A Strategic Plan for AACD’s Future: 
The Precursors of ACA

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Professional associations have recognized the value of long-term planning to assess the past and present, look into the future, and set specific goals to provide direction. Associations are affected by the myriad of events from their own community to global society, and it is easy to be pulled in many different directions. Associations have a compelling need to elicit member and environmental needs, set goals and objectives, and take strategic steps to realize these goals and objectives. It is the purpose of this article to provide, for the members of the American Counseling Association (ACA) and our archives, a description of strategic planning for the association. This process may be useful to future leaders and to various ACA entities (e.g., divisions, regions, state branches, corporate affiliates, committees) in creating their own strategic plans.

LITERATURE RELATED TO STRATEGIC PLANNING

We live and operate in a world of “accelerating change, choice, risk, and complexity” (Nanus, 1990, p. 15). No longer is it sufficient or adequate for a major professional association to plan its activities on a year-by-year basis. Indeed, Anthony (1984) stated that “in order to meet the needs and expectations of constituents, efficient nonprofit organizations today engage in strategic planning” (p. 16). Strategic planning provides the basis for an association to work with many important issues (Titens, 1987). According to Titens, these important issues include defining the mission, goals, and objectives of the organization; meeting members’ needs through services and programs; increasing participation of members; attracting new members; enabling the staff and leaders to work together; and structuring the association for effective operation and flexibility when change is needed.

The process of strategic planning begins with people who have a vision of how things could be (Bennis, 1990). Such a vision leads to a consideration of trends, problems, issues, and weaknesses that contribute to making things as they are and advancing or limiting movement toward what could be (Cetron, Rocha, & Luckins, 1988; Kouzes & Posner, 1990; United Way of America, 1987). Kotter (1990) indicated that achieving a vision requires motivation and inspiration; it means enabling people to move in the right direction despite major obstacles to change by appealing to human needs, values, and emotions. He wrote, “People who articulate such visions aren’t magicians but broad-based strategic thinkers who are willing to take risks” (p. 105).

A variety of approaches to strategic planning may be found in the literature (American Society for Association Executives, 1988; Anthony, 1984; Chipp, 1985; Dolich & Brennan, 1987; Hoffman, Rowley, & House, 1989; Pattan, 1986; Titens, 1987), and several commonalities in procedures are suggested. The concept of strategic planning has within it the assumption that those who do strategic planning for an organization will be not only visionary in their thinking but also accurate in their assessment of members’ needs, accurate in their identification of internal and external dangers and opportunities, and committed to taking action implicit in the strategies related to the stated objectives.

It is critical that those writing the strategic plan take into account member needs so that the association directs its efforts at providing direct benefits and services that are needed and wanted by the membership. These data can be obtained in a number of ways (e.g., membership needs surveys, evaluations from participants at conventions and professional development workshops, and focused interviews with selected members). According to Forbes (1988), the identification of dangers and opportunities internal and external to the association is a significant step in the strategic planning process. The dangers can be viewed as challenges, and the opportunities as strengths. The idea is to use the strengths in the organization to minimize the dangers and achieve the challenges. The final assumption, that the organization will be committed to taking the necessary action to accomplish its objectives, is crucial to the success of the strategic plan.

Strategic planning is not an easy process. It provides an organization, however, with clear directions toward deliberate outcomes. Hoffman, Rowley, and House (1989) have identified 11 steps in the application of the strategic planning process to human service organizations. These 11 steps are the following: (a) making a presentation on the merits of strategic planning to the governing body and staff, (b) obtaining the approval of the governing body, (c) designating a strategic planning committee, (d) analyzing the human services organization’s environment to determine internal and external strengths and weaknesses, (e) developing goals, (f) developing objectives and strategies, (g) assigning tasks to relevant individuals or groups, (h) doing a progress review, (i) presenting a draft of the plan to the governing body, (j) receiving governing body approval of the final document, and (k) completing regular updates.

The initiatives in this effort include writing an identity statement that defines the membership, stating a mission, developing and setting priorities for goals, and specifying objectives for a multiyear strategic plan. These initiatives, as approved by a governance unit, and articulated throughout the organization, provide a unified focus and should in theory bring about positive results. As implementation of the plan begins, the ability of the organization’s structure to successfully implement the plan must be critically examined. Often, structural changes may be required to develop a functional structure to accomplish goals.

