

NEU Chi Epsilon Sigma (CES) & Counselor Education Student Association (CESA) Newsletter

Volume 9, Issue 2

Winter, 2018

From the Editor,

Happy 2018! I hope you are all doing well and are taking a minute for yourself to practice self-care. I also would like to invite you (yes, you the person taking the time to read this) to collaborate with this newsletter by submitting information related to counseling (research or your experience). One of the great things about being counseling students (past or present) is that sharing your experience can be incredibly helpful to someone else. I would also like to invite everyone to keep up with Chi Epsilon Sigma-CESA by joining us at our monthly meetings. Happy February Everyone!

Inside this issue:

From the Editor	1
Upcoming Events	1
MFT Professional Association Decides to Remove State Divisions	2
Did You Know?	3
Comedy Corner	3
Looking for a Leadership Opportunity?	3
U C Me, I C U 2, But-what's a CEU?	3
Chi Sigma Iota (CSI) Membership Contribute to the Newsletter	4-5
Winter Spotlight	4
Coming Out Full Circle	5
Helpful Resources	6-7
From Past Interns to Future ones	7
	8-9

Upcoming Events:

- Wed. 2/14/18 CESA/CES Board Meeting. SU103
5:30pm-6:30pm
- Wed. 2/14/18 Internship Panel. Location SU103
6:30pm-7:30pm
- Sa. 2/27/18 Guest Presenter. Counseling Student
Athletes, Dr Tanya Prewitt-White, University of Illinois
at Chicago. Location SU03 10:00am-11:30am.
- March 22-23, 2018. Illinois Assn for Play Therapy,
Holiday Inn West--Chicago in Itasca, carpooling will be
organized. (Faculty Advisor, Dr Tejada. Pick will be at a
Blue Line station)
- Wed. 3/14/18 CESA/CES Board Meeting. BBH101
5:30pm-6:30pm
- Wed. 3/14/18 Chi Sigma Epsilon Induction
Ceremony. BBH101. 6:30pm-7:30pm.
- Sa. 3/16/18 ICA Annual Southern Conference.
Collinsville, IL. Car Pooling will be organized. Look out
for more details.

MFT Professional Association Decides to Remove State Divisions

**Dr. Laura Tejada, Ph.D, LMFT, LCPC
Assistant Professor, NEIU**

NEIU Family Counseling students are facing a changing landscape, due to a decision by the American Association for Marriage and Family Therapy (AAMFT) to remove state divisions from their structure. Accordingly, the



Illinois Association for Marriage and Family Therapy (IAMFT) will be moving forward as a fully independent state MFT organization, according to a letter recently mailed to IAMFT

members. Between 3 Feb and 5 Mar 2018, a vote will be held of IAMFT members to approve changes in the bylaws to remove references to AAMFT rules and policies. These changes are the first steps in establishing IAMFT as an independent entity, with the goal of maintaining continuity of service to its members around the state of Illinois. Once the bylaws are revised, dues paid to AAMFT will apply only to the national organization. IAMFT will be under a separate dues and fee structure.

If you have questions about these upcoming changes at the state level, please contact the IAMFT office at 563-340- 3318, or by email at illinoismft@aol.com. If you have questions about what this might mean for you as an NEIU Counselor Ed student, please contact Dr. Laura Tejada, advisor for the Family Counseling program at: ljtejada@neiu.edu.

“Don’t sacrifice yourself too much, because if you sacrifice too much there’s nothing else you can give and nobody will care for you.” ~ Karl Lagerfeld

why did Waldo go to therapy?



to find himself

Retrieved from: goo.gl/v1rkTX

YOU GOTTA HELP ME, DOC! I KEEP SEEING PALINDROMES AND IT FREAKS ME OUT!!!



I'M GONNA PRESCRIBE YOU XANAX.

Retrieved from: goo.gl/cm3evN

DID YOU KNOW?

- Approximately 1 in 5 adults in the U.S. —43.8 million, or 18.5%— experiences mental illness in a given year.
- Approximately 1 in 25 adults in the U.S. —9.8 million, or 4.0%— experiences a serious mental illness in a given year that substantially interferes with or limits one or more major life activities.
- Approximately 1 in 5 youth aged 13–18 (21.4%) experiences a severe mental disorder at some point during their life. For children aged 8–15, the estimate is 13%.

