The Times, They Are A'Changing

Steve Cockerham

The upcoming conference in Charlotte is themed by the concept of diversity. Understanding and acceptance of diversity keeps moving forward, though regularly taking a few steps backwards. Changing our country and our community of nations is progressing even as it struggles and retreats. Human Services as a field embraces and celebrates diversity. Our work is indelibly diverse and multicultural. Our people come from so many cultures and heritages. We are the world and the world is all of us. We have a common ancestry, Africa, and we’ve spread to every continent. Genetic diversity for all living things is what ensures survival and a profuse bounty for thriving. We are part of that diversity in our connection to the natural world as well as our social realities. Our differences are necessary for us to best function and for us to live long and prosper. We will celebrate our diversity at the conference, knowing the challenges as well as the rewards of helping ourselves and others grow beyond prejudice and discrimination.

Often, teaching about diversity begins with how to define differing groups of people. Initially, we consider the primary categories of diversity: gender identity, race/ethnicity, religion, developmental age/stage, socioeconomic level, national/regional origin, ability, affective orientation, physical appearance, creed, and political identity. Underlying those categories can be found another huge diversity of groups – recreation (kayakers, Frisbee golfers, football fans, tennis players, mountain climbers, RVers, etc.), hobby (knitting, woodworking, art collectors, vintage cars, beekeeping, gardening, video gaming, etc.), mental illness (addicts, schizophrenics, soldiers with PTSD, anorectics, pedophiles, etc.), lifestyle (suburbanites, urban dwellers, organic, farmers, beachcombers, retirees, intentional communities, etc.), vacation destination (ocean cruisers, beach renters, theme park visitors, campers, group tour goers, time sharers, etc.), professional association (NOHS, CSHSE, AAHSE, APA, NEA, NRA, ACA, NCTM, AARP, NATSAP, NASW, NAMI, etc.), clubs (Kiwanis, gardening, Rotary, etc.), gangs (bloods, crips, Aryan nation, Mexican mafia, etc.)…you know, it’s interesting how far we can go.

Does this oversimplify the meaning of diversity, lessening the importance of the kinds of differences that are used to hurt and control others. Or, does this serve to remind us that differences are different? We all have, individually and grouped, qualities, characteristics, intent, environmental and social impact, behaviors, values, relationships…that which define and motivate us. We can be used and abused as individuals, by friends, within families, between social groups, communities, and nations. As each of us participates in the community of social interaction, we risk denial, containment, access, choice, participation, and opportunity on several levels.

Yes, we have to identify and focus on the major categories of diversity to deal with the inequities and injustices and to welcome more acceptance and understanding. Diversity is democracy. Democracy should be a place where everyone has equal voice in political decisions and equal access to opportunities, resources, commercial enterprises, public events, legal and marital status, travel, education, employment, recreation, residence, income, investment, etc. We should be able to be in our groups and yet be open to all the varieties of interactions in other groups. Each one of us is likely to be in several groups, some more significant than others — multicultural also means multigroup. We have to know that whenever we are made to feel insignificant, marginalized, isolated, neglected, endangered, attacked, discriminated against, then we should be able to reach out for acceptance and understanding, knowing that we are all here to support one another and do what we can to work together for the betterment of all.

The bottom line is how we treat each other. What’s really important is how we feel, how we do family, how does work, how we have fun, and how God loves us…it’s pretty simple. This is what we have in common. How well do our lives proceed? How’s it going today and what’s getting ready to happen? These are the daily concerns of most of us. We are all in one or more groups? Isn’t that something to celebrate? Isn’t that what makes life interesting? Isn’t that the key to our surviving and thriving? What if we were just one color, one party, one hobby, one pastime…nothing much to talk about, nothing much to do, the same old same thing? Our differences define us. They illustrate the barriers to equality, the constraints to helping, and the balance of adaptation. As hard as it is, for some more than others, for each of us in our own personal growth toward acceptance and understanding, there is no more important lesson of life than we are all here together, on this revolving ball of rocks in this immense and incomprehensible reality, sharing our paths through the universe. We travel this way together. It’s an honor to go with you. I look forward to seeing you at the conference!!!
Making Sense Out of Nonsense

