

# Referral Guidelines for Pastors

Compiled by Henry Virkler  
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**Purpose and Disclaimer:** The purpose of this list is to assist pastors of churches in South Florida in making referrals for counseling to members of their congregation. It does not claim to be an exhaustive referral list since new counselors and psychiatrists are constantly moving to the area. It provides resources primarily in Palm Beach County and the immediate surrounding area.

It includes information about making referrals to licensed counselors, psychiatrists (and psychiatric nurses (who can also prescribe medication)). It also includes a discussion of how psychiatric problems and sometimes masquerade as spiritual problems. It includes information about the Baker Act and Marchman Act, which may be necessary to use when a parishioner is psychotic and a danger to themselves and others. It includes information about the new mental health hotline and also knowledge of local psychiatric hospitals, substance abuse facilities, eating disorders clinics, and counseling for pornography. I have received suggestions from many people in producing this referral list and wish to thank them for their time and help.

I hope to update this list from time to time, so please feel free to send recommended additions or changes to me at [hvirkler@aol.com](mailto:hvirkler@aol.com)

## Licensed Counselors

Probably the most complete list of licensed Christian counselors in South Florida can be found at the website for the South Florida Association of Christian Counselors, which can be accessed at **sfacc.net**. Parishioners can find a counselor by clicking on the tab "Find a Counselor." There are between 80 and 90 licensed counselors on that list, mostly located in Palm Beach County and the surrounding counties.

For counselors to be listed on our website they need to be licensed to practice counseling in the state of Florida (or be Registered Interns, which is the final step before becoming licensed) and have agreed with the beliefs listed in the Statement of Faith of the National Association of Evangelicals or the Nicene Creed. Parishioners can find these two statements at the tab About Us and the section "What We Believe."

Just like doctors and lawyers, counselors specialize in one or more areas of counseling (e.g., children, teens, marital couples, etc.). We have asked our counselors to list their specialties and the insurance companies which will pay for part of the counseling fees, to make it easier for parishioners to make decisions about which counselors to contact, although not all have done so. By clicking on the name or picture of a counselor, parishioners can find the address of their office and email address or telephone number so they can talk with the counselor personally.

In case no counselor who specializes in the type of counseling they desire or is on their insurance panels is located close to them there are a fair number of counselors who offer sessions via zoom or telephone (telehealth), in which case the location of their office is not relevant.

Since the COVID pandemic began there has been a significant increase in people seeking counseling, it is wise to have parishioners identify three or four counselors to contact, so they have choices but also so that if one or more of those counselors are full they have others to choose from.

It is recommended that pastors *not* recommend one specific counselor, because then if the client is not satisfied with the counseling they may hold the pastor responsible for making that referral. If instead you give the client the SFACC website, they have the choice of the counselor whom they select.

There are other very good counselors in the area who are not members of SFACC. However, licensed Christian counselors are more likely to be willing to include biblical issues and spiritual resources in their counseling (if the client desires this) that a secular counselor will not. Also, some secular counselors have negative attitudes toward Christianity and this may become apparent if the client brings up their Christian faith. Therefore we recommend that you encourage believers go to well-trained Christian counselors when possible.

### **New 988 Hotline May Help Those with a Mental Health Crisis**

A new hotline for those with mental health emergencies became operational on July 16, 2022. The former suicide hotline will continue to function at its present number, but this new hotline will be available to anyone with a mental health emergency, whether or not they feel suicidal. Initial reports from the first full year of operation are that the hotline is working well.

### **Psychiatrists**

For many persons their need is counseling rather than medication. Mild anxiety or depression can often be treated effectively with counseling alone. However there are some mental illnesses that are lifelong and for which medication is an important part of the treatment plan (counseling should generally also occur, along with medication).

Some of the mental illnesses for which psychiatrists should be consulted include schizophrenia, bipolar disorder, obsessive-compulsive disorder (OCD), post-traumatic stress disorder (PTSD), ADHD, and severe depression. Some disorders that can benefit from medication early in treatment but do not require lifelong medication include the substance abuse disorders (i.e., alcohol and drug abuse).

Psychiatrists specialize in the mental health disorders and the drugs used to treat them so it is best to refer to them for the above disorders. However, many family doctors see enough depressed patients and prescribe the antidepressants frequently enough that they may feel comfortable prescribing these medications to their regular patients. Also, many people are

unwilling to go to psychiatrists, believing that to do so means they are “really mental.” And most psychiatrists are quite expensive, so there will often be less resistance to a referral to a parishioner’s family doctor, and parishioners may be more willing to go to a psychiatrist if the recommendation is made by a medical doctor with whom they have a relationship.