National Alliance of Mental Illness, 2017

Looking for Leadership Opportunities?

Come to our Chi Epsilon Sigma-CESA Meetings and learn about how you can contribute and qualify to run for office for the 2018-2019 school year!

U c me. I c u 2. But — What's a CEU?



CEUs, or Continuing Education Units, can be confusing to Counselor Ed students until you become more familiar with the licensure process. Here's a primer to get you started.

What are Continuing Education Units, or CEUs?

CEUs are credits earned by attending training, workshops, seminars, conferences, and university coursework related to professional counseling and therapy. CEUs are given only for trainings that have met the minimum educational requirements as specified by the relevant credentialing body. These are usually the state regulatory boards that issue professional licenses, such as the Illinois Department of Financial and Professional Regulation (IDFPR) and Illinois State Board of Education (ISBE).

But wait! I hear people talking about PDs and CEs? What are those?

In some states or professions, CEUs may have other names. For example, in Illinois, school counselors earn PD, or Professional Development units. In some states, counselors earn CEs, or Continuing Education credits.

Why do I need CEUs?

CEUs are required to renew and maintain your professional licenses. You will need to complete CEUs once you have earned your license(s) as a Licensed Professional Counselor (LPC), an Associate Licensed Marriage and Family Therapist (ALMFT), a Certified Rehabilitation Counselor (CRC), and/or the Professional Educator License (PEL).

How are CEUs calculated?

One hour of workshop or class attendance equals one CEU. Each university credit is worth 15 CEUs. Thus, a one-day workshop is usually worth 6.0 CEUs. A three-hour university course is worth 45 CEUs.

How many CEUs do I need?

You cannot renew your license(s) without proof you have earned the minimum number of CEUs within the specified renewal period for your license (usually two years). Each profession and state sets its own minimum requirements for the number of CEUs you need each renewal period. Read the requirements for your profession and state(s) in which you are licensed.



So as a student, I don't need them right now, correct?

Correct. But it's good to familiarize yourself with the fine print on workshop fliers and attendance certificates. Now you know the secret code!

Well, I ended up with a CEU certificate. What do I do with it?

SAVE IT. Get in the habit NOW as a student of saving your CEU certificates. Create a file dedicated to your CEU documentation. In this file, put workshop fliers or other promotional materials along with the CEU certificate, to prepare for the possibility you are asked to provide proof of workshop or class content as part of a random CEU audit.

Where can I learn more about the specifics of CEUs for my future profession?

Contact the state division of your professional association or consult their website for details specific to your profession and location.

-Dr. Laura Tejada, Ph.D, LMFT, LCPC
Assistant Professor

Chi Sigma Iota (CSI) Membership

John Coumbe-Lilley, Marriage and Family Therapist Student

I was not thrilled to pay another \$50 for a student membership for CSI but I am glad I did. I attended a webinar called Good Grief Helping Clients Negotiate Grief and Loss Beyond D.A.B.D.A. delivered by Dr Sadler-Gerhardt, Ph.D, LPCC-S. The webinar are free to graduate student members. The value of the webinar was \$39, after two of these I will get my money back and more. The webinar was informative and used interactive polling promoting audience participation.

I attended this session because I am interested in how grief and loss works and how to work the counseling process with a client. I am also unsure how much training I might get during our program at NEIU. I listened to professors like Dr Tejada, Dr Bloom and Dr Chen who recommended supplemental training and education through conference attendance and certification programs to augment our education at NEIU. The webinar I attended was timely and helpful for me and I took advantage of the opportunity. The webinar was recorded for later listening and handouts and slides were presented for attendee use too. You could also get a continuing education credit by attending or taking an online quiz.

I learned a few things I was unaware of. For example, while grief is a universal human experience it is experienced individually. I learned new ways of thinking about the grief process because of the influences from culture, faith and gender. Grief can be an adaptive process. Nonlinear models are preferred over stage models. Nonlinear models mean individuals are treated as unique versus clumped together in a specific stage. I appreciated the criticisms of Kubler-Ross's DABDA model including its prescriptive sequencing and linear expectations. Individuals can be actively engaged in their own grieving process and are not limited to passing through stages in sequence.