Denise Smith Allen

As probation officers, our role is pivotal because we are primarily human service workers. Some would classify us as law enforcement social workers, especially given our professional ability to impose court ordered sanctions. On a good day, I have referred to my work as "life coaching." It is indeed rewarding to assist offenders to make better choices for better outcomes in their lives. On any given day someone will break the law, which can cause major disruption to the family, the community, and society as a whole. Therefore, public safety and reduction of crime are key components to successful outcomes.

Suffice it to say, the public needs protection from violent offenders and those that do unspeakable things to the most vulnerable among us. However, a vast majority are not violent criminals. Unfortunately, when individuals process through the judicial system, many become part of a growing number of marginalized people with criminal records. Punishment for nonviolent offenses, which are generally drug or financial in nature, has created a schism in our society, which is further exacerbated by issues of race and class (Alfred & Chlup, 2009; Alexander, 2010). Nonviolent offenders who have paid their debt to society by successfully completing a term of probation or parole still find themselves paying for their misdeeds. Often they are denied access to housing, education, public benefits, and in 22 states the right to vote, which automatically excludes them from jury selection (Alexander, 2010). These barriers make it challenging for offenders to become law abiding, productive, and contributing members of society.

Trying to make sense out of nonsense is what I refer to when policy does not align with reality. This week I had a troubling experience when an offender came to report that she was homeless due to being unable to secure and maintain employment. She ended her relationship with the father of her children who was abusive and barely providing for them. With no place to go, she left the children temporarily with him and his new girlfriend. The offender stayed with an acquaintance for a few days but was soon asked to leave because she could not contribute to the household. She walked to several places in an attempt to secure work, however; there were no real prospects, due in part, to her felony record. The children went on to live with their maternal grandmother who was neither expecting nor prepared for four grandchildren to come live with her, even though she loved them dearly.

It is nonsense, when I had to explain to the offender that policy requiring more frequent reporting contacts were necessary due to her homelessness. On the surface, it may seem reasonable to increase contact with an offender to diminish the possibility of losing contact with them. On the other hand, it creates additional problems.

It is nonsense, to have an offender without financial resources, transportation, or a support system, adhere to a policy that requires increased contact based on their "homelessness." It should be mentioned that this arbitrary policy was coming from another jurisdiction. However, it was the jurisdiction from whence the offender’s crime had been committed.

The offender then announced that her brother, in yet another jurisdiction, had put her up in a hotel. It is nonsense; however, per policy, the only thing left for me to do was to transfer the case. She will likely be sanctioned by the county of origin for being poor—not paying her court ordered assessments or completing community service—and the end game will likely be a jail term. From my perspective, criminal justice public policies should be prudent, reasonable, and make sense, particularly if we expect reductions in crime and better outcomes for our offenders.

References
Re-visioning Professional Human Services Organizations

Floyd Harvey Robinson

This article explores the idea that human service professional organizations might consider a re-visioning process related to how they function and their place in contemporary American society. As American social issues become more complex and people face even greater challenges to maintain a quality life, it is suggested that professional organizations consider and contemplate restructuring. As a former vice president of a professional organization, I was often amazed at the potential of taking new directions and ways of operating that may have been considered “out of the box” thinking. However, I would suggest that our society needs a reinvigorated human services sector that thinks “out of the box,” with a philosophical foundation that makes salient the idea that human existence and development is fostered when social supports are provided.

It is generally accepted that professional organizations play a pivotal role in increasing the knowledge base of its membership through conferences, newsletters, and other activities that help to maintain high quality practice techniques by providers. Professional organizations are also characterized by workable infrastructure with leadership committees, office space, phones, computers, membership chapters, group emails, and other forms of collective communication, including a financial foundation sustained through membership dues. Consequently, with stable memberships and a sustainable financial base, including potential for growth through recruitment, professional organizations might be re-conceptualized and visualized as more than being entity that primarily engages practitioners based services. Instead, professional organizations might begin to revision themselves as independent service providers and public policy advocates capable of community organizing, delivering client services, and involvement in the public policy sector.

