

## Volume I, Issue 2

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## Forget Resolutions — Goal Setting is Key!

**I**t's April; therefore, gym attendance is starting to go down. Many people who set resolutions with the greatest intentions in January are experiencing failure despite all the articles in the media who ran tips on making them last. As a counselor, I know only one way to make a resolution last, and that's to call it what it is—a goal.

Zig Ziglar, a powerful motivator, and successful salesman as well as author, died last November. He often attributed his training program's success on teaching participants to set goals properly. Studies have shown, according to him, that a mere 3% of people set goals. Contrast that with, according to <http://psychcentral.com>, the 40-45% who set resolutions. I believe this difference is due to fear of not reaching a goal. A res-

olution is only a promise you make to yourself, but a goal is something you set with a deadline in mind, a measurable result, and it is usually written down. A goal has something a resolution defies, and that's accountability. So, instead of hopping on the resolution band-

wagon by declaring shallow, oral promises to yourself that are acceptable to break, make 2013 truly different—**set a goal and win!**



Contrary to the beliefs of many, **counseling is not only therapy, it is also life coaching.** Many clients see me on a regular basis to receive coaching on setting goals that will help them live up to their full potential.

If you find yourself making a resolution you doubt will stick, make an appointment to get help setting goals instead!

## Keys to Player Development On and off the field



If you've ever sat on the sidelines during a soccer game, you know they can turn brutal; referees making tough calls, parents sometimes losing control, coaches screaming in disappointment are just some of the negative aspects that sometimes occur. It's no wonder kids sometimes quit a sport at which they excel because they struggle to cope with the pressure under these conditions.

These situations make what **ED KENNEY**, USSF National Soccer Trainer, does with his players special. He approaches the game with an eye for what the individual player needs to play with confidence in every position. This isn't a one-size-fits-all approach because Kenney realizes each player is working on their own goals and are on a different journey in skill development. "It's not always about getting the ball to the biggest, fastest, strongest, kid," he says. They play a minimum of two positions per game and problem solve solutions for improvement each time rather than focus on failures.

In contrast to the coach yelling on the sidelines mentioned earlier in this article, **Ed Kenney treats the game as a teacher does the test**—it is a time to observe, assess performance levels, and plan the next "class" or practice. This approach is what educators refer to as Problem-Based Learning, which is one adults use in everyday life. Students/players are presented with a problem or question to explore on their own, the end result depending on the individual's strategy.

Kenney's classroom work takes place problem-solving skills with support from rience—from beginners to Olympic De-tactical or conditioning, every kid has a that keep them active. There are no laps, correction, then put right back into the

**"You have two eyes, two ears, and one mouth. Use proportionally (4-1) when watching your child play a sport."**

during practice where players can test their a coach who works with all levels of expe-velopment. Whether the day's focus is on ball at their feet during small-sided activities lectures, or lines; kids are pulled aside for action to demonstrate.

The players aren't the only people on ment. Ed and the other trainers working

the team focusing on their skill develop- with him are constantly working on updat- ing their skills and knowledge through seminars, certification, and other professional development.

### Where mental skills training comes in

Ed and I have both observed the largest mental hurdle for players is typically failure, which can make even the most talented player make costly mistakes on the field and/or cause them to lose interest in the game. Many players even struggle with fearing the unknown during tryouts or a critical game. **"Mental skills training helps the players address these and other issues head on and set a path or plan for success,"** says Kenney. When players utilize counseling to address these fears, they can regain control of their mind and body while improving their coping strategies when they're alone on the field.

Mental skills training doesn't stop with the player; parents need involvement as well. There's a fine line between pushing your child to perform at the levels you believe they can achieve and pushing so hard the child develops fear and anxiety over disappointing someone important to them. Kenney tells parents, "You have two eyes, two ears, and one mouth. Use proportionally (4-1) when watching your child play a sport."

To obtain services for your athlete(s) or team, please contact: Ed Kenney, Director, First Touch Soccer Academy, [ekenney@paralleltech.com](mailto:ekenney@paralleltech.com).

## Mind/body wellness topic

### SEASONAL AFFECTIVE DISORDER

According to the American Psychiatric Association ([www.psych.org](http://www.psych.org)), January and February are the most difficult months for SAD sufferers. SAD is a form of depression, but one you can usually predict with the calendar. Anticipate your winter slump and plan your favorite activities more often than during the other months. It's winter, but get a pedicure anyway! Bundle up and go for a walk or do anything that brings you joy. The cold makes us all want to hibernate, but we're not bears! Keep moving so your spirit doesn't stagnate and add to your depression. Make an appointment to talk even if you aren't sure why you're sad. I sat down with two Mason-area professionals so they could share their advice as well.

