

COGNICA

THE CANADIAN COUNSELLING AND PSYCHOTHERAPY ASSOCIATION

HOPE **CREATIVITY** and **CONSENT**



In a time of pandemic

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CANADIAN COUNSELLING AND
PSYCHOTHERAPY ASSOCIATION
L'ASSOCIATION CANADIENNE DE
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BOARD NOMINATION ANNOUNCEMENT

The Board of Directors for the Canadian Counselling and Psychotherapy Association is elected every two years. Elections will be held in **January 2021** and the new Board assumes its responsibilities in **May 2021**. The President-Elect and all regional Director positions are open for nominations.

Descriptions for these positions are as follows:

President-Elect: In addition to assuming the duties of the President should both the President and the Past-President be absent, the President-Elect shall perform other duties prescribed from time to time by the Board, coincident to the office. Specifically, the President Elect will:

- Work closely as consultant and advisor to the President;
- Keep informed on key issues, and
- Carry out other duties as assigned by the Board.

Regional Directors: The Board of Directors is a group of CCPA members who represent the interests of the CCPA membership in all provinces and territories in Canada. The Board governs the Association by making policy which determines its long-term direction. Each Director has a maximum of two two-year terms on the Board and must either reside or work in the province/territory s/he represents.

One Director represents each region of Canada. Exceptions are New Brunswick, Quebec and Ontario where there is one Francophone and one Anglophone Director from each province. The Director for British Columbia also represents the Yukon, the Director for Alberta also represents the Northwest Territories, and the Director for Manitoba also represents Nunavut.

Looking for more information on the regional director role? [Listen to this webinar!](#)

The Board Nomination form for the term 2021-2023 can be found [HERE](#).

The deadline to apply is December 15, 2020!



Celebrating our **Code of Ethics** in Action

PRESIDENT'S MESSAGE

On June 1st, 2020, our newly revised [Code of Ethics](#) was released. The revisions were prepared by a CCPA Committee consisting of Lorna Martin (Chair), Glenn Sheppard (Ethics Amicus), Jean Blackler, Louise Blanchard, Jonas Breuhan, Corrine Hendricken-Eldershaw, Kathy Offet-Gartner, Tina Nash, Simon Nuttgens, and Shelley Skelton. We are deeply appreciative for the commitment and expertise of each committee member, the assistance from National Office throughout the process, and the many contributions from individuals and groups during the multiple peer review processes.

I find myself reflecting on the six fundamental principles that guide ethical conduct which are embedded within our [Code of Ethics](#) and CCPA's policies in general: beneficence, fidelity, nonmaleficence, autonomy, justice, and societal interest (2020, p.2). I also find myself reflecting on the seven sacred Indigenous values that are now included in our [Code of Ethics](#) (2020, p.5) of courage, honesty, humility, respect, truth, love, and wisdom. As an Association and as counsellors and psychotherapists, we have a moral and professional responsibility to respect the dignity and basic right to just treatment of all people, and to *act* in the best interests of society. It

is not enough to recognize and avoid injustices; we have a greater responsibility to act to safeguard the dignity and rights of our clients, students, supervisees, colleagues, and research participants (2020, A2). This often requires courage that is grounded in honesty, humility, love, truth, respect, and wisdom.

A critically important spotlight is currently shining on the darkness of ongoing systemic racism and violent discrimination, the depths of its roots in centuries-old colonialism, and conditions in present-day society that allow it to insidiously flourish. Black, Indigenous, and people of Colour, individually and collectively continue to live and breathe historical and present-day oppressions and traumas. In the midst of the 2020 pandemic, the rallying cries to address unconscious and blatant bias, violence, and oppression are rippling across our Nation and the globe. The urgent calls for societal change confirm that our society has a long way to go in listening to and uplifting the voices of racialized people, while walking alongside each other with humility, respect and learning how to act wisely in the pursuit of justice. There are many basic human rights that have been and continue to be stolen by colonial and paternalistic attitudes.

No longer can personal/communal safety, adequate housing, employment, accessible wholistic health care, healthy food, clean water, and other social determinants of health be 'needs' for some and 'givens' for others. We must all take action. Together.