From a unique position of being able to galvanize memberships, there are a diverse group of activities that might be pursued by human service organizations. Members in professional organizations need to be contacted personally by the leadership and engaged around issues relevant to the profession and personal/professional development. Detailed networking beyond emails renewing dues or announcement of conferences and request for proposals is imperative if the re-vision process is to take place. The enormous talents, connections, and innovative ideas contained in individual members should not go unexplored. The leaders of the professional organization might develop profiles on members which provide information on their education and skills sets. Members in the same state might be informed of each other’s locations to foster dialogue at the lower levels of the organization. Human services, mental health, counseling, and social work professional organizations might consider combined local and national efforts to select candidates for election in local political offices. Involvement in local elections would provide human services professional organizations an opportunity to speak to the general public regarding the policy positions held by the profession on a host of social challenges, as well as a proposed set of policies to address those issues.
Another necessary function might be the development of independent social service programs. As a medical social worker, I often use the programs offered by the National Kidney Fund and the American Kidney Fund that offer a series of services useful for addressing patient issues like lack of medication, emergency utilities payments, and transportation finance support program. Social workers and other human services professionals need the ability to assist clients, using support programming design developed and implemented with our respective professions. The on-going dependency on the nonprofit and governmental sector to provide tools for practice needs to be explored and addressed. It is time for our profession to develop and implement independent social support system design.

In closing, combined efforts from all human services organizations could provide young and experienced professionals a place to incubate new innovative ideas for the client populations that they serve and gain greater legitimacy with those whose tax dollars are used to fund many human services activities. Re-visioning human services professional organizations as a vehicle for public policy implementation, a place to generate new ideas, and a hub to network and use the skills and competencies of its members in an “out of the box” manner is an idea whose time has come.

My Grieving Client
Ann Weber and Linnea Bergvall

My friend paces her porch, wondering whether to call her cat’s name yet again. The indoor cat slipped out one evening and just disappeared. That was a month ago. Meanwhile, she’s called everyone, made posters and flyers, used every resource – but no one has seen her cat. She feels exhausted and defeated. Maybe she should face facts and move on. But she has no idea what happened and feels haunted by this loss.

My neighbor walks his dog past my house. To my polite “How are you?” he pauses before walking on. To my surprise, he replies, “Not so well. My wife left me last week. I guess I’m still in shock.” A few hours later he knocks on my door. “I’m sorry to intrude,” he mumbles, “but I guess I just need to talk to someone. Do you have a few minutes?” I invite him in – but what can I possibly say?

My classmate, a new friend, has received an emergency phone call: her mother has become suddenly ill, she must leave for home immediately. Mere weeks later, her mother has died of leukemia. My friend takes an academic leave to remain with her grieving father. Her terrible loss hits close to home for me personally. It also raises difficult questions about how I might ever counsel a grieving client.

What would I do if my own mother died so unexpectedly? How can I help my grieving friend with this immediate and real loss? As a counseling student, just beginning to meet with my own first clients in my practicum, I listen to accounts of loss and grief, and I wonder about what I should say or do in the face of such anguish.

With these recent events in mind, I called my friend, mentor, and former professor Dr. Ann Weber. A social psychologist specializing in loss and grief, she was eager to answer some of my questions about these painful experiences which sooner or later almost all human services professionals must address. Most people have no “plan” for loss but rather rely on social customs and common sense in offering condolences: they speak or send cards of sympathy, attend a memorial, or bring a casserole to a sorrowful neighbor. But we in the helping professions have a unique role and responsibility when such consoling gestures aren’t enough.

Give sorrow words:
the grief that
does not speak
whispers the o’er
fraught heart
and bids it break.