This is not a static arrangement. As individuals engage in behaviors related to the organization’s identity, mission, goals, and objectives, a
new vision develops that suggests the opportunity for continued consideration of factors that limit effectiveness, and a reformulation of the identity, mission, goals, objectives, and strategic plan is possible. In this way the cycle continues, the strategic plan is updated, and the organization is in an increasingly better position to remain dynamic and effective in achieving its mission.

STRATEGIC PLANNING IN ACA

The first steps in strategic planning for ACA began under AADC in January, 1988, with discussion in the Executive Committee followed by a request to the Governing Council (March, 1988) to begin strategic planning. The Governing Council approved the request and adopted the concept of a 3-year strategic planning process. This process meant that the association would be directed by a strategic plan that would identify objectives over a 3-year period with an annual update. The first AADC Strategic Planning Committee was appointed. Refer to Appendix A, the Chronology of AADC’s Strategic Planning Process, for further details.

It was agreed at the first Strategic Planning Committee meeting that the base of a strategic plan was a set of values. After careful deliberation, a statement of the “Common Values for the Association” was forwarded to the Governing Council for adoption. This statement includes five values that provide a philosophical statement of who we are and what we value: caring for self and others, enabling positive change, acquiring and using knowledge, empowering leadership, and promoting linkage (see Appendix B).

In July 1988, at a Governing Council meeting, Paul A. Forbes, senior management consultant of The Forbes Group in Falls Church, Virginia, conducted a 1-day training workshop. This workshop was designed to educate the Governing Council on the process of strategic planning and to lead members of the council through strategic planning activities. The council examined the dangers and opportunities in both the internal environment (i.e., structure, culture, and resources of the association) and the external environment (i.e., economic, sociocultural, technological, and political and legal forces outside the association). The task of the council was to identify the dangers or challenges as well as the strengths or opportunities that each of these environments presented. The strategic plan needed to reflect ways to use our strengths and opportunities to address the dangers and challenges in our internal and external environments.

During the 1988-1989 year, a series of workshops on strategic planning was conducted at various levels within the association, including meetings of members, leaders, and staff. A key aspect of the workshop was an exercise in “Visioning,” in which AADC leaders were asked questions such as “What is AADC?” “What could AADC be?” “Assuming there were no divisions, regions, and state branches, what could AADC be?” Leaders were asked to write their responses for use in the planning process. The results from these workshops were summarized and used by the Strategic Planning Committee in formulating goals and objectives. All of the information collected constituted the “visioning” process, an essential and ongoing analysis of the internal and external opportunities and strengths of the association.

Using the collected data, the Strategic Planning Committee finalized the identity and mission statements. Forbes’ recommendation was that an identity and mission statement should be simple and direct. Therefore, based on leaders’ and members’ input and feedback, the following statements were developed:

Identity: The American Association for Counseling and Development (AADC) is an organization of counseling and human development professionals who work in educational, health care, residential, private practice, community agency, government, and business/industry settings.

Mission: The mission of the American Association for Counseling and Development is to enhance human development throughout the life span and to promote the counseling and human development profession.

The goals for AADC initially were developed at a meeting of the Strategic Planning Committee in August 1989. Documents gathered between September 1988 and August 1989 were scrutinized to draw out specific data from members and leaders on programs and priorities. Out of these deliberations came the nine goals for the association (see Appendix C). In a subsequent task, the Strategic Planning Committee formulated operational strategies for all objectives related to the nine goals. A documentary collection (Nejadlo, 1990b) related to the strategic planning process is on file in the library at ACA headquarters in Alexandria, VA.

In March 1990, the strategic plan, including the identity and mission statements, was presented to the Governing Council for review, revision, and approval. At the same time, a functional structure (committees and task forces) was established to implement the objectives and strategies in the plan. With approval secured from the Governing Council, AADC divisions, states, and regions (which are autonomous entities) were encouraged to become involved more fully in supporting AADC’s strategic plan and to engage in their own strategic planning efforts. It was recommended that throughout the strategic planning process, visioning exercises take place, scanning the environment should be continued, and an updated 3-year strategic plan should be written for the following year.