As members of CCPA and as counsellors/psychotherapists, we have an ethical responsibility to uphold values and principles of fairness, equity, human rights and dignity embedded in our [Code of Ethics](#). We must recognize the painful experiences of our racialized colleagues, clients, and students, and stand together with them against racism and discrimination of all kinds. We also must examine our individual biases, and the unearned privileges that many of us possess. As Mi'kmaw Elder and Dr. Albert Marshall has encouraged us, individuals must do the personal and professional work of examining the following four questions: (1) Where do I come from? (2) Who am I? (3) Why am I here? (4) Where am I going? Only then can we move forward in the spirit of Etuaptmumk (Mi'kmaw phrase for Two-Eyed Seeing), where we truly recognize and hold the space for the histories, stories, knowledge systems, and strengths of each other (CCPA Code of Ethics, 2020, p. 5).

As an association, CCPA remains committed to reflecting on its own privileges and unconscious biases, and the ongoing journey for truth and reconciliation. One example of first steps on this journey exists in our [Code of Ethics](#) (2020) which now contains a section, "Indigenous Peoples, Communities, and Contexts" (Section I, p. 30). This section, developed in collaboration with our Indigenous peoples and in response to the [Truth and Reconciliation Commission's Calls to Action](#) (2015), is a grassroots exploration of ethics that acknowledges both the historical traumas and cultural vibrancy of Indigenous Peoples and communities. The section

is a starting point. It will continue to be part of a living, evolving document as CCPA is committed to the concept of living documents with respect to the [Code of Ethics](#) and [Standards of Practice](#).

To move forward together, we must clearly live a life that exemplifies our belief that there is no room for racism or discrimination of any kind in a just society. As Angela Y. Davis has stated, "In a racist society it is not enough to be non-racist, we must be anti-racist." We must be willing to have courageous conversations and act with discernment and wisdom that is guided by those who must be lifted. May your summer season be filled with an abundance of opportunities to be courageous, kind, and loving with yourself and one another, as we take action together.

Merci Beaucoup, With Gratitude,
Wela'lioq, Woliwon!



Jenny L. Rowett,
PhD, LCT, CCC-S
President, CCPA



Hope...

PRESIDENT-ELECT'S MESSAGE

Hope - is it a noun; a verb; an emotion; a lifeline; a promise; an illusion; a luxury; or something entirely unique? In actuality, it is of these things and more. Hope is such an individual construct, one that is located in time, space, social and cultural context, not to mention ability, capacity, and the availability of supports. And as I sit here contemplating what to write, I can't help but highlight the many, many positive signs I see, read, and hear that bring me hope - hope for humanity; hope for nature; hope for the end of this virus, and the death, despair, and disruption that accompanies it; as well as the hope that we will open our eyes and hearts to see, admit, and challenge racism, hatred, ignorance, and all forms of prejudice, that we can eradicate these toxins from our world. Hope, is elusive and necessary, for without it, there can be no action or change and the events unfolding around us right now are highlighting the absolute necessity of change!

Covid forced us into our homes, to adapt quickly to; working and studying from home; ordering food

and supplies to be delivered to our doors; home-schooling our children; learning how to support one another and our clients virtually; socially distancing while still attending to our need for social contact, human touch, and relational affirmation; to wearing masks, gloves, washing hands, and using sanitizers like never before. Covid has forced us to look at how we treat our elderly, our most vulnerable, our service providers, and how we have taken for granted our personal health and safety on a routine and daily basis. We were not prepared for any of what has been happening in the world right now; yet we are learning, adapting, altering, surviving, embracing, and some even thriving. It is these stories that give me hope, that bring me joy, and feed my soul. It is these stories I want to highlight and celebrate.

We have seen pictures from around the world of smog that has lifted in Paris, China, Tokyo, New York; of the Venice canals running clear and clean; of animals roaming freely on deserted streets or munching on tasty dandelions and of weeds in the

ditches of major highways that have no traffic, with higher than average offspring; we have seen pods of whales and other marine life on both the east and west coasts return with more offspring and larger groups, looking healthier than they have in years. We have seen neighbours helping neighbours; children decorating their windows and doors with messages of hope, praise, love, and appreciation; bakers sharing recipes hung from trees or left in baskets; goodies shared with others; care packages and meals being delivered to those who need them most. We have seen front line workers who are working hard to help those hardest hit; those who sew making masks, gowns, and scrub bags for those who need and want them; companies donating supplies, money, services, trailers, and trucks often without being asked; people sharing their skills and talents freely on-line or from their driveways and sidewalks to teach us new skills, to help keep us fit, to bring us joy, to entertain, and to assure us and give us hope.