There are many excellent psychiatrists in South Florida. Usually if a counselor begins working with a client and realizes he or she needs to see a psychiatrist they will recommend someone or encourage them to search the web themselves.

Sometimes it is especially good to have a psychiatrist who will work with families and not just the identified patient, although some psychiatrists are not willing to include family members because they believe it breaks doctor-patient confidentiality. Psychiatrists who are willing to work with families include:

1. Dr. D.J. Rotondo, 399 Camino Gardens Blvd, Suite 200, Boca Raton, FL 33432, (561) 368-6853 and
2. Dr. Pierre Andre, 16244 S Military Trail Suite 320, Delray Beach, FL 33484 561-499-9506

The first 11 of these psychiatrists come from the Counseling Referral list from Palm Beach Atlantic University’s Counseling Center: the additional psychiatrists are recommended by one or more of SFACC’s counselors. These psychiatrists are **in the Palm Beach County area**:

1. Richard Faulk, Boca Raton 561-218-1798
2. Rockland Thomas, West Palm Beach (WPB), 561-365-3000
3. Psychiatry Specialty Center (Group practice), WPB, 561-331-8800
4. Christopher Key, Delray Beach 561-833-2999
5. Neville Marks, Palm Beach 561-655-3666
6. Carter Pottash, Palm Beach 561-837-2215
7. Gloria Dunkin, WPB 561-723-0734
8. Yanique Duval, WPB 561-687-1304
9. David Husted, WPB 561-803-8219
10. Lindsey Israel, Atlantis 561-964-7511
11. Serge Thys, WPB 561-863-7800
12. Edward Barias, Jupiter 561-406-6561

Psychiatrists and psychiatric mental health nurse practitioners **in the Broward and Miami-Dade areas** recommended by Christian counselors in those areas include:

1. Renata Angelini, MD tel. (954) 719-0153, Coconut Creek  
[https://drrenataangelinimd.business.site/?utm\\_source=gmb&utm\\_medium=referral](https://drrenataangelinimd.business.site/?utm_source=gmb&utm_medium=referral)
2. Dr. Juandalyn Peters Tel. 786-373-1676, Davie, FL [www.Shrinkpeters.com](http://www.Shrinkpeters.com)
3. Celeste Boyd, DNP, ARNP/APRN tel. (561) 708- 5835, Coral Springs,  
[www.metamorphosispsyche.com](http://www.metamorphosispsyche.com)
4. Daniel Bober, D.O. tel. (954) 994-1115, Hollywood, [www.drbober.com](http://www.drbober.com)
5. Sayonara Baez, MD tel. (954) 381-4737 (tele-psychiatry) [www.sbaezmd.com](http://www.sbaezmd.com)

6. Dr. Richard Faulk, M.D. tel. (954) 615-1970, Boca Raton and Ft. Lauderdale, [www.faulkpsychiatry.com](http://www.faulkpsychiatry.com)
7. Dr. Antonio DeFilippo, M.D. tel. (954) 962-2237, Pembroke Pines, <https://www.psychologytoday.com/us/psychiatrists/antonio-de-filippo-pembroke-pines-fl/810234> .
8. Linda Mays, DNP, APRN, tel. 305-530-8262, telepsychiatry, psychiatric mental health nurse practitioner, Miami, [www.lmaysarnp.com](http://www.lmaysarnp.com)
9. Dr. Dorothy Chatelier-Orelus, DNP, FNP-BC, PMHNP-BC., telepsychiatry, psychiatric mental health nurse practitioner, tel. 888-307-2199  
<https://peaceheartmindcare.com/> Because Dr. Chatelier-Orelus can see clients virtually, she can evaluate and prescribe medication anywhere within the state. To schedule an appointment you can click on this link: <https://peaceheartmindcare.com/book-consultation/>

### **Recognizing that Psychological Problems May Sometimes Present as Spiritual Problems**

**Psychoses that look like spiritual problems:** Sometimes mental health problems can produce symptoms that look like spiritual problems. For example, people during a psychotic episode, either from schizophrenia or bipolar disorder may become hyperspiritual. Usually those spiritual beliefs are distorted in some way, but you are not likely to be able to correct those beliefs with counseling alone. They will probably need medication and possibly hospitalization to bring them out of their psychosis. Once they have received treatment you can provide some biblical counseling to make sure their theological beliefs are corrected.

