

ASSOCIATION OF PRIVATE PRACTICE THERAPISTS

PANDEMIC SPRING 2020

**PRESIDENTS CORNER:**



Kellie Willms, LMHP CST  
Kaleidoscope Counseling, LLC  
President Elect 2019-2020

Hello to you all amazing essential workers! This newsletter is late and it is my fault. I, as many of us, have had to quickly adjust to a completely new life and schedule. I have found myself busier now than before Covid arrived. My three very active children don't love having to stay home all day and they especially don't like it when I am trying to meet with clients via telehealth! We don't struggle to fill our days though, elearning is intense and expectations are high. As we go through this journey I wonder how each and every one of you is experiencing this. Are there others like me? Those of you meeting with clients in the office, how are you feeling about it? Is anyone else having connection issues with their platforms or finding that telehealth can be more emotionally draining than when meeting with people in person? APPT is working on finding more and better ways to keep us connected to one another during this time, and in coming months. We hope

you would reach out to any of the board members or any of our members for help, support, guidance, or even just a safe space to vent frustrations. Please know we are here for you, in any way we can be, and that the work you do is so important! We often don't receive recognition like so many other professions do, but that's ok, its not why we do the work. We know in our hearts and our souls that what we do matters, and that one by one we are able to change and lift lives up, empowering our clients to perceive themselves, and their world, a little differently. Wishing you all the best, and please be in touch. We hope to see you all very soon.

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**Upcoming Event:**

*Upcoming events are postponed until the current pandemic has passed.*





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*“As they continue to gamble, many gamblers are also turning to Esports in order to get their ‘fix.’”*

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## Gambling and Gaming in the Midst of a Pandemic

With the advent of the corona virus, we are all struggling to adjust to a “new normal.” Currently, we are witnessing restaurants and schools closing and the enforcement of social distancing throughout the country. This pandemic is changing the way everyone spends their professional and recreational time. As therapists, we are all meeting with individuals who are in the midst of great change. We can feel the stress and pressures our clients are experiencing. My intention with this article is to discuss how this pandemic is impacting a subset of clients, gamblers and gamers

On March 17th, Governor Kim Reynolds of Iowa made the decision to close casinos in order to attempt to flatten the curve virus. This will remain in effect until at least March 31st. As a result, the outlets for many gamblers was abruptly closed to the general public. The ability to bet on sports was still available to those who had the mobile app, but the major sporting events in the United States were either cancelled or postponed. The NCAA’s March Madness tournament, which is the sporting event where the most money is wagered all year, has been cancelled. This is both a major loss of revenue for the gaming industry and has the potential to have a substantial impact on those who gamble.

Subsequently, many disordered gamblers, instead of abstaining, will search and find other activities to place bets on. A recent article interviewed several sports gamblers and discussed the different activities gamblers are betting on, ranging from coronavirus prevalence rates to Eastern European sporting events. As they continue to gamble, many gamblers are also turning to Esports in order to get

their, “fix.” For those who are unfamiliar, Esports are multiplayer video games which are played competitively in front of spectators.

These competitions have been wagered on for years and has been recently increasing in popularity, but it has grown exponentially in past several weeks due to the coronavirus. What this means for disordered gamblers, is they are now wagering on events they have less knowledge of and yet they continue in order to remain in the action stage of gambling. This also appears to indicate that Esports will continue to grow in popularity as gamblers become more familiar with the activity, furthering the already blurred line between gaming use disorder and gambling use disorder.

There is evidence this is already happening to some degree. Recent statistics from the streaming service Twitch indicate individuals are streaming video games at unprecedented levels. On the weekend of March 21st-22nd, 97.7 million hours of video game content was viewed during this time period. This would estimate into 2 million users per hour during that weekend alone. Gamequitters, a website dedicated to assisting addicted gamers reduce or discontinue gaming, reports gaming is up 75%..

This appears to indicate a correlation exists between the increased gambling activity on video games and the number of hours video games are being watched. This does not, obviously, account for the entire surge in video game viewing. With the large number of

children who are out of school attempting to entertain themselves by watching video games. Many parents I work with report they are struggling to find the balance between getting their own work done and keeping their children entertained. The difficulty with this is that it is increasing the frequency and amount of games children are exposed to. As we know from substance use and gambling use disorders, the amount and frequency of use does increase the potential of dependence. The current climate is definitely increasing our opportunity for risk to gaming and gambling use disorder.