- Macbeth, Act IV, scene 3
I began by asking Dr. Weber about the process of grieving itself, to understand what my bereaved clients and loved ones are going through, as well as to help me to become more aware of my own process in times of loss:

All grieving begins subjectively, when an individual experiences the loss of a meaningful relationship. It might be a breakup, a death, or even an unexplained loss of contact. Grief is one’s complete emotional response to loss, a painful complex of feelings including sadness, anger, helplessness, guilt, and despair. Grieving pervades all dimensions of psychological function – cognitive, behavioral, and social. Cognitive reactions include disruptions in memory and concentration. We feel detached and distracted; we doubt ourselves and our place in the world. We feel lethargic in the daytime but lie awake at night wondering what happened, a process called obsessive review. Behavioral impact includes impaired performance, making mistakes, and mishandling continuing relationships. Social consequences involve alienation, loneliness, and withdrawal from others – just when we most need to confide and seek out social support.

In our culture, most grieving experiences share common processes. But different kinds of loss produce distinctive dimensions or problems. For example, the death of a loved one is devastating and even traumatic; it is considered the worst of all life stressors. But close relationship loss through breakup or divorce, with one’s ex-partner still living, feels like a personal failure. Ambiguous losses are those that involve uncertainty as to cause or outcome – like a cat who goes missing or an unexplained rejection – so that closure is difficult, perhaps impossible.

Most poignant to me are disenfranchised losses, those which society has marginalized and will not recognize. There are no funerals for beloved pets, no obituaries for miscarriages. These psychologically real losses seem to be embarrassing to others, or simply dismissed. The grieving person’s feelings are ignored or diminished, so that he or she may refrain from admitting to sorrow or the need for comfort.

You mentioned that many grieving experiences share common processes. Are there typical stages or patterns of grief that occur over time after someone has suffered a loss?

You’re alluding to one of the best known theories of grief, Elisabeth Kübler-Ross’s five stages of reaction to death and dying: denial, anger, bargaining, depression and acceptance (1969). But Kübler-Ross’s insights don’t easily translate into therapy. It does help to know that denial is a nearly universal self-protective mechanism. But that realization isn’t enough to help you overcome denial. For example, long after the death of loved ones, we hold onto their personal possessions – but how do we know if and when it’s time to let go? The stage model doesn’t tell us. And just because acceptance is the last stage of Kübler-Ross’s model doesn’t mean that everyone will actually reach such resolution.

I prefer stage models that describe not sequences or timelines but rather healing actions and outcomes. My personal favorite among task models of healing after loss does not even propose a sequence or order but rather four sets of tasks which must be addressed. In their work as therapists, Nini Leick and Marianne Davidsen-Nielsen (1991) found that it does not matter which task is undertaken first as long as four objectives are met. At some point after a loss, one must face the fact of the loss – or in the case of ambiguous loss, accept that the loss may never be explained or rationalized. Further, one must express the emotions attendant on the loss; this is clearly difficult, even painful, although there may be moments of relief, even euphoria. A loss alters one’s status, both to oneself and to others. So another task is to develop new sets of skills and relationships. This takes time, even the remainder one’s life. Finally – although not necessarily put off till last – the survivor must cultivate a new understanding of one’s self, one’s very identity.
What I like about Leick and Davidsen-Nielsen’s model, in addition to its simplicity (which makes it easier to communicate to others), is that each task spells out specific work to be done. As a counselor, you can even suggest them as “homework assignments:” beginning a journal, for example, to jot memories and reflections; in so doing, feelings are defined and faced which are difficult to talk about; or setting a challenge to overtly ask for help and favors from others. Many people offer to help “if there’s anything you need.” So tell them! Say, “I need to learn how to cook a few healthy basic meals. You’re a good cook, would you teach me some basic recipes?” Or, “I want to begin a social life eventually, but I haven’t been out in the dating world for a while. Would you come with me to some good places, just so I can get out of the house and have some fun?”

It’s been hard to confirm any one “right” or optimal sequence of stages of grief. In the course of dealing with and healing after loss, responses may be interrupted, skipped over, or revisited in recurring loops of action. There simply is no timeline, no time limit, in experiencing grief. The many psychological activities of bereavement are not stages but rather processes.