**Obsessive-Compulsive Disorder:** Another mental disorder that often will present as a spiritual problem is obsessive-compulsive disorder (OCD). Usually people’s obsessions will center around cleaning, not contracting illnesses, etc., but in a very sincere believer obsessions will sometimes center around their faith (e.g., not spending enough time in their devotions, not doing their devotions correctly, etc.) In the Middle Ages OCD was called “scruples” because these people were scrupulous in trying to do everything right. Martin Luther probably had OCD: when priests saw him coming to the confessional they would often run the other way, for his confessions would often take hours. Some historians have even theorized that Luther may not have initiated the Reformation had it not been for his OCD, but Romans 11:6 reassured him that he was saved by grace and not by perfect works.

**Unpardonable Sin:** People during a psychotic depression may start to believe that they have committed the unpardonable sin, and no amount of counseling will disabuse them of this notion. As with the above mental illnesses they will probably need medication to bring them out of their psychosis. Once their psychosis has been treated effectively you can provide counseling to help them see understand that they have not committed the unpardonable sin.

**Demon Possession:** Sometimes people will believe that they are demon-possessed. We do believe, based on Scripture, that demon possession does occur, especially in cultures where there are animistic religions. However, most unusual behavior here in the United States is more

likely to be due to a mental disorder rather than to demons. A good counselor or psychiatrist who believes the Bible but is also trained in diagnosing mental disorders can help make the differentiation. Be cautious about attributing behavior you do not understand to demons, for if the person is psychotic, being told by a trusted authority that they are demon possessed can quickly become incorporated into their psychosis.

**When family members believe someone needs psychiatric hospitalization but their family member is unwilling to admit themselves voluntarily:**

Florida has a law called the “Baker Act” where, if a person is mentally ill and appears to be a danger to themselves or others, they can be sent to a Baker Act receiving facility and can be evaluated for up to 72 hours. At the end of the 72 hours a report is sent to the court and a recommendation made for either further treatment or the assessment is made that they are no longer a threat to themselves or others and may be released.

This Baker Act evaluation can be initiated by family members, a licensed mental health professional, or the police. If the police are to be involved, a call to 911 usually initiates the process.

It is usually better if loved ones can talk with a person and convince them to admit themselves voluntarily to a psychiatric hospital rather than be Baker Acted. However, especially with people with psychotic and paranoid ideation they may be suspicious of family members and psychiatric hospitals and using the Baker Act process may be the only way to get them into a safe setting.

Normally pastors would not do anything except tell family members about the Baker Act and then let the family members initiate the process. The exception to this would be when there are no family members in the area, in which case the pastor might notify 911 and then let the law enforcement officers take the process from there.

There is a similar process when a person is using alcohol or drugs to such an extent that they appear to be a danger to themselves or others called the **Marchman Act**. This will be mentioned again in the section on Substance Abuse treatment.

**Psychiatric Hospitals (for Substance Abuse Hospitals see two sections below)**

A listing of all the hospitals within South Florida is beyond the scope of this brief counseling referral handout. Here are the primary psychiatric hospitals in Palm Beach County: the ones marked with an asterisk are Baker Act receiving facilities.

1. **JFK North Behavioral Health Medical Center**,\* 2201 45th Street, West Palm Beach, FL 33407 561-881-2672. Provides psychiatric care for children, teens, and adults.
2. **NeuroBehavioral Hospitals of the Palm Beaches**,\* North Campus (NBH-North), 993 45th Street, West Palm Beach, FL 33407, Northwest corner of St. Mary’s. Referral Hotline: 561-299-4305

3. **Multilingual Psychotherapy Center:** therapy for children and their families. Main facility is in WPB and a satellite in Belle Glade.
4. **Fair Oaks Hospital Pavilion,\*** 5400 Linton Blvd., Delray Beach, FL 33484-61512. Baker Act receiving facility for Baker Act stabilization and detox (see next section for explanation of these terms). 561-495-3737 or 561-495-3710
5. **South County Mental Health Center,\*** 16158 South Military Trail, Delray Beach, FL. (561) 495-0522.
6. **West Palm Beach VA Medical Center,\*:** 7305 North Military Trail, West Palm Beach.