So what are some solutions to these issues during this time of social distancing? For those who have gambled, it requires us to be vigilant in looking for withdrawal symptoms such as restlessness or irritability. This is challenging, due to the fact many individuals are likely feeling restless or irritable as a result of fears around COVID, but relevant as these are classic symptoms of withdrawal. It is important to ask these questions for 2 reasons: 1) gamblers have a high rate of domestic violence in their relationships so a period of withdrawal may increase the risk of abuse in their relationships; 2) As gamblers begin to gamble on activities they are less familiar with they increase the risk of placing their families in more desperate financial situations. The Gamblers’s Assistance Program provides treatment free of charge to those with gambling problems or to immediate family members. For

## Gambling and Gaming in the Midst of a Pandemic

For gamers, and for parents who are concerned about their child's use of gaming and streaming, some suggestions for parents is to find other activities for their children to become more involved in. Many of the gamers I work with enjoy role playing games such as Dungeons & Dragons. Gamers report enjoying the element of storytelling and control they receive from these types of games. Reading is also a positive activity for gamers as it promotes delayed gratification which is important for individuals who are drawn towards video games to practice, as games are more apt to provide immediate gratification. One of the reasons I am apt to encourage activities such as Dungeons and Dragons is that many gamers report feeling lonely and these types of games promote social interaction in areas they already feel competent in. Other techniques that can be helpful during this time period are grounding or mindfulness. We are looking to interrupt the, "flow state," of both the gamer and gambler or the time period

where the addict is escaping from boredom or stress. I typically recommend time limits and taking breaks from the game as well as this also separates the flow state. Finding alternative forms of entertainment will prove to be a challenge for some, but can also be a fun way to bond as a family. If you or anyone you know, please contact one of the following numbers to be referred to free counseling. The GAP Helpline-1-833-238-6837, Nebraska Council on Problem Gambling 1-800-522-4700 or myself at (402)440-5094. For more information please visit <https://problemgambling.nebraska.gov>.

## Grief and using trauma-informed care during Covid19

The media has been providing updates regarding the COVID-19 pandemic recently, including statistics of confirmed cases and deaths. Behind these anonymous numbers are stories are networks of family members and friends. I am sure most of you have been hearing how the pandemic is affecting your clients during sessions. Those in our field are also being affected personally, whether this is through transitioning to telehealth, adjusting to children being home from school, or managing your own thoughts and emotions about all that is occurring within and around you. For some, the impact of the pandemic is hitting closer to home and the statistics have names or faces. I am one of those. You see, the first victim of COVID-19 in Lincoln was my brother.

Although I am disclosing my name, I am also trying my best to

respect the confidentiality of other family members and friends of his allowing them to choose who, when, or if to make contact.

Grief takes on many forms and we typically think of it as the loss of a loved one through death, as the friends and family around my brother are experiencing, each in his or her own way. There is also another type of grief that many of our clients and we are experiencing and one that many around our world are experiencing now as well. Our world has changed, and we and our clients have, at least temporarily, lost a sense of normalcy in our lives because of the pandemic. It is a collective grief that seems to be impacting all our lives in different ways.

Grief can be a result of change and our world is experiencing changes in a way that we have

never seen or experienced in our lifetime. For some, this grief may be associated with the loss of a job as businesses are being closed and experiencing a loss of income, not only for employees, but also for employers. It may be a grief associated with the inability to attend a church, wedding, funeral or graduation. Others may be grieving a sense of physical safety, economic safety, or the safety of the physical and emotional connections. Some may experience anticipatory grief - an uncertainty about what the future holds. The illusion that one can fully control their lives and futures has been challenged or shattered for many.

Please keep in mind during this time that those in the helping professions are not immune to COVID-19 nor the effects of stress and trauma either. Francoise Mathieu who wrote, The Compassion Fatigue Workbook refers to

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## Grief and Using Trauma-Informed Care During Covid-19

Helpers may feel effects if they are unable to “refuel and regenerate” (compassion fatigue), transform their view of the world or have difficulty with intrusive thoughts or images due to cumulative exposure to traumatic images and stories (vicarious trauma), have PTSD-like symptoms from “bearing witness” to traumatic events (secondary trauma) or ongoing experience stress and frustration because of the workplace (burnout). As you consider how the pandemic is affecting your clients and those around you, please take time to practice your own self-care and find a supportive network for yourself as you continue to support others.

Awareness of trauma responses and trauma-informed care is likely be of significant importance in the coming weeks and months and I also anticipate that our system may be called on to provide some additional support and/or education to those in other systems that may be impacted by the pandemic, such as healthcare providers and first responders. Over the past several years, my passion has been trauma-informed care because of its systemic view of how trauma may be addressed throughout our practices, agencies and systems and it reminds us to also be there for each other.