Continued on page 5

*Is there a counseling topic you feel strongly about?
Do you feel everyone should know about it?*

Write an article for the CES-CESA newsletter!

Send your inquiries and submissions to
Ericka Soto at
esoto14@neiu.edu

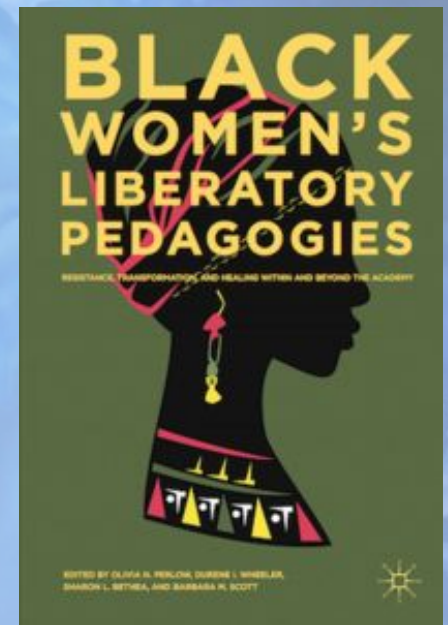


WINTER SPOTLIGHT

Shout out to Dr. Sharon Bethea, for her newest collaboration, which she co-edited with 3 other NEIU Faculty. Find an excerpt of the Preface below:

“This book is simultaneously a personal and political project, which are of course inextricably linked. The idea of this volume, conceived via kitchen table talks and sista girl check ins, were birthed out of our relentless resistance to the continuous denial and dismissal of Black women's intellectual production and liberation projects. In these moments, we began to envision and intellectual space to celebrate the breadth of Black women's liberatory practices, contextualizing them with our lived experiences. To be sure in the final analysis, the purpose of this volume is not to appease, make comfortable nor safe, those who do not share our struggle. Rather our primary goal is to plant seeds of resistance, water the roots of transformation, and cultivate the fruits of healing for Black women, our communities and humanity as a whole. In conclusion, for us as well as many of our authors, this volume has been about going home - a spiritual and metaphysical repatriation - an honoring and celebration of our ancestors and foremothers as well as or African roots all of which have kept us grounded in a vision of a more just and humane world.”

The NEIU Library has access to the e-book. If you're on campus, the link is:
<https://link.springer.com/book/10.1007%2F978-3-319-65789-9>



Continued from page 4.

I found particularly interesting that everyone does not have to emote to go through the grief process. In fact, cajoling some folks to emote can be harmful and detrimental to their coping if they are not the kind of person to emote. I also learned that grief can have a strong physical impact most notably a loss of energy, and emotions can range from hostility, to sadness, and guilt to yearning.

Particular grief models that caught my attention were a cultural example from the Navajo who used a modulated approach to grieve over a 4-day period ending with no conversation about the deceased. Another model proposed by Martin and Doka (2000) demonstrated a continuum of adaptive coping approaches. Ranging from intuitive emotional coping to instrumental cognitive and behavioral modulated expressions of coping. The adaptive coping models can be taught to clients and help them cope in their own ways over time. Emotional, behavioral and cognitive strategies might be employed, providing counselors with a range of opportunities as they work with different clients. I did not know these models and approaches discussed beyond the DABDA model.

The idea of meaning making and finding the positive in the loss can have a strong negative impact on a griever. Done too early it can cause a lot of upset. The presenter expressed the difference between making meaning of death versus creating meaning from a death. They were clear the latter offered more positives than the former. Counselors were encouraged be present, take a non-expert orientation and avoid assumptions like grief ends, grief counseling does not deserve a one size fits all approach or over emphasizing the emotional cognitive processing of the grief experience.