#### **Other Residential Facilities to consider:**

There are some facilities that offer full-time mental health care that attempt to help clients experience it as a home-like residence than a psychiatric hospital. Some of those include:

1. **Family First (treatment for male teens):** This facility has a very home-like atmosphere and treats male adolescents with a variety of mental health issues. It has a very comprehensive academic program so that either college-bound or non-college-bound males can stay up with their studies, even if their treatment occurs during the academic year. Located in Palm Beach Gardens. Website: <https://familyfirstas.com/>
2. **The Refuge:** For clients struggling with PTSD and trauma. Website: [www.therefuge-ahealingplace.com](http://www.therefuge-ahealingplace.com)
3. **Honey Lake Clinic:** A comprehensive mental health facility in Greenville, FL (about a 6-hour drive northwest of Palm Beach County) with an explicit Christian orientation. Treats mood disorders, anxiety disorders, addictions. Has an equestrian program. Beautiful facilities. Website: <https://www.honeylake.clinic/>

#### **Substance Abuse Hospitals and Outpatient Treatment**

Most substance abuse facilities attempt to do dual diagnosis treatment, meaning that they have a substance abuse track but then, because substance abuse is often believed to be caused by untreated psychological problems, their therapists also treat psychological problems.

#### **Detox Centers**

If a person has a significant substance abuse problem their bodies may have developed a dependence on the drug or alcohol such that the first few weeks of stopping the substance is very difficult and can be medically hazardous if a person tries to stop “cold turkey” while at home. Therefore there are a number of places that specialize in offering detox services only. Family members can find the names of detox centers by calling 211.

#### **Sunrise Detox Centers**

Sunrise has detox centers in Lake Worth and Ft. Lauderdale. They offer detox services for both alcohol and various drugs. They do assist in aftercare planning (very important, since most

people who have become addicted to either alcohol or drugs will need continued counseling once the detox process has been completed).

### **Desert Rose**

This is a program in Palm Beach Gardens that offers both a detox program and then an intensive inpatient program that incorporates spiritual resources into the process. A 30-day inpatient stay is typical, but length depends on the person and the substance they had become dependent upon. As with many of the programs for substance abuse, it is often recommended that people follow up the intensive inpatient program with intensive outpatient care, tapering down to less intensive outpatient appointments as appropriate. All of these options are available at Desert Rose.

Website: <https://www.desertroserecovery.com/>

### **The Hanley Center at Origins (formerly known as Hanley-Hazelden)**

This is one of the most established of the addiction centers (35+ years), and treats most substance addictions (i.e., alcohol, cocaine, prescription drug, opioids, methamphetamines, marijuana, etc.). It has separate residential programs for men and women, a separate program for seniors, and a program for impaired professionals. It offers follow up partial hospitalization and outpatient programs as needed.

Website: <https://www.hanleycenter.org>

### **Palm Beach Institute**

The Palm Beach Institute was founded in 1970, so it is the first alcohol and drug treatment facility in Florida. As with most comprehensive facilities, it offers detox followed by residential treatment, and then partial hospitalization and outpatient services as needed.

Website: <https://www.pb institute.com/>

(888) 595-9096

### **Caron Renaissance**

This is a substance abuse facility in Boca Raton that provides all levels of care (Inpatient, intensive outpatient, and outpatient care. They also have family treatment that is considered an important part of treatment, chaplaincy services for patients and families, and a chaplaincy training program.

Website: <https://www.caron.org/locations/caron-renaissance-florida>

877-920-0917

### **Wellness Resource Center**

Another substance abuse facility in Boca Raton that offers all levels of care to those with substance abuse issues. It does have a faith-based track.

Website: <https://www.wellnessresourcecenter.com/>

(561) 349-4166

### **When a Substance Abuser is in Denial**

As when a person with mental illness will not seek help voluntarily, often people with serious substance abuse problems will not seek help voluntarily.

As mentioned, there is a law in Florida called the "**Marchman Act**" which allows family members or police or mental health professionals to make a legal appeal that a judge remand a person with substance abuse problem for evaluation because they believe a person is a danger to themselves or others (e.g., as when driving under the influence). Family members can learn about the process for initiating the Marchman Act by looking on-line or by calling 211.

Although the Marchman Act may succeed in forcing a person into having an evaluation done, a resistant substance abuser sometimes will not allow themselves to benefit from therapy. Another way that is more successful in helping a person get into treatment with a more positive attitude is the Johnson Intervention.