Your own grief research has focused on how people use their personal stories of past and lost relationships to help them cope with their grief. How do we do this?

For decades, my colleagues and I have been collecting and studying people’s accounts of relationship loss and its aftermath, developing a model of account-making in the wake of loss. An account is a story-like mental construction of memories, descriptions, and explanations, which we use to make sense of our experienced social world (Harvey, Weber & Orbuch, 1990; Weiss, 1975). Human beings are “meaning-seeking” creatures: we need not only to perceive but to understand before we can move forward. The account is one’s effort to combine relationship experiences, especially in the wake of loss, to achieve just such an understanding.

A relationship account is ever evolving but seldom recorded. We revise it mentally in light of new information, or retell it differently for different listeners. After a painful or inexplicable loss, we wonder, “Why? Why did this happen?” If we knew the answer, we might be able to pin blame appropriately and make changes in future choices: Did my partner leave me out of boredom or to pursue someone else? Did my cat disappear because I was neglectful, or was she attacked by a predator? The answers we construe (with lots of self-serving bias and prejudice) can provide a comforting and instructive “story” that helps us get through yet another night of wondering and another day of coping.

Account-making is automatic, barely conscious except when we record or recount bits and pieces to others. Accounts begin sketchily, are detailed over time, and are reworked in retrospect. They are flexible and dynamic, especially when we are most struggling to understand. In attentively and effectively working through our reactions, we are required to be engaged in the most intense account-making.

Probably the best image of this is how talk therapy can really help clients work through their experiences. This part of account-making has greatest cogency for counselors, who make it possible to refine the account by literally listening to it. We don’t tell our accounts to just anyone, but only to a trusted confidant. Thus a lesson for would-be grief counselors is to establish a trusting base with a client, making the counseling sessions a secure interaction and safe haven for the grieving person. If our early attempts to confide are met with rejection or mistrust, one might clam up – or lie, finesse the truth, just to get past the listener’s powers of detection. When confiding becomes positive experience for your client, he or she can begin to grow and pursue resolution.

As our post-loss lives stabilize, so do our accounts. We may work through several versions of “why” a relationship ended shortly after the end, but a year or two down the road, we have achieved a satisfactory or likely explanation. We have achieved closure, the pattern that finally explains what the scattered pieces mean.
In my own life, I struggle when I encounter someone who is grieving because I tend to “freeze up.” I don’t know what to say and am fearful of saying the wrong thing. I don’t know how best to help. I’m curious to know whether this reaction of “freezing up” is common and what I can do instead.

We all worry about how best to offer our condolences, perhaps because we get no practice in it. As children, our questions about death are often shushed and side-stepped. Our elders are reluctant to frighten us or don’t know what to tell us. Later in life, when our peers suffer losses, we feel paralyzed and speechless. We don’t want to say the wrong things—but we have no idea what the right things might be. So yes, it’s very common to “freeze up” or to find ourselves just stumbling through our expressions of sympathy. But keep in mind, our grieving friends do recognize good intentions through their tears.

Better expressive skills can be learned. Over the years, I’ve not only listened to the pleas and complaints of grieving individuals, but have discovered excellent resources about what to do and say. One of my favorite books is Zunin and Zunin’s *Art of Condolence* (2009) — and while it is an art, it is a learnable art. Over the years I’ve collected a sort of reference shelf of such practical guides about grieving. I consult them whenever I find I am groping for the right words to speak aloud or to write in a sympathy card. Some of these responses to heartbroken others may seem simple but they are ingenious, too, because they are honest and focused. For example, you clearly care about your own friend who recently lost her mother. So tell her what you both know: “I didn’t know your mother, but I am getting to know you. So I feel grateful to her for the person you are.” It’s brief, loving, and best of all honest. You don’t need to compose it or make it up. Your friend feels supported and validated, and you feel included and helpful, a real friend. My point is just that the right things to do or say aren’t complicated. Your words don’t have to be eloquent, they just have to come from the heart.