Coming Out Full Circle

Dondee Gujilde, Clinical Mental Health Counseling Student

I never wanted to be who I have become. Since I can remember, I knew I was gay. Of course growing up in a society where any identity that is not “heteronormative” I suppressed my sexuality. I experienced with what I know now was internalized homophobia. I did not want to admit to myself that I was gay. I was afraid of what being gay in this world meant for my future. Therefore I tried to change who I was. Society played a huge role in my ideation of what male identity was supposed to be. I wanted to grow up living some cookie cutter heterosexual life which included having a wife and kids. What people sometimes do not realize is that society, mainstream culture, and even the media play a huge role in creating pathology. What I mean by this is that societal “norms” can potentially contribute to a person’s mental illness. In my experience, I suffered from a form of undiagnosed depression due to my suppression of my gay identity. I wanted to be “normal.” I went to great lengths to try and be like my heterosexual peers. This included acting like the masculine men I saw on T.V. and even trying to date girls. At the age of nineteen, I joined the U.S. Military as an Air Force Reservist because I thought that the military would change me. For some reason, I thought I would become masculinized and further suppress my identity. I believed that military experience could potentially make me straight. I wanted to change who I was. I wanted to please my peers and family. I wanted to please society. I wanted to be accepted. I really believed that the military could be some sort of conversion therapy for me. A naive sucker I was. I say that in jest of course. I immediately figured out that I could not change who I was. I ended up serving the military as an Airman for six years. I served when “Don’t Ask, Don’t Tell” was still a thing. Therefore suppression of my identity became even more prevalent in my life thus leading me to suffer from depression. Luckily with a lot of self-reflection and my own journey of self-acceptance I came to terms with my sexuality. I came out of the closet shortly after I completed my enlistment. I am now a proud gay veteran. Most importantly, I am proud to be gay.

Fast forward to the present. it is ironic to note that I am now a counseling intern working at one of the biggest community centers that serves LGBTQA youth and adults. As an intern, I give therapy to individuals some of whom may be experiencing what I experienced growing up... societal contributions of heteronormative standards that leads to the suppression of sexual and or gender identity. In the fall, I co-facilitated a therapeutic group called “The Coming Out Group.” The topic *society and the correlation to the suppression of sexual identity* has come up multiple times within the cycle of this particular group. In a few weeks, my peer and I will be co-facilitating a group that is geared toward Veterans and active members of the military who identify within the LGBTQA community. Topics that we may discuss in this group will be internalized homophobia and hypermasculinity, things that I have experienced in my own life.

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The point of my story is that growing up, I felt as though society and culture had told me that I needed to be a certain way to be accepted. This is my subjective opinion of course but I have met many clients in my practice as a counseling intern who have felt the same way. Society and culture can play a huge role when it comes to suppressing true identity. Therefore, some clients who are struggling with being Lesbian, gay, bi-sexual, and trans, may develop pathology such as depression and anxiety. As counselors, I hope that we approach our clients who are trying to come to terms with their sexual identity with a nonjudgmental approach to facilitate a healthy exploration of self within the therapeutic alliance. I also hope that as counselors, we can potentially be the catalyst for their acceptance of their own sexual and or gender identity. With that being said, I strongly encourage that you to do your research when it comes to multicultural competence in general.

It is truly ironic how I ended up being who I am today. Life has taken me many places. I am glad that it has taken me to where I am now. I am a proud gay veteran who is absolutely passionate about advocating for the LGBTQA community... for my community. I am hoping that one day my efforts will contribute to society's overall acceptance of differences in this world for all marginalized communities. I came a long way to be where I am today. Acceptance with my inner self has been such an amazing journey thus far. In some ways, my journey has come full circle. I went from trying so hard to suppress my identity to now assisting those who are struggling with their own. I literally never wanted to be who I have become but I can truly say that I am glad that I have become who I am.

Resources

The Breathe Network

<http://thebreathenetwork.org/>

We connect survivors of sexual violence with healing arts practitioners that offer sliding-scale, trauma-informed, holistic support. We also provide education and training for professionals in best practices for delivering survivor-centered, trauma-informed care.

**"The Fourth Trimester", new book by [Kimberly Ann Johnson](#)*

This holistic guide offers practical advice to support women through postpartum healing on the physical, emotional, relational, and spiritual levels—and provides women with a roadmap to this very important transition that can last from a few months to a few years.

