethinking Self and Therapy in a Globalizing World

March 22 • 3 CEUs
Heartfelt and Effective Communication: Building Understanding, Cooperation, and Effectiveness in Groups

April 3 • 3 CEUs
Creativity-Based Self-Care for Purpose-Driven Professionals

April 5 • 3 CEUs
Sense of Self: The Intersection of Embodied and Expressive Practices in Psychotherapy

April 24 • 3 CEUs
Engaging Boys: Working Effectively With Boys’ Relational Style

More at go.lclark.edu/graduate/counselors/workshops

Oregon Counseling Association 7  Winter 2014
Save the Date!

SATURDAY & SUNDAY
Oct. 4 & 5

OREGON COUNSELING ASSOCIATION
ANNUAL FALL CONFERENCE

Hosted by Portland State University, this year’s event features a Saturday workshop from Susan M. Pollak, MTS, EdD, president of the Institute of Meditation and Psychotherapy, author and speaker on the neurobiology of mindfulness and compassion. She has been an instructor at Harvard Medical School for the past 20 years.

Proposals for 1- and 2-hr breakout sessions for the Sunday program are being accepted. Visit www.or-counseling.org for more information.

Want to volunteer and assist with the planning of this great event? Contact Sarah Lebo at conference@or-counseling.org
Contact

How Horses Connect with Clients through Equine Assisted Psychotherapy

Sarah Savin, MA, NCC

As counselors, we have the understanding that every person is an individual and that not every approach will work with each client. The therapeutic process with clients, either children or adults, requires meeting the client on their level. In order to achieve such a goal, at times counselors must be willing to be creative in their approaches.

As I have begun to establish my practice, I have found myself drawn to a variety of creative approaches, but the modality in which I have experienced some of the most powerful therapeutic moments is Equine Assisted Psychotherapy (EAP).

The concepts that have resonated with me the most from working with EAP are contact, withdrawal, resistance, and sense of self. These concepts are often described in relation to expressive arts, but also apply to EAP. There are strong correlations between how EAP and expressive arts affect clients. For example, in both approaches contact can be described as a tool for survival. Contact is essential for the client to achieve better self-awareness and hopefully healthier ways to relate to themselves, others, and their environment. Similarly, as contact is made between the client and counselor, it could be the first essential step towards better contact with other facets of their life. Withdrawal from contact is also a natural part of the therapeutic process. The counselor can choose to allow the withdrawal, to openly acknowledge it, or to request the client push through it. Furthermore, achieving contact with the senses, the environment, and with others enables the client to have an understanding of their motivations and their needs, in other words a better sense of self. 

Continued on next page
Similarly, horses relate to their world within the boundaries of these concepts. For example, horses are social herd animals. In order to survive they have evolved to seek the companionship and company of others (contact). They need to be able to relate to one another and to communicate clearly and effectively. These most basic survival techniques for horses are very similar to how humans, also social creatures, evolved. It is therefore necessary for horses to seek contact, withdraw for protection, and resist inappropriate or uncomfortable contact. Maybe it can even be argued that in order to understand what is safe, appropriate, or comfortable an individual horse must have at least a very basic sense of self.

With this information in mind, I would like to share some experiences I have had with clients during EAP sessions. One of my equine co-therapists, Lorelei, demonstrates the aforementioned concepts to a tee. When presented with a client who is suffering from PTSD, often due to previous experience with unsafe contact, Lorelei will remain at a distance, only approaching the client occasionally to gently sniff them from foot to head. She provides a form of safe physical contact that I could never do with my clients. And yet at other times, with clients who lack personal boundaries, she will mirror their behaviors and invade their space, sometimes even pushing them with her nose. One of the most powerful experiences, however, is when the client finds empowerment through their interactions with the horse. Such as leading or guiding a horse over an obstacle that represents, to them, a personal barrier. I have seen clients utilize their experiences to draw direct correlations with their lives, to practice coping skills, and to gain a version of contact, withdrawal, and sense of self that I might not be able to provide alone. Is that not our ultimate goal?

I use EAP with children, adults, and families in addition to my office practice. I am also available to partner with other therapists for a set number of EAP sessions with their clients.

Sarah Savin is a master's level registered intern with the OBLPCT and a Nationally Certified Counselor. In September 2012, she became EAGALA certified as both Mental Health Professional and Equine Specialist. Sarah has an extensive background working with people and horses, both one-one and in groups. She brings the experience she has gained growing up with and working with horses and as a counselor to EquiDay Counseling.

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“I am a Portland therapist and I just made this new site for all mental health providers here in Portland. Check it out!”
Portland Therapy Center
— Jeff Guenther, LPC

Become a LinkedIn Group member:
http://www.linkedin.com/groups?gid=2467168

Facebook: Regarding ORCA Fall Conference 2014 Keynote Speaker Dr. Susan Pollack
“How fitting that the Keynote Speaker we just secured for our annual conference is an expert in meditation and mindfulness in psychotherapy. Watch for details on our Oct. 2014 event featuring Dr. Susan Pollak, clinician and instructor from Harvard Medical School.”
— Sarah Lebo, LPC & ORCA Fall Conference Chair

Like our page to get newsfeed updates:
http://www.facebook.com/OregonCounselingAssociation
Tune in to our Twitter feed:
https://twitter.com/OregonCounselor

Yahoo Groups: We changed our name
We announced this in the last enewsletter, but in case you didn’t catch it: the name of our Yahoo group has changed from “oregoncounseling” to “ORCAmembers.” So if you'd like to send a message out to the group, the new email address to use is: orcamembers@yahoogroups.com.

Join our group to get regular e-mail news updates:
Go to http://health.groups.yahoo.com/group/OregonCounseling/
and click join now.
**Oregon Counseling Association 2014 Leadership Roster**

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If you are interested in becoming a working member on the board, please contact President Matt Morscheck for more information at: [President@or-counseling.org](mailto:President@or-counseling.org)