DATA INPUT FOR AADC’S STRATEGIC PLAN

Because strategic planning for AADC is a large-scale effort affecting the total membership of the association, it was deemed essential to have feedback from a broad range of the members and leaders as the plan evolved. Methods for gathering data, already described, included surveys and workshops for leaders, members, and staff. In addition, systematic input from AADC leaders and members was gathered using formal as well as informal methods.

Focus groups were conducted with AADC leaders during regional leadership development meetings to which state branch presidents and other officers were invited. Participants were asked to review and discuss each goal of the proposed plan, to suggest revisions in content as well as editorial changes, and to provide a qualitative assessment of the feasibility and desirability of each goal. After extensive analysis of the goals, no one suggested that new goals be added, nor were there recommendations to delete any of the goals. In short, they seemed to “fit” what we were all about in the counseling and human development profession.

Input from members was solicited using a survey in Guidepost (1989). This survey asked for ratings of agreement with the mission and identity statements, evaluation and rank ordering of goals, and a rating of services and benefits provided by the association. Participation was encouraged through the following: (a) a one-page survey on the last page of Guidepost and (b) a large, bold-faced title that read “YOUR STAKE IN AADC’S FUTURE: Strategic Planning Membership Survey.”

A total of 609 respondents returned the survey, resulting in a response of 1.1% of AADC’s membership. Because this was a low response rate, an extensive comparison of respondents to the overall AADC membership (Nejadlo, 1990a) indicated that the sample was
representative according to the following variables: gender, ethnicity, and education.

The Guidepost survey asked for a rating of the extent to which the identity and mission statements accurately described AACC. There was high agreement with both the identity statement and the mission statement. Strongly agree or agree responses totaled 96.3% for the identity and 84.7% for the mission statement.

Both leaders in their focus groups and members using Guidepost were asked to order the goals. The agreement between leaders and members was consistent in the top two priorities but differed in the third highest priority, as seen in Table 1. The top three priorities for the leaders were personal and professional development, professional standards, and human rights. For members, the top three were professional standards, personal and professional development, and public awareness and support. The lowest ranked goal for leaders was research and knowledge, and for members it was interdependence.

It is important to note that both leaders and members agreed in their ordering of the top priorities for the association: professionalization, and personal and professional development. It may be that members join a professional association for just these reasons—to enhance their status as a professional and participate in continuing education opportunities to improve the quality of services they provide.

The substantial agreement with the mission and identity statements provided further evidence that AACC members were in agreement with AACC’s direction. Although caution must be exercised in generalizing, reactions to the goals, similarity in statements of priorities, and agreement with the mission and identity statements reflected a commonality among our membership. It would seem to be true that data from internal and external scanning resulted in a strategic plan that reflected accurately the needs, concerns, and common values of many persons in this counseling and human development professional association.

One of the most significant aspects of the AACC strategic planning process was the attempt to gather input from as many members and leaders as possible (Hansen, 1989). Although no precise number is available indicating how many people had an opportunity to take part in the planning process and respond to parts of the plan at various stages, it is estimated that close to 2,000 members and leaders responded, a significant number, but certainly not a large percentage of the (then) 56,000 members of the association.

As with any proposal for change, there always will be points of resistance. This was true of this planning process as well, although resistance was very limited. Although three of the regional workshops produced a high level of agreement with and support for the mission, identity, and goal statements, verbal resistance surfaced at the fourth regional workshop in the form of (a) challenges to the qualitative approach, (b) suggestions that other models of strategic planning (other than the Forbes Model) would be appropriate for AACC, and (c) requests for more precise performance-based statements in the strategic plan. The final document incorporated more precise performance-based statements.

CONCLUSION

Developing a strategic planning process for a 56,000-member professional association comprising primarily volunteer officers elected for 1 year (a 3-year cycle as Elect and Past) was an ambitious and challenging undertaking that required many conditions: (a) a willingness of presidents to collaborate and share leadership, (b) approval and support from the governance structure to legitimize the process, (c) involvement of as many leaders and members as possible to develop a wide base of ‘ownership’, (d) creative data gathering and an interactive leadership to model new forms of leadership, and (e) continuous input from those who would be affected by the plan throughout the process. Most of these conditions were met. Pockets of resistance were small but vocal; challenges and questions, however, which were answered, made the document a stronger one.