For all the negative, the doom, gloom, despair, and disruption there is with this virus and the economic crisis that has accompanied it, as well as the violence that we have witnessed, there is so much good, and so much to be celebrated. As a society, as a country, as a community, and as a profession, we have come together in ways rarely seen before. This is the time for us to raise our voices, to raise our profile, and to raise our humanity and speak up, so that we can spread the seeds of hope, goodness, equity, social justice, care, kindness, and acceptance. As counsellors and people drawn to help others, we have a major role to play in this precarious time. Helping ourselves and others to remain healthy and grounded, helps those around us and those we serve. We offer hope, suggestions, tools, ways of thinking and being that assist people to be their best selves, with kindness, compassion, respect, and unconditional positive regard. We are

leaders, even when we don't identify as such. People turn to us every day to help, guide, reassure, teach, and support them and their families. We are beacons of hope. It is our duty and responsibility to also keep ourselves healthy and the best we can be. Reaching out to one another, to our own support systems, to our Association to learn new skills, share stories of strength and resilience, to celebrate our growth and recognition by more insurance companies, more EAPs, more benefit providers—these are the markers of a strong Association, made up of resilient members!

I am proud of us! I am proud of all we have accomplished, and all we will continue to offer. I am proud that we as counsellors and psychotherapists, are the epitome of all that is hope, for we know how to turn an abstract into action and provide the fuel that drives change and adaptation. Take pride in what you do, give yourself a hug, and know that you and the gifts you offer matter. For as Margaret Mead offered years ago to never doubt what a small group of committed people could do—just imagine what she would say about what a group of nearly 8000 can do!

Wishing you health, happiness, and an abundance of hope!

In service,



Kathy Offet-Gartner,
PhD, R.Psych (AB)
President-Elect, CCPA

Self-Care Using Creativity: A Personal Approach

Nicola Sherwin-Roller MA., CCC., RCAT

In the Fall 2019 edition of *Cognica*, I published an article that highlighted the results of a National Self-Care Survey. In that article I reviewed a National survey in which 1,300 CCPA members answered questions and provided feedback on self-care and professional wellness. We looked at “What Activities Promoted Self-Care and Professional Wellness”, what participants did to “Promote Self-Care During Stressful Times” and “What You” did “To Promote Good Time Management Practices.”

Through the survey and literature review it was identified that self-care needed to be seen as a holistic process which respects the person as a whole being in each domain. That this practice was imperative for practitioners, not only within their own selves but for maintaining professional standards and clients’ wellness.

There were many great comments and lots of feedback from people as to how this could actually look, especially when time or financial resources were limited. With this in mind I am going to share some creative strategies in each of these domains, that I have used at different points within my life span. Some are transitory and have been used at specific moments and some have become tools that are picked up regularly. In each of these processes, art has informed, assisted with wellness or been a beautiful stress relief process. The headings come from the image at the end of the first article, [Fig. 1](#) which broke down ideas into five sections: spiritual self-care, psychological self-care, physical self-care, relationship self care and professional self care.

Spiritual Health Care (Fig. 2)

Using creativity can be a way to practice mindfulness, engage in reflective practices and can place me in a meditative mind space. I have a home-made journal, that I keep at my office, in which I create small pieces of art. Sometimes these images use materials left over by clients (mainly paint or clay), sometimes they are doodles, zentangles which help me reset between sessions, sometimes they are personal images which evoke a sense of peace or connectedness to nature or are mindfulness explorations with interesting materials, sensory, tactile pieces. Most take less than 5-10 minutes to produce and are a lovely way to connect to that place within myself that feeds my spirit.



