Marriage • Parenting • Spiritual Growth • Sexuality • Relationships • Mental Health
Men • Women • Hurts and Emotions • Singles • Ministers and Mentors • Technology

Communication With Counselors- For Ministers & Elders
I. INTENT AND PURPOSE
When you believe someone needs professional counseling, it is important that you refer that person to a mental health professional who will be respectful and sensitive of the person’s Christian beliefs and values. Likewise it is also important that the counselor be clinically competent, ethical and willing to work with you. Each church will have different relationships with local counseling services because each church has different needs. The information in this handout is designed to help you as an elder or minister to better communicate with mental health professionals. Please feel free to call ACCFS if you have questions or would like additional information.

II. UNDERSTANDING THE COUNSELOR’S QUALIFICATIONS
Because of different kinds of degrees and state licenses, there are several types of mental health professionals. It is important to know what kind of counselor you are referring someone to. Below is a broad outline of the types of mental health professionals.

- **Psychiatrists.** Psychiatrists have been through medical school, hold a M.D. or D.O. degree and are specialized in psychiatry. Psychiatrists work on a medical/biological model of mental illness. This means that their primary way of understanding and treating problems is through use of medications (i.e. antidepressants, etc.). Today, psychiatrists do very little counseling. Instead, their primary task is prescribing, monitoring medications and overseeing inpatient hospitalization treatment.

- **Psychologists.** Psychologists hold a Ph.D. or Psy.D. in clinical or counseling psychology. They specialize in treating mental disorders through counseling techniques and often do psychological testing. Psychologists often work on a bio-psycho-social model of mental disorders. That is, they look at how a person’s emotional/psychological functioning and relationships have created problems and then seek to correct the problems. Psychologists cannot prescribe medication.

- **Social Workers.** Social workers hold a Master’s degree in social work. Their main goal is often to understand the client’s home, work and social environment and then help the person to function better within that environment. In counseling, social workers often focus less on diagnosis and/or testing than psychiatrists and psychologists do. They tend to focus on helping people cope with their life situations by building their strengths and connecting them with supportive resources (mentors, support groups, etc.). Social work is a broad field, and it is common to find social workers in settings ranging from hospitals to nursing homes to human services agencies to mental health practices.

- **Master’s Level Counselors.** Master’s level counselors hold a Master’s degree in counseling, psychology, community mental health, human development, etc. There is wide variability in the backgrounds and educations of Master’s level counselors. Often, they work in a group practice under the supervision of a licensed psychologist. They tend to have a clinical specialty (e.g. eating disorders, marital counseling, addictions, etc.), but they may also do general counseling (e.g. stress management, grief and loss, etc.). Master’s level counselors most often work on a bio-psycho-social model of mental disorders. That is, they look at how a person’s emotional/psychological functioning and relationships have created problems and then seek to correct the problems.

- **Marriage and Family Therapists.** MFT’s hold a Master’s degree in Marriage and Family Therapy. As their name implies, they specialize in working with relationships in couples and families. MFT’s are skilled at helping people understand their family system, build their communication and conflict resolution skills, work through impasses, and deepen their bonds with others. In addition, MFT’s also provide counseling for issues such as depression and anxiety.
A Note on Licensure: Almost without exception you will want to refer people to a counselor who is licensed in your state or who practices under the supervision of someone who is licensed in the state. Making sure that the mental health professionals you refer to have the proper credentials will help ensure the people you refer to them will be treated competently.

Some questions that you may choose to ask a professional counselor about their education, training and licensure:

1. What type of degree do you have and what field is it in?
2. Are you licensed by the state?
3. Do you have any certifications? If yes, by whom?
4. How long have you been in practice?
5. What are your clinical specialties? What kinds of clients do you see most frequently?
6. Are you trained or skilled in treating __________________? (fill in your particular concern)

III. UNDERSTANDING THE COUNSELOR’S BELIEF SYSTEM

When possible, it is beneficial to be able to work with a Christian counselor who is committed to respecting the client’s faith background. Unfortunately, there is no standard for what a “Christian counselor” is. Also, because of distance and lack of availability of professional mental health services, at times, a professional counselor who is not a believer will need to be contacted. Therefore, the following questions may be helpful in determining whether a counselor is an appropriate match for the client.

You can ask a question like, “Could you tell me about your faith background?”

IF YES:
1. What is your view of Scripture?
2. How does this impact your counseling? Do you integrate biblical truths with the counseling techniques? Do you pray with clients?
3. What is your church affiliation?
4. How do you deal with Christian clients whose doctrinal beliefs differ from your own?
5. How would you work with someone coming from a fundamental Christian belief system?
6. Are you willing to learn about the doctrine, traditions, and customs of the Apostolic Christian Church?
7. With the client’s permission, would you be willing to give me periodic updates about how the person is doing in counseling?