<https://www.shambhala.com/the-fourth-trimester-3643.html>

**"EMDR Therapy & Mindfulness for Trauma-Focused Care", book by Dr. Jamie Marich/ [Trauma Recovery Books by Dr. Jamie Marich](#), written in collaboration with Dr. Stephen Dansiger*

Based on the belief that mindfulness is a critical component in the delivery of EMDR, this innovative text integrates mindfulness-informed practice with EMDR therapy to create an effective new approach for healing trauma. Based on current evidence-based research, the book demonstrates—with clear, step-by-step guidelines—how clinicians can conceptualize and deliver trauma-focused care in both mental health and addiction treatment. Infused with practical applications, the book offers clearly articulated and effective approaches that provide a concrete beginning, middle, and end of treatment planning.

<http://www.springerpub.com/emdr-therapy-and-mindfulness-for-trauma-focused-care.html>

A message to the Future Interns of the Counselor Education Program

From Past & Current Interns

Starting Internship can be a frightening thing. You don't know what to expect, you have no idea where you'll end up, and you don't know what your experience will be like. Here are some past and current interns' experiences:

My experience with internship was positive. At first, I was scared and nervous because I did not know what to expect. However, I was welcomed with open arms, and the supervisors and employees were more than willing to teach me about the field, which led to learning some valuable lessons. For instance, I learned having positive, professional coworker relationships are the key to building an effective work environment, such as coworkers working as a team rather than against each other. Second, I was working with different personalities, so I had to keep in mind that everyone had a particular way of doing their work. Don't be afraid to ask questions on how the work should be done when you don't understand. Third, keep in mind, your supervisor and coworkers have work to do as well, so be respectful of their time and space when they need it. Lastly, don't worry if you don't understand something or make a mistake. You're not expected to know everything and mistakes are expected. You're a student, not a seasoned professional. Remember, the reason for the internship is to gain valuable insight and practice the skills that you've learned in class. Just be honest with your supervisor and coworkers when mistakes are made and ask plenty of questions when you don't understand or need further explaining. On a positive note, when you're done with your internship, you'll have new skills to put on your resume.

-Jeanie M.

Rehab Counseling Class of '17

In my experience, it wasn't too hard to find an internship site. I mentioned to a friend the site I was going to apply to and she told me she knew the executive director and was able to connect me with him. I went to an interview and they accepted me. They were also in need of a Spanish speaking intern and told me that they had been needing someone who was bilingual. Right now the most difficult part about internship is about connecting with my supervisor. She is a nice person but I can't seem to establish a supervisor-supervisee relationship.

-Cynthia M.L.

CMHC Intern 2017-18

I have been in my internship for 5 months now (Arlington Recovery Center), and it has been very rewarding. I am learning how to file correct codes for insurance companies thus learning the business side of the counseling profession as well as learning how to lead group sessions of 3-9 people. I have been able to do individual sessions with clients, and that has taught me a lot. Writing a transcript of the individual sessions and recording it has helped me improve as a counselor. It helps me come up with alternative answers and different ways of approaching specific situations.

-Marcela L.

CMHC Intern 2017-18

A message to the Future Interns of the Counselor Education Program

From Past & Current Interns

Where to start....

Be friends with the secretary— they will always keep you informed if your supervisor gets too busy. Don't get stuck doing craft projects or creating documents. You are there to be an "extra" counselor: create groups, attend real meetings, and get involved with all types of clients/student groups. If you have another intern with you: partner up. They are the only other person who will have a similar experience to yours.

Ask for students early on.

-Aleksandra "Ola" K.

School Counseling Class of '17

I went through a little bit of a struggle to find a site. Most of the sites that I looked into were either very competitive or did not offer internships. I knew I wanted something on the south-side because it would be a lot closer and after sending applications and resumes to numerous sites, and constantly insisting, I finally received a call back. I thought all was well until the individual who was going to be my supervisor called me back to let me know he would be unable to take me on as an intern due to shifts in the company and recent additional responsibilities he was given. However, he felt so bad that he reached out to other sites and was able to find a supervisor within the company who could take on an intern.

Now, I am happily doing my internship at Metropolitan Family Services Southwest in Palos Hills, and despite it is a bit of a drive for me, I have made connections, learned a lot, built my confidence and receive great support from everyone.

-Ericka S.

CMHC Intern 2017-18