Fig.2 Selection of Journal Pages

Psychological Self-Care (Fig. 3 & 4)

To me creativity comes in so many forms, it's not just paint and markers and crayons, it's putting different coloured foods into a stir fry, or planting a mix of colourful flowers in a pot or flower bed, its singing along with my favourite play list in the car as I drive in to work. It can be knitting (which I am dreadful at) or sewing or creating your space. When using creativity for psychological self-care the main take away I have learned is that anything goes; It's the way we teach our minds to approach these tasks. So, when I feel I am "creating" a meal, rather than making one it feels different, more rewarding, less of a chore. Slowing things down helps too. At different life stages, new baby, renovations, feeling overwhelmed with referrals, feeling pulled in too many directions, there is a mental space that says there's not enough hours in the day, I can't afford (money and/or time) to do self-care, engaging in this will take time from that. In those moments when it has felt too time consuming to do art, I have carried my camera with me on the drive to and from work. Instead of thinking of all the things I need to do, the endless lists, I *really look* at my surroundings. If something interests me, I stop and take a picture. I actually timed it one day, it took me no longer to get where I was going by taking my camera along, but I *felt* less rushed and panicked. Sometimes the photographs became quick art pieces afterwards (Fig.4 Cloud Burst). I continue to do this in daily practice and have a very full camera roll on my phone, thank goodness for 64 GB storage.

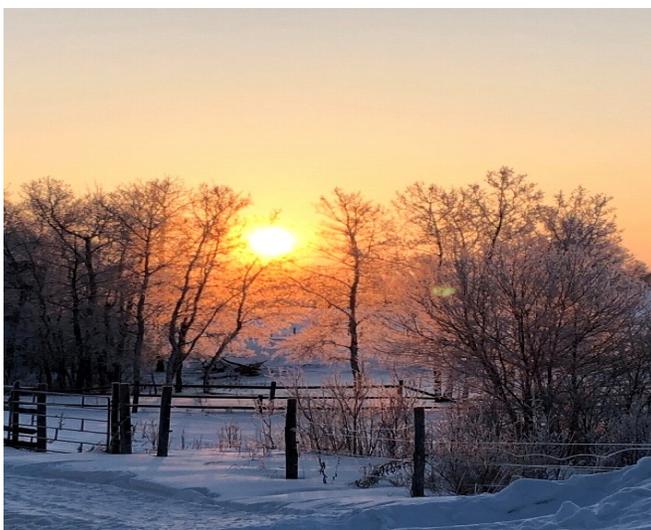


Fig. 3 Winter morn



Fig.4 Cloud Burst

Physical Self Care (Fig.4,5a&b,6)

Over the last 15 months (at the time of writing this) I have been utilizing my artwork to help encourage optimal brain health after an accident with my horse left me with a concussion. There have been several ways art has helped, and even had significant impact on, helping my brain communicate more effectively between hemispheres and working towards recovery from this injury. Painting images from photographs that I have taken or, of subject matter that brings me pleasure has been one approach and eyes closed bilateral drawing another. I noticed in the painting for pleasure images the choice of colours, textures and types of paint (metallic, matte, gloss medium, modelling paste) were reflective of where my "health" was at at the time. Images reflected issues of light sensitivity, heightened senses. Subject matter and titles reflected where I was in the healing process and informed me greatly as to what helped and what did not. It also helped me feel occupied and productive as screen and lights were a no no for quite some time. I really felt that being able to paint and create helped healing, provided relaxation and healthy stimulation. It also taught me that I could work at it for small chunks of time and still create an image in a reasonable time frame. Working in smaller chunks of time meant that I could explore more with texture and paint thickness, because there was time for things to dry and cure in between sessions.



Fig. 4 Stick to The Shadows – 1st painting in the series

This painting was a first for me in adding metallic paint. It had an interesting effect in how it responded to light. Depending upon how light hit it, the strength of light, would mean certain areas were seen clearly or hidden by the 'shine'. An interesting reflection on my light sensitivity issues



Fig. 5A & B Surprise It's A Doodle

5 paintings in, these small 12"x12" squares are the smallest of the paintings but possibly the most heavily textured. Starting to come out of the dark and the need to cover from the light sensitivity.



Fig. 6 Smudge 2; Emergence

The last in the series so far, and still a work in progress. Shadow and light interplay, now I move more freely between the two.

Relationship Self-Care (Fig 7&8)

A few years ago, a friend and I were struggling to find time to connect. Both of us expressed also finding it difficult to be creative on a regular basis and were feeling that lack. So, we set ourselves a challenge to send a photo a day to one another via text. We did this for almost a year. Sometimes the images sparked conversation sometimes the images were the conversation. It was a great way to keep connected with a good friend. It also had the added benefit of being more mindful and present in looking for opportunities of things to photograph. Lots of times the objects were ordinary day to day things, household objects, patterns on clothing, food (fig.7). Different filters and apps were used to make them more interesting or change their appearance, plus it added an element of fun because it was very experimental and exploratory. As I think of self-isolation protocols for the current COVID-19 epidemic, I think this of this exercise and how it could be a really neat way to remain connected, sharing and learning more about one another. In fact, we started this practice again this morning.