Strategic planning is not a tight, linear, quantitative process; both quantitative and qualitative methods can be used. The planners avoided a top-down authoritarian approach and attempted to make the process as democratic as possible from the early stages to approval of the first plan. The presidents tried to keep members informed of progress through newsletters, correspondence, and periodic columns in Guidepost.

What have the association and the profession gained from these efforts?

1. A process for continuity. A format and process for a strategic plan that can be updated each year.
2. Opportunity for member influence. An opportunity for interested members and leaders to reflect on the mission and direction of their profession and association and influence that direction.
3. An archival record. An archival record of the process that can be examined and evaluated as to its relevance for future strategic planning into the 21st century.

Although AACC and its divisions have had forms of long-range planning for some time, the recent strategic planning efforts have been unique in involving the entire association in a systematic manner. The process is not static, but ongoing. Each year the scanning process is to be repeated and a new 3-year strategic plan is to be developed.

All entities (divisions, regions, state branches, committees, and so forth) of the association are asked to incorporate the association’s goals into their own plans. Each entity in AACC has been encouraged to incorporate strategic planning into setting its direction consistent with the AACC plan. If all entities of the association were to have strategic plans consistent with AACC’s plan, and if these plans had similar objectives, one could readily foresee the effect of unified efforts directed to achieve results (e.g., public awareness or legislative efforts). Such strategic planning could have powerful results for the association. The implications for state branches, regions, and divisions working for com-

TABLE 1
Mean Ratings and Rankings of Goal Priorities for Members and Leaders

<table>
<thead>
<tr>
<th>Goal</th>
<th>Members (n=609)</th>
<th>Leaders (n=95)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean Rating</td>
<td>Mean Rating</td>
</tr>
<tr>
<td></td>
<td>Rank</td>
<td>Rank</td>
</tr>
<tr>
<td>Developmental approach</td>
<td>1.945</td>
<td>1.936</td>
</tr>
<tr>
<td>Human rights</td>
<td>2.068</td>
<td>1.610</td>
</tr>
<tr>
<td>Interdependence among individuals,</td>
<td>2.187</td>
<td>2.244</td>
</tr>
<tr>
<td>organizations, and societies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organizational management</td>
<td>2.080</td>
<td>1.822</td>
</tr>
<tr>
<td>Personal and professional development</td>
<td>1.613</td>
<td>1.457</td>
</tr>
<tr>
<td>Professional standards</td>
<td>1.596</td>
<td>1.489</td>
</tr>
<tr>
<td>Public awareness and support</td>
<td>1.899</td>
<td>1.617</td>
</tr>
<tr>
<td>Public policy and legislation</td>
<td>2.101</td>
<td>1.802</td>
</tr>
<tr>
<td>Research and knowledge</td>
<td>2.026</td>
<td>2.422</td>
</tr>
</tbody>
</table>

Note. Rating scales ranged from 1 = very high priority to 5 = very low priority.
mon objectives are compelling, and the possibilities for what could be
achieved could be far beyond normal expectations.

Although the implementation of the plan is just beginning, the
infusion of the planning process throughout the association reflects
achievement of the major goal of AACD's strategic planners: a focused
framework for achieving the goals of the profession and the association
in a rapidly changing society.

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APPENDIX A

Chronology of AACD’s Strategic Planning Process

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1988</td>
<td>First discussion of strategic planning with Executive Committee</td>
</tr>
<tr>
<td></td>
<td>Governing Council endorsed strategic planning process</td>
</tr>
<tr>
<td></td>
<td>First Strategic Planning Committee meeting</td>
</tr>
</tbody>
</table>
|        | Outcome: Draft of AACD “Common Values” and conceptualization of stra-
|        | tategic planning process                                              |
| July 14| External consultant Paul Forbes instructed the Governing Council on  |
|        | the strategic planning process and led Governing Council in determi-
|        | ning internal and external dangers and opportunities as well as      |
|        | strengths and limitations of AACD                                    |
|        | Governing Council adopted the ‘Common Values for the Association’ and |
|        | the Strategic Planning Committee’s Plan of Action                     |
|        | AACD executive staff held two informational and planning sessions on |
|        | strategic planning                                                    |
|        | Division presidents completed the Forbes activity at their leadership |
|        | meeting                                                                |
|        | Strategic planning workshops were held at all regional leadership de-
|        | velopment meetings. Data were gathered on trends, member needs, is-
|        | sues, and governance                                                   |
|        | Strategic Planning Committee met to synthesize all information and da-
|        | tamed thus far                                                          |
| 1989   | March 11–13                                                           |
|        | Governing Council passed 15 motions regarding the implementation of  |
|        | strategic planning for AACD                                            |
|        | Imaging activity conducted from April to November and reported in     |
|        | November                                                               |
|        | Governing Council charged Governance Restructuring and Strategic Plan-
|        | ning Committees with specific objectives                              |
|        | Strategic Planning Member Survey appeared in Guidepost                |
| 1990   | January 26–28                                                         |
|        | Strategic Planning Committee set priorities for goals and wrote the 3-
|        | year strategic plan based on leadership input and survey results      |
|        | Governing Council approved the first 3-year strategic plan             |