The **Johnson Intervention** was developed to break through this denial in a very loving way (angry, critical outbursts by family members are rarely effective). If you have a family where a member is resistant to treatment, research has shown that if an intervention is led by a person trained in the Johnson Intervention, *95% of the time the substance abuser will admit that they have a problem and will voluntarily go into treatment.* It is a very loving treatment, a good example biblically of "speaking the truth in love," although neither the substance abuser nor the family needs to be Christians. A not unusual response of a person who was the subject of an intervention is "I never understood how much you cared."

If you have a family whose problem is a family member in denial, you might encourage them to call one of these substance abuse facilities and see if they have a person trained in the Johnson Intervention.

### **Eating Disorders**

There are several eating disorders that would normally be brought to the attention of the family physician such as pica (eating non-nutritive substances), rumination disorder (regurgitating food, then rechewing it, reswallowing it, or spitting it out), avoidant/restrictive food intake disorder (lack of interest in eating or avoiding certain foods to the degree that weight is lost or a child fails to make normal weight gains).

The more common eating disorders that sometimes might be brought to the attention of pastors would be:

1. **anorexia nervosa** where food is avoided to such an extent that there is significant weight loss or failure to make expected weight gains



2. ***bulimia nervosa***, where the person eats large amounts of food, then uses some compensatory method (e.g., purging, laxatives, diuretics, fasting, or excessive exercising) to remove the excess calories
3. ***binge-eating disorder***, where a person eats an excessive amount of food at least once a week for three months or longer. After the binge, they feel very negatively about the binge, but the binges continue to occur anyway. Unlike bulimia, the person does not employ compensatory methods afterward, so often they become overweight.

Any of the eating disorders can have harmful medical consequences and anorexia can be life-threatening.

### **Sources of Help for Eating Disorders**

#### **The Alliance for Eating Disorders Awareness**

Located at 1649 Forum Place #2, West Palm Beach, FL

Description from the website: "The Alliance offers educational workshops and presentations, free support groups for those struggling and for their loved ones, advocacy for eating disorders and mental health legislation, national toll-free phone help line, and referrals, support and mentoring services. All services offered by The Alliance are free-of-charge, therefore, making it accessible to everyone. Since its inception in October 2000, The Alliance has offered presentations on eating disorders, positive body image, and self-esteem to more than 250,000 individuals throughout Florida and nationwide."

#### **ViaMar Health**

Eating disorders can become life-threatening, in which case *residential or inpatient* treatment may be required at the beginning. Via Mar Health is a program in West Palm Beach offering all levels of care (Residential, Partial Hospitalization, and Intensive Outpatient Treatment) for adolescents and adults with eating disorders and their families. They also treat whatever co-existing mental disorder the parishioner may have.

Address: 560 Village Blvd

West Palm Beach, FL 33409

(561) 475-3360

Website: <https://www.viamarhealth.com/>

As mentioned above, eating disorders can become life-threatening, in which case inpatient treatment may be required at the beginning. Probably the second closest *inpatient* treatment center to Palm Beach County is the **Renfrew Center at Coconut Beach**, which is about 45 minutes south of Palm Beach. This may be followed up by outpatient treatment at the Renfrew Center here in WPB or by outpatient counseling.

#### **Therapeutic Oasis of Jupiter and Treasure Coast**

This organization has facilities in Boca Raton and Jupiter and the Treasure Coast. At each site they offer therapy to teens and adults for eating disorders and other coexisting psychological disorders.

Addresses: 600 Heritage Drive, Suite 130, Jupiter, FL 33458

851 Broken Sound Parkway Northwest, Boca Raton, FL 33487

Website: <https://therapeuticoasis.com/>

### **Center for Discovery**

This organization has been providing treatment for eating disorders in various locations in the United States for 25 years. The closest location to West Palm Beach is an outpatient facility and is located at 11300 U.S. Highway 1, Suite 150, North Palm Beach, FL 33408. There are also locations near Orlando and Tampa. See website at <https://centerfordiscovery.com/> for further information.

### **Pornography**

According to a recent Barna survey, 70% of Christian men say they watch pornography regularly. 50% of Christian pastors say they do as well. And as you will see below, a significant number of Christian women and girls do as well.