Fig. 7 These are actually bags of tomato juice freshly made from the garden, but with the horror filter harvest becomes Halloween.



Fig. 8 Raven Loved how changing the colours brought more movement to the wings.

Professional Self-Care

For art therapists, utilizing artwork has always been a great professional tool, not only for personal wellness but in processing sessions and engaging in reflective pieces which inform and debrief. Collaboration, mentorship, and learning are also important ways to participate in professional self-care. After attending an experiential workshop on Trauma-Informed practices, our table decided we would continue to experience one of the interventions as a group outside of the workshop. So, for 14 months we made four luggage tags with empowering messages on them. We kept one tag for ourselves and mailed the other three off, one to each participant. We did this once a month with the theme of women as goddess, exploring self-esteem, body image, societal pressure on how we are to perceive ourselves and encouraging one another to step outside of those and embrace the strength of women. By the end of the experience we had learned a tremendous amount about the exercise, what it would feel like as a client to embrace a project like this, the dynamics within a group project and mentored the younger group members new to these types of approaches.

We also each got a “fat book” out of it. This exercise hit so many levels it was a holistic endeavour in and of itself.

Again, as I write this I wonder as to its applications within the current pandemic atmosphere. I do not think I would want to mail them out but to make them then scan or photograph and have an email group sharing tags with one another on a specific theme would be great. Themes can be one word like Hope, Courage, or perhaps exploring the other side of this, Grief, Uncertainty. In exploring these pieces with colleagues and mentors we can create a deeper understanding of the issues we are facing today and possibly how to develop tools and supports for clients, because this is such new territory.



Fig. 9 Fat Book

These are great you can use old ribbon, paper, stickers, feathers, flowers, glitter, old wrapping paper, old greeting cards, quotes.



Fig. 10 Goddess tags –
These were the first ones I made to send out to my group

Summary

Art has been something I have engaged in from early childhood to today. It has always been a way for me to explore and express my inner landscape. Its therapeutic value has never been lost on me and it brought me to the field of Art Psychotherapy and Creative Arts Therapies as a career path. Throughout my life I have used my art as a way to slow down, take a breath, for stress relief, for processing personal difficulties, solidifying thoughts and ideas and as a healing tool. This article is a window into those personal processes that have helped me maintain wellness and hopefully in sharing it provides ideas and food for thought as to how creativity can support you too. I think many of the ideas shown will work in each of the different domains of self-care as well, it just all depends upon the intention and how you choose to engage in them. Being creative for self-care can take as little or as much time as you feel you have.

What's that? Easy for you to say, you do art? Using art for self-care requires no artistic talent, rather than paint or draw one can doodle or use collage. Grab an empty coffee can and use it to drum a beat. Make a cake, take a virtual museum tour and create a piece in response to what you see, or print out your favourite artwork from that tour and cut it up and use it to make a collage with words as to how you felt about it. Everyone has cameras on their phones now, take pictures and fiddle with colour or effects. Write a poem, start a journal. Reframe how you feel and think about self-care so that even singing in the shower can feel like a wonderful release.

Be well.

NOTEBOOK ON ETHICS, LEGAL ISSUES AND STANDARDS FOR COUNSELLORS & PSYCHOTHERAPISTS

LET'S GIVE *INFORMED CONSENT* THE ATTENTION IT REQUIRES

BY DR. GLENN SHEPPARD



Informed consent is a core ethical obligation for counsellors and psychotherapists and it is extensively referenced in codes of ethical conduct. This is so because it applies to all aspects of our diverse professional services including: individual, couples, family and group counselling, assessment, supervision, consultation, research and professional preparation programs.