SAMSHA’s TIP 57 Trauma-Informed Care in Behavioral Health Services is a great resource to begin this journey if you are interested.

Many individuals have reached out and supported me, please know that I am thinking about each of you and encouraging each of you to stay safe, both physically and emotionally as you continue in this journey of unprecedented times. Together, I believe we have the opportunity to grow stronger as practitioners and as a system. Sincerely

Pam Oltman MS,LIMHP, LADC

## Sharing of Information in Divorce Situations

Most therapists consider divorce and child custody cases the most threatening cases to navigate. In one scenario, the therapist receives a subpoena from an attorney of either parent in a divorce case requesting records regarding the children that are in counseling. Sometimes in these cases, there is no attorney involved, the “other” parent is simply wanting information. Therapists must correspond accordingly based on law and regulations.

This scenario often plays out like this – a divorced or divorcing parent brings a child(ren) for counseling, and the other parent separately inquires about records or attendance so they can “assess” or “assist” in how their child is doing. This puts the therapist in a particularly difficult spot, usually feeling caught in the middle. Therapists often attempt to appease each parent so that each parent feels involved in parenting their child, and frequently in circumstances where the parents do not talk to each other. Complica-

tions exponentially increase when one parent makes the other parent out as a villain, or wants the counselor to advocate for them either to the kids or to the court.

Therapists have invented a variety of remedies for this. I know of some therapists who have required signatures of both parents before information is released. Some other therapists I know have yielded only to the parent who has full custodial rights to the children. These approaches may be useful in any given situation, but also may not comply with the law regarding parental access to information about kids in counseling.

This article is not meant to provide legal advice, and, as always, it is strongly recommended to seek independent legal counsel to navigate these issues. So, nothing contained here is intended to be legal advice and should not be construed as legal advice.

However, Nebraska (like most states) has statutes that may provide some helpful guidance for therapists. The statutes (Neb. Rev. Stat. §§ 42-381 and 71-8403) require that in any final decree or similar court orders, (1) each parent shall continue to have full and equal access to the education and medical records of his or her child unless the court orders to the contrary, and (2) either parent may make emergency decisions affecting the health or safety of his or her child while the child is in the physical custody of such parent.

Thus, if a parent other than the one who presented with the children requests either information or records pertaining solely to the child(ren), the therapist is likely obligated to comply. There is no need for both signatures nor any preference given to who has the greater legal custody. Records or information must be released in a timely manner.

Most experienced therapists state that having direct conversation with the parent requesting information usually diverts problems. Frequently, communicating between the parents is timeconsuming and emotionally exhausting for the therapist, but this statute recognizes that all parents have their parental rights protected.

There are, of course, exceptions. The statute dictates that access to such records shall be provided upon written request, EXCEPT that mental health medical records may be withheld if any treating practitioner determines in his or her professional opinion that release of the records would not be in the best interest of the patient (the child). In that event, the records can be withheld unless the information is required by court

order. In other words, if the therapist believes that releasing information to the other parent may constitute any sort of harm to the kids AND have a reasonable clinical reason to believe that harm could occur, the therapist must document this in the client file. It is considered wise to also communicate this to the other parent, even if disclosing this information would create an intensely negative response (usually towards the therapist). Therapists must use their best judgement to protect their clients – in this case usually the kids.

Many therapists may be afraid of this situation, fearing consequences from either

However, most therapists have developed skills and knowledge for these situations that fall within a standard of practice. Most therapists are, indeed, well qualified to make such decisions and negotiate through this kind of maze.

There are probably several scenarios similar to this that may raise similar concerns. As always, each situation is unique, and if uncertain therapists are always advised to seek independent legal counsel. This article is not intended nor should be construed to be legal advice, but hopefully provides some positive and encouraging directions for uncertain therapists.



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## Upcoming Lunch and Learns:

All Upcoming Events are currently postponed due to Covid-19

Cost:  
\$35 member / \$45 non-member / \$20 student with ID  
Register at: <https://apptne.com/events/>



## Association of Private Practice Therapists

*The Association of Private Practice Therapists (APPT) is a multi-disciplinary group of mental health professionals in Nebraska. The organization provides a forum for the exchange of practice management information and the development of advocacy plans for mental health practitioners and consumers.*

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*APPT is the result of grassroots meetings of private practice professionals who were interested in impacting the regulation and legislation of mental health services. At the time the meetings were held in the fall of 1993, 45 participants established the initial organizational structure of APPT. Currently the organization has close to 200 members. Any mental health practitioner in Nebraska is invited and encouraged to join.*

**We're on the web:  
<https://apptne.com/>**