The secular research studies say that one-third of the visits to pornography sites are by women, so there are probably many Christian women who struggle with this issue, but because other research has revealed that Christian women experience *twice as much shame* as men about their porn watching, many women who struggle with this may never share this problem with counselors or pastors.

Teen women often watch porn to some degree, usually starting to watch because of curiosity, but some Christian counselors have reported 16-year-old females with fully developed addictions to porn. The question was raised at one Christian college about how many girls were watching porn, and the counselor for the floor said that *every girl on the floor was struggling with that issue*.

Some studies have estimated that some teens have seen hundreds of sexual encounters on-line before ever having an actual sexual experience, and that the primary sexual education many teens receive is through pornography and they often believe that what they see on-line is how normal sexual encounters go, which can have seriously disturbing effects on how both boys and girls behave (or think they should behave) in a sexual encounter.

There are two programs that are either no cost or low cost that could be implemented in churches. Research shows that sex treatment groups should be single gender, since a group member sharing their struggle can trigger those of the opposite sex.

If you do decide that the church should try to address this I would recommend that the church consider offering the following Celebrate Recovery groups:

One group for male adults, a second group for female adults, a third group for male teens, and a fourth group for female teens. Before the start of such groups you might have a one-hour educational class led either by a pastor or ministry leader for that age group to give information about how sexual addiction develops, its effects on one's Christian life, and how recovery is possible. People from Celebrate Recovery would probably be willing to provide support and materials to help a staff member give an introductory lecture. It is likely that one or more of the members in your congregation has been in Celebrate Recovery for a period of time and would be willing to lead a group of their gender if you trust they would do so well.

Some research studies have concluded that recovery from sexual addiction is not high unless people are involved in a support/accountability group, which is why I am suggesting Celebrate Recovery groups. If there are not enough people to start one or more of these groups in a single church, research has shown that zoom groups can be effective, so two churches could go together to start one of the specific age or gender groups. Research has also found that sometimes people are even more honest in their sharing in zoom groups than in in-person groups.

A second approach has a nominal cost and could be an adjunct to those in Celebrate Recovery, especially those who continue to struggle even when attending Recovery groups. That is Covenant Eyes. There is a nominal yearly fee, and the person installs a small software program on any cellphone and computer where they might be tempted to access pornography. They also identify a person (could be a pastor or youth leader) who would be notified if they access any porn, and that person will then talk with them about what happened and what they can do to not give in to that temptation in the future.

*Programs that allow people to access porn have been shown to be more effective than programs that block people from any porn.* Apparently having to make the decision to not access porn leads to better resistance to temptation than programs that remove them from any need to learn self-control.

I know that it is uncomfortable to consider our church members struggling with porn, but the research (both secular and from Barna) tell us that Christians are struggling with this issue, so I would encourage the church to become involved in combatting this scourge. If you decide you want to discuss this further I am available to be a consultant.

### **Care for Sexual Addiction: Progressively Intensive Steps**

Here are ways we can help those struggling with sexual temptation, with the least intensive first, and then if the person needs more help, progressively more intensive treatment options:

1. Celebrate Recovery groups
2. Covenant Eyes
3. Outpatient counseling: there are several counselors in the SFACC list who work with sexual addictions
4. Inpatient treatment for men

- a. Meadows Behavioral Healthcare: website: <https://www.MeadowsBH.com>  
Based on the treatment developed by Patrick Carnes. Located in Wickenburg, Arizona. They have residential and outpatient treatment for drug and alcohol addiction, trauma, eating disorders, sexual addiction, behavioral health conditions and co-occurring disorders. Also centers in Malibu, California, Princeton, Texas, and Chestnut Hill, Massachusetts
- 5. Inpatient treatment for women
  - a. Meadows Behavioral Healthcare: website: <https://www.MeadowsBH.com>  
Based on the treatment developed by Patrick Carnes. Staff includes his daughter, Dr. Stefanie Carnes. They have residential and outpatient treatment for drug and alcohol addiction, trauma, eating disorders, sexual addiction, behavioral health conditions and co-occurring disorders. Also centers in Malibu, California, Princeton, Texas, and Chestnut Hill, Massachusetts.
  - b. Marnie Ferree, Bethesda Workshops, Nashville, TN. Website: <https://www.bethesdaworkshops.org/about-us/our-team/>

I hope this information has been helpful. If you have further questions or would like to consult with me on any counseling situation, you may contact me at 561-317-4369.

Sincerely,  
Henry Virkler