**DR. MICHAEL BACH:** People used to argue SAD was part of a person's imagination,

but now the American Medical Association validates that by providing a diagnosis code under which providers can bill insurance companies. I rarely prescribe anti-depressants for SAD because there are activities, like Karen mentioned, patients can participate in to lift their moods until Spring comes. Exercise is key because it increases your "feel good" hormones and is the best for your mood. Most people can overcome SAD without pharmaceuticals because it is a temporary condition predicted by the calendar. If you still feel you need an antidepressant, see your doctor and/or find a counselor who can help you cope during this season.

**You can schedule an appointment with Dr. Michael Bach, by calling his office at:**

**Mason Family Medicine & Associates**  
6294 Thornberry Ct., Ste. 820, Mason  
(513) 492-8541

**TANTALIZE TANNING STUDIO**  
6011 Tylersville Rd, Mason  
**April Specials: 20% off all tanning lotion.**

**BETHANY:** The warmth and light from indoor tanning can lift your mood, especially for SAD sufferers. Vitamin D production has been associated with exposure to UVB rays, but many indoor tanning facilities do not offer UVA AND UVB. Make sure you ask what percentage of each ray you're getting before you go under the bulbs. If you're scared to try indoor tanning because of all the negative publicity, just keep in mind that tanning indoors is the same process as tanning outdoors, but it allows you more control. Start out in small doses and listen to the tanning studio professionals because they know how to prevent you from burning.



## Coping with Codependency

### A client shares her story

**A**s I turned side to side rubbing my now-showing pregnant belly while checking the fit of my new maternity clothes, my mom said, "You've never looked more beautiful." When I turned to look at her, she had tears in her eyes and, for the first time in a long time, she looked like my mom. Her hair was soft, not brittle, and her spirit was happy rather than down-trodden by the past few years of illness.

This moment, this day is forever frozen in my mind. It plays incessantly over in my mind with the same conclusion each time. Over my lifetime, I probably spent more time with my mom than anyone. We were **inseparable** and more like sisters than most. We talked several times a day and spent time together that we rarely took for granted.

Most people are touched when I share this story of everlasting love, but I am haunted by it because I have now learned that my mom's open, giving spirit killed her. She was one of those people who lit up every room into which she walked and would do anything for anyone as long as they asked. In turn, I grew up trying to compensate for her mood swings by getting better grades, doing more chores, or giving her gifts. I would do anything to help her get off the couch after she had gone through a long spurt of giving until it hurt. **Most people do not give until it hurts, but codependents do.**

When my mom died, my life was broken. I had given up my dreams to take care of her in her final years and became bitter when the harder I worked her conditioned worsened. It has been nine years since she died and I've just gained the ability to talk about it without feeling worthless for failing to save her.

My therapist at the time introduced me to Melody Beattie's book, "**Codependent No More,**" and it was earth shattering to find reasons for all my pain on every page. Karen tells me she recommends this book to all her clients suffering from relationship addiction, and I wholeheartedly agree!

Although therapy has helped me, I don't work on this actively enough to say I have beat it. I still desire and work for others' approval and love. The loss of my mother still makes me ache because I saw her as a source for my happiness, and I still have trouble **leaving a relationship even if I'm fully aware it's best.**

**Check out my blog at: [www.parentingwithoutmom.org](http://www.parentingwithoutmom.org) for more stories of my journey.**



## Client Patience Appreciated

**A**s many of you are aware, January and February were challenging months for your insurance companies and I as we were adjusting to billing code changes released January 1, 2013. Without getting too technical, I thought I'd try to explain how it may effect you.

When the **American Medical Association** reviewed the codes and were considering changes, all professionals in the field knew was that a change was coming. I have received many updated contracts from several insurance companies, however I have yet to receive updates from others.

What this all means: I may request clients to update their consent-to-treat forms to reflect any changes in co-pays and session lengths as approved by each insurance company. CPT codes for individual sessions include 30-minute, 45-minute and 60-minute sessions. The 45-50 minute and 75-minute sessions no longer exist. Some insurance companies are requiring prior authorization for an hour session. I apologize how these changes will affect your future services and will notify each individual client as I am able to catch up with those changes. Thank you for your patience!

**If you have any questions or concerns about how these changes will effect your coverage, please call your insurance company.**



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For more information about services provided, or to schedule an assessment, please call: **513.229.0434**