APPENDIX B

COMMON VALUES
OF THE
AMERICAN ASSOCIATION FOR COUNSELING
AND DEVELOPMENT

CARING FOR SELF AND OTHERS

We believe in the worth and dignity of the individual and we value caring and
respect for self and others.

We respect and care for the self by preserving professional identity through the
support of, and for, the professional association (AACD), and by establishing
and maintaining professional standards and ethical behavior. We also respect and
care for the self through continuing personal development. We also value
examination of the relationship among the intellectual, physical, spiritual, and
psychological aspects of human development. We respect and care for others
through identification and the removal of barriers to human development and
through pro-active approaches to human rights. This respect and caring for others
extends to concerns about global issues such as world peace and the ecology. We value and celebrate the diversity of cultures and interests within our society, our profession, and our association. We also value the power, strength, and support of a unified profession.

**ENABLING POSITIVE CHANGE**

We believe that positive change in people, organizations, and societies can be facilitated.

Positive change involves moving to higher levels of moral, ethical, spiritual, intellectual, physical, and interpersonal development. Working for positive change is a major function of our profession.

**ACQUIRING AND USING KNOWLEDGE**

We believe that we need to be aware of current and evolving knowledge, including alternative ways of knowing, that can assist in facilitating positive change.

We have a responsibility to acquire, utilize, and disseminate new knowledge in our field. We have a responsibility to utilize both traditional and alternative methods of understanding. We have a responsibility to exert leadership in using and sharing our knowledge and skills.

**EMPOWERING LEADERSHIP**

We believe in the kind of leadership which requires a willingness to take risks, a readiness to take stands, and a responsibility to act on vital issues.

Empowerment means that individuals, groups, and organizations, by their actions, enable (empower) others to make changes. Counselors and human development professionals see themselves as active leaders, willing to take risks. Responsible and professional leaders act when faced with compelling situations. Leaders who are committed to this belief are consistent in what they say and do. This leadership style ensures that all populations served are empowered to reach their human potential.

**PROMOTING LINKAGE**

We believe in fostering an integrative quality, interdependence, and connectedness among people, organizations, and societies.

Collaboration is a preferred mode of operation which fits the philosophical foundations on which the counseling and human development profession is based. Action to accomplish identified goals, in some instances, involves interpersonal coalition-building among professionals and, at other times, involves interprofessional and international cooperation.

(Approved by AACC Governing Council, July 14-17, 1988)

**APPENDIX C**

The American Association for Counseling and Development

**STRATEGIC PLANNING GOALS FOR 1990-1991**

**Developmental Approach**

To promote a developmental approach which will facilitate positive change and optimize human potential among the members’ clientele.

**Human Rights**

To promote programs which proactively address human rights, societal trends, and social issues most relevant to the profession.

**International/Interprofessional Collaboration**

To promote, respect, and recognize the global interdependence among individuals, organizations, and societies.

**Organization, Administration, and Management**

To provide the organizational structure, membership, management, staff, facilities, and resources necessary to fulfill our mission.

**Personal and Professional Development**

To promote the personal and professional development of counseling and human development professionals.

**Professionalization**

To promote the professionalization of counseling and human development.

**Public Awareness and Support**

To promote public awareness of and support for the counseling and human development profession.

**Public Policy and Legislation**

To promote and support public policy and legislation which enhances human development.

**Research and Knowledge**

To promote the advancement and dissemination of research and knowledge in counseling and human development.

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