But you don’t need to buy a book or take a course! Frankly, the best thing to say to someone in pain is really the simplest thing: “I am so sorry.” By bringing up the loss yourself, you have given your friend or client a vital gift: validation. You are saying, “Your loss matters, your pain is justified.” You don’t have to elaborate or offer judgment or advice. Just allow yourself first to imagine how it would feel for you, and say so: “I was so sorry to hear of your loss. It must be so painful. I care about you. I hope I can be helpful to you.” Now your friend can make the simplest response, “Thank you,” and you can have a genuine conversation.

Even more than offering sympathy, you should try to listen, and perhaps offer practical help (errands, chores) if you can. But the best thing to offer is contact and presence: being there. And believe it or not, it’s almost always okay to ask about the lost other: “What are some great things your mother taught you?” “Why will you miss your ex?” “Did your pet have silly habits you’ll always enjoy remembering?” Sure, there may be tears to shed; so offer Kleenex. And don’t be afraid to get emotional yourself. You’re human and you care; that’s what happens. That’s closeness.
In fact, any response to another’s grief, no matter whom it comes from, if it emphasizes the grief-stricken individual’s personhood and value, becomes a “way back” toward healing. Caring, honest words can be the most transformative expressions a grieving person will receive. The world of loss is a world of pain and disorientation. We can’t find our way back alone. In the relationship loss field, we say that you can’t actually “recover” because you can’t go back to life before the loss. But you can heal.

You’ve given me several ideas about how counselors and other human service professionals can begin helping their clients: explaining what to expect after loss; providing trust and a safe haven; offering a guide about practices that will promote healing. But are there things not to say when I, as a counselor and as a friend, speak with someone who is grieving?

Everyone’s grief is different, so certainly some people might resent what others welcome hearing. But there are indeed common themes among the complaints of the bereaved, things most of us do not want to hear or read in times of sorrow. Telling someone whose heart is broken that he will “soon get over it” can sound like the grief isn’t worthy of sympathy. Perhaps the worst things to say are the clichés, the empty, even hurtful platitudes: “You’re well rid of him,” “Don’t be sad, she’s with God now,” or “At least you can always have/get another one.” Such statements are dismissive, impersonal and flat. (The very word platitude comes from a root meaning “flat.”) They aren’t just off-putting, they’re simplistic, even hurtful. The speaker or writer would rather avoid feeling personally uncomfortable than to console the other person. In a time of crisis, a casual or thoughtless remark can rupture a friendship. At the very least, it wastes an opportunity for connection.

For counselors and helpers, in the spirit of “do no harm,” I believe it’s critical not to dismiss or discount your client’s pain or the work ahead when it is actually motivated by your own discomfort. One reason that counselors are professionals—not merely “paid friends” as some critics remark—is that counselors’ motivations are not complicated by efforts to stay on friendly terms or avoid unpleasantness. As a helping professional, what you want is for your client to achieve healing.

Perhaps the most puzzling challenge for a counselor to work out is how to separate your personal feelings about loss from your professional concern for your client. This distinction will not be difficult when someone is seeking job advice or settling family conflicts. But counselors are people, too! And loss is the great leveler: we are all at risk for loss as long as we become close to others. You care about the people you love, you dread the thought of losing them. Relationship loss will strike closer to home than any other problem you are likely to be faced with in your professional work.

When you and I recently discussed how to compose this article, I asked you what might be the hardest loss for you to help a client deal with. Do you remember what you told me?

I replied that, as a mother, I would find it most difficult to imagine how to deal with the loss of a child. It would be hard for me to overcome my own fear or know how to distinguish between my feelings and my client’s.