IF NO:
1. How do you deal with matters of faith and religious beliefs in counseling?
2. How would you work with someone coming from a fundamental Christian belief system?
3. What would you do if you came to believe the client’s religious beliefs contributed to his/her problem?
4. With the client’s permission, would you be willing to give me periodic updates about how the person is doing in counseling?
5. Would you be willing to learn about the doctrine, traditions, and customs of the Apostolic Christian Church?
6. Could we meet periodically to talk about spiritual or church questions which come up in counseling?

IV. GETTING TO KNOW COUNSELORS IN YOUR AREA

At ACCFS we suggest you develop a working relationship with some counselors in your area. Remember, they need to get to know you (and the Apostolic Christian Church) as much as you need to get to know them. We find elders/ministers are more likely to refer to a counselor that they have met personally. It follows then that counselors are more open to providing feedback and assistance to elders/ministers after they have had an opportunity to meet.
Below are a few suggestions about developing a working relationship with professional counselors in your area.

1. Having a telephone conversation is a helpful way to get to know the counselor.
2. Meeting at the counselor’s office is especially helpful because you can see their facilities and ask them questions face-to-face. This is especially positive if you are making contact with a group of counselors.
3. Meeting counselors for breakfast or lunch is also a good way to get to know them and allow them to get to know you.

V. CONFIDENTIALITY AND RELEASE OF INFORMATION

Every state has laws governing the confidentiality of mental health information. Because of confidentiality laws, counselors cannot speak with anyone (i.e. family members, friends, physicians, elder/minister, etc.) about a client’s condition without written permission (called a release of information) from the client. State laws vary widely on the specifics of the confidentiality regarding the access of parents to the mental health information of their children and adolescents.

- If you would like to speak with a counselor about a person you both are working with, simply ask the client to sign a release of information that would allow you to talk with the counselor.
- If the client wants a release of information it is a very simple process to get one.
- Simply having a signed release of information that gives you permission to talk with the counselor may help the client feel more safe knowing you can talk with the counselor should the need arise.
- Depending upon the situation, there may be a time when it is helpful for you to attend a counseling session with the client.
- If a client refuses to sign a release of information for you to be able to talk with the counselor, the counselor is legally prohibited from communicating with you about the client.

VI. ADDITIONAL INFORMATION YOU MAY WANT TO OBTAIN

The information presented below may be important for some cases you work with and not with others. Depending upon your comfort level with the counselor and the complexity of the situation you may want to ask the counselor some more in-depth questions.

A. UNDERSTANDING THE COUNSELOR’S APPROACH TO THERAPY

Counselors approach therapy from a wide variety of positions. Some counselors are very structured in their counseling whereas others are quite open-ended. Keep in mind that a counselor may match well with some clients, but not with others. The difficulty of matching clients and counselors is why we suggest you get to know several counselors in your area.

1. How do you decide on the goals of treatment? How do you keep your clients involved in the treatment plan?
2. Do you give clients homework between sessions?
3. Would you describe your counseling as structured (i.e. well defined goals) or unstructured (i.e. open ended)?
4. Do you have clients take psychological tests to help understand their issues? (Testing can be very helpful at times.)
5. Do you follow any particular approach to doing therapy? What do you see as the advantages of that approach?
6. Do you include family members, friends, etc. in the counseling?
7. How long do think counseling should take? [Note: this is often a very difficult question to answer and is highly dependent upon the situation.]
8. How do you define successful treatment?
B. LOGISTICS AND ADMINISTRATION

Before starting counseling, clients should have basic information about fees, scheduling, etc. The particulars will vary widely across counselors.

1. How often do you usually schedule appointments (i.e. weekly, bi-weekly, etc.)?
2. What is your hourly rate?
3. Do insurance companies typically reimburse your services?
4. Do you have a sliding fee scale available (if needed)?
5. What is your availability after hours, weekends and holidays? How do you handle emergencies during these times?

C. AREAS OF SPECIAL CONCERN

In counseling, a client’s thoughts, feelings, behaviors, and relationships (past, present, and future) are open for discussion. While some cases have relatively few spiritual/moral dilemmas (i.e. counseling for fear of flying), other cases are filled with spiritual/moral entanglements. It is important that you educate the counselor about your beliefs on issues you are concerned about. Depending upon the case, you may want to ask a counselor about his or her beliefs regarding the following issues:

- Separation and divorce
- Remarriage after divorce
- Homosexuality
- Extramarital/Premarital sexual activities
- Abortion
- Roles of men and women as husbands and wives
- Role of parental discipline of children
- Rebellion by a teenager who is rejecting his/her parent’s faith and/or values