The duty to obtain informed consent has taken on increased significance since the helping professions have substantially abandoned the paternalistic attitude of “helpers always know best.” It should be based on a respect for the autonomy of clients and their capacity for self-determination. Informed consent is intended to help clients become knowledgeable about the ground rules for the counselling process and relationship. This applies as well to engagement in other professional services. The process of acquiring consent from clients can be an important first step in establishing a positive therapeutic involvement. It can give an implicit message that the service to be delivered will be based on a relationship of respect and collaboration. Pinals (2009), based on her research, concluded that, “Informed consent can enhance the therapeutic alliance and help improve treatment adherence”

It is not uncommon for counsellors and psychotherapists to provide clients, on their first visit, with an informed consent form, provided by themselves or a receptionist, with a request to begin filling it out while waiting. Many clients will comply and begin this process but others may not be able to do so due to a literacy or language issue or for some other reason so for them this may not be a good start. In any case, completing and signing the form does not ensure that clients have a full and sufficient understanding of the information contained in it. This requires discussion with them once in the office with attention to client questions and the use of the gentle art of inquiry in order ensure that clients fully comprehend that to which they are consenting.

The informed consent process is not static but rather a dynamic one which may change over time. This could be because the counsellor wishes to engage in a different intervention approach or therapeutic activity. It will also

have to be revisited if the role changes, for example, from individual to couples or family counselling. Also, client informed consent is not necessarily permanent but can be withdrawn or changed at any time.

Client understanding during the informed consent process can be significantly affected by many factors such as: education or literacy level, age, cognitive developmental disability or other disabilities. Some clients may not be able to provide consent and will have to rely on someone with the appropriate legal status to grant it on their behalf. However, all clients should be encouraged to participate in the process to the maximum extent possible. This ethical obligation is captured in this ethical clause from the CCPA Code of Ethics:

B5. Children and Persons with Diminished Capacity

Counsellors conduct the informed consent process with those legally appropriate to give consent when counselling, assessing, and having as research subjects’ children and/or persons with diminished capacity. These clients also give consent to such services or involvement commensurate with their capacity to do so. Counsellors understand that the parental or guardian right to consent on behalf of children diminishes commensurate with the child’s growing capacity to provide informed consent. (Page 8)

Some examples of the application of the informed consent process:

- Couples and family counselling present unique challenges with respect to the maintenance of confidentiality. The matter of how a request for disclosures of information resulting from such counselling will be treated is clarified during the informed consent process. Agreement must be sought among all parties and documented. Unless there is agreement to the contrary the “couple” or “family” will be considered to be the client re-

quiring the consent of all parties in each. However, information from any related individual counselling can be treated in the usual manner.

- When working with clients who are mandated for counselling or assessment services they are informed of what person(s) or agency are entitled to any resultant report or information and of their right to refuse consent and the likely consequence of doing so.
- Students and others who are receiving supervision disclose to their clients that they are supervisors and its implications for the maintenance of confidentiality. They also disclose the identity of the supervisor and their contact information. Clients will then decide if they are willing to receive services under such conditions.
- When counsellors and psychotherapists receive from a third party, such as a current or previous client's legal representative, a request for a copy of their counselling records it often includes a copy of a client informed consent form. It is important with such requests to examine the form to determine its adequacy with respect to content and signature and to make every effort to contact the client. Sometimes the informed consent briefing by the third party fails to meet the standard of practice for it and clients are surprised to learn that the disclosure of their record cannot be selective of the contents but that the complete record must be disclosed. This can result in some reconsideration of their earlier consent. On such occasions the client and the third party might be willing to agree to a written report rather than receiving the entire record. (In my practice this resolution has often been a successful outcome in similar circumstances).
- When counsellors choose to offer their counselling services by distance, social media, and/or technology the informed consent process must be more comprehensive to address the many features and issues unique to those modes of service delivery. [The CCPA Technology and Innovative](#)

[Solutions Chapter](#) provides a listing of these additional requirements on Page 22 of its [Guidelines](#). These will include agreement on protocols and practices to follow to maximize appropriate client use, maintain security and confidentiality, what to do in emergencies and system failures, and so forth.

There are limits to that which clients may be asked to consent. Client consent may not be considered appropriate, and could be null and void, if the activities to which consent is given are outside the usual ethical code provisions or standards of practice or are incompatible with client safety or public health policy.

At the conclusion of this brief review, readers are referred to a section about informed consent on Page 15 of the [CCPA Standards of Practice](#). There is a reminder there that all informed consent processes must always meet the fundamental conditions that consent is given by clients voluntarily, knowingly, and intelligently. Also, you are invited to visit a web page entitled Informed Consent in Therapy and Counselling: Forms, Standards and Guidelines and References. It can be found at: <http://kspope.com/consent/index.php> It provides access to considerable resources about informed consent.

PUBLICATION GUIDELINES

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