Exactly! You’ve gotten right to the heart of the challenge. Empathy—feeling “with” another person—is something we resist when that experience looks too painful to bear. It doesn’t matter if it’s our “job” to set aside our own concerns: we humans still aren’t built for such demands. That’s where our training makes all the difference: we learn to inhabit roles that give us some objectivity and a different focus. Your “civilian mind” may be in denial, but your “counselor mind” can and must face the important truth, for your client’s sake. Thus your fear is natural, and it’s neither wise nor honest to pretend you are above the pain of loss yourself. In fact, your own distress can inform your reaching out to your client and maintain warmth that is crucial to your client’s willingness to be vulnerable in your company.

“For counselors and helpers, in the spirit of “do no harm,” I believe it’s critical not to dismiss or discount your client’s pain or the work ahead when it is actually motivated by your own discomfort.”
There’s another way to think about this conflict between personal and professional feelings: play on its strengths. Tell your client what a good friend ought to say: “I’m sorry, I have difficulty imagining how I’d deal with such a loss,” but then, as a professional, you can add: “I’m here to help, so you won’t be alone in your work. We’re working together.” The therapeutic relationship is a real relationship, built of give and take, and informed by your differences. You both get to ask questions, you both achieve insights – as long as it’s the client’s needs and goals that are at the center.

Personal loss is a difficult subject to think about, never mind focus on. Yet you have made it your specialty. What is it that you like about this subject that gets you through its challenges?

My own interest didn’t begin as an “academic” curiosity, but as a purely personal dilemma of my own. I had suffered terribly after a couple of painful breakups when I was in my 20’s. I was studying for my doctorate then, and when I researched the literature, I was surprised that my field, social psychology, had nothing to say about nonmarital breakups, or even much about relationship loss in general. So I began to study breakups myself. This in turn drew me into the whole universe of heartbreak and introduced me to other disciplines and scholars with related interests. As I mentioned earlier, most dear to my heart are experiences of disenfranchised grief, losses that are excluded from the attentions of social norms and connections.

I was invited to speak to support groups, for those whose children had died stillborn or hours after birth, or for animal shelter workers who became attached to their rescues. I also found that my writing and my research drew others who had similar stories. We had breakup “parties” during relationships conferences, discussing our personal experiences. These were often funny, sometimes teary-eyed, but always memorable interactions. They led to some of my best friends and best work.

I’m only beginning my practicum work as a counselor, and I have much yet to learn. I know you are not a practitioner, but do you have advice about how to get started?

You’ve got good “instincts” which are really well-learned lessons about relationships and helping. So one suggestion I offer is to follow those educated instincts. You may be just starting out, but all experts had a first day. You are a professional counselor. Your training and education are part of your toolbox – but so are your personal feelings and desire to help, the very things that led you to this profession. Do with your clients some of the things you would do with grieving friends: Invite them to think about their experience. They will teach themselves if you give them the time and place to tell you what. Don’t pity them; invite them to become more competent.
Account making is an example. Writing down our stories is helpful self-therapy, but most people won't keep a journal. Still, the impulse to express the story remains. I've discovered that people who don't "keep a journal" will find other ways to express their story: poetry, songwriting, painting, all manner of talent and artistry are inspired initially by heartbreak. Then these expressions can become fulfilling and satisfying in their own right.

If this seems like fun, it is, and it should be sometimes. Being funny is part of healing. Laughter and humor can be the flip side of grief and sadness. A funny story about a much-missed family member can lead to sadness. We start with some choking up, but we remember good things, silly things, as well, and we end up feeling good, feeling closer to each other. Where there is pain, joy and humor might be brimming nearby, to help us. Don’t apologize for needing that joy. We don’t miss the people we never cared about. We grieve only for those who have given us joy.

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Keynote Speaker: Dr. Pearl Wong

NOHS is proud to announce Dr. Pearl Wong as our 2015 national conference keynote.

Dr. Pearl Wong is an Associate Professor for the Marriage and Family Therapy Program at Pfeiffer University, an accredited Master’s program in Charlotte, NC. She is a licensed therapist and co-founder of New Leaf Counseling Group located in the Dilworth neighborhood. In addition, she is a Clinical Fellow and has been an American Association of Marriage and Family Therapy Approved Supervisor since 2006.
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We welcome your input!