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**Dear Fellow Members of Chi Sigma Iota and
the Loyola Counseling Department,**

This semester has been all about learning, both inside the classroom and out. There have been so many opportunities for extracurricular education that we've lost count. The Graduate Research Symposium was a great chance for everyone to get their feet wet in the world of academia, and we loved hearing about everyone's research topic of choice. We also hosted a professional workshop and the Louisiana Association for Play Therapy Conference, and presented at the Louisiana Marriage and Family Therapy Conference and the Louisiana Association for Counselor Education and Supervision Conference. With all this learning going on, it might be time for this reminder: "It is what we think we know already that often prevents us from learning." -Claude Bernard. But alas, this is the struggle we all face as graduate students, and we are sure it won't deter your fearless pursuit of knowledge.

**Sincerely,
The Board of Chi Sigma Iota**

CONGRATULATIONS TO OUR RECENT GRADUATES!

Without a doubt, you will be greatly missed! Best of luck in all of your future endeavors!

December 2011:
Meredith Cheesman
Sherry Jackson
Stephanie Shorts (recipient of the Counseling Clinical Excellence Award)

Summer 2012:
Rachel Levesque
Alexandra (Ali) Rivera

Spring 2012:
Sarah Boddien
Stephanie Ducros (recipient of the Counseling Research Excellence Award)
Viveca Johnson
Joanika Leblanc
Heidi Molbak (recipient of the Regina Matthews Oehmig Award for Excellence in Counseling)
Julie Moss
Ariel Sheeger
Amelia Sherman

CALENDAR OF EVENTS

April:

14: Crawfish Boil

21: NCE

May:

9: Last Day of Classes

20: Graduation Celebration

June:

4: Classes Start

July:

4th: Independence Day Holiday

20th: Classes End

Have a wonderful break!

Laughter is the Best Medicine:

Two psychologists meet at their twentieth college reunion. One of them looks like he just graduated, while the other psychologist looks old, worried and withered.

The older looking one asks the other, "What's your secret? Listening to other people's problems every day, all day long, for years on end, has made an old man of me." The younger looking one replies, "Who listens?"

CALL FOR SUBMISSIONS:

Is there a topic in counseling that you want to spread the word about? Here is your chance!

We are currently accepting article proposals for the next issue.

Send your ideas to Alison Phillips at aphillip@loyno.edu.

We look forward to hearing what you have to say!

EVENTS AND ANNOUNCEMENTS



Shawna and Kevin Foose (above).

CSI Professionalism Workshop Featuring Shawna and Kevin Foose

Shawna and Kevin Foose gave a special presentation at the CSI Induction Ceremony on March 7th. Shawna is a counselor at Tulane University and her husband, Kevin Foose, is a Loyola Counseling Department alum who works at Family Service in Chalmette. Both spoke about working with clients who have experienced trauma and methods for managing with the emotional toll of this work. Shawna emphasized the importance of “internal boundary setting” and being especially mindful of autonomy when working with clients who have experienced traumatic events. She also suggested reading more about the concept of “compassion fatigue.” Kevin believes that having job satisfaction is essential to avoiding burnout. In addition, understanding and accepting the limitations of the profession is important.



Student attendees of the workshop (above).

They both emphasized the importance of continuing education, especially regarding theoretical orientation, through books, research, and even youtube videos. As Loyola alumni, we are able to access the Monroe Library’s resources indefinitely and should take advantage of this opportunity for continued growth. Kevin concluded with advice for novice counselors and a reminder to stay open: “Go slow, take your time, and trust that you have a good foundation to start from” as a student in this program. Shawna also reflected on the anxiety she felt when taking her first client and remembered her supervisor telling her to just go into the room and, “Act like a therapist.” Many thanks to both of them for taking the time to share their wisdom. Based on the success of this event, CSI has plans for future professionalism workshops, so stay tuned.

Loyola Counseling Department Raises \$1,380 for the National Multiple Sclerosis Society

The Department of Counseling participated in the 2012 Walk MS: New Orleans on Saturday, March 24th, in Audubon Park. Together, thirteen students and faculty members raised \$1,380 which the Society will utilize for research and raising awareness. From the MS Society’s website: “Every hour in the United States, someone is newly diagnosed with MS, an unpredictable, often disabling disease of the central nervous system. The progress, severity and specific symptoms of MS in any one person cannot yet be predicted, but advances in research and treatment, made possible from the funds raised in events like Walk MS, are moving us closer to a world free of MS.” Great job team!

Anxiety Screening

Thank you to the following students for administering an anxiety screening for Loyola undergraduates on Thursday, March 1st in the Dana Center.

- Christine Bagala
- Lisa Chew
- Ari Evans
- Caitlyn Galjour
- Katie Hancock
- Teresa Jefferies
- Nate Koch
- Alison Phillips
- Nicole Snyder
- Matthew Watson

Check Out the Loyola Counseling Department On-Line
Facebook: Loyola Counseling
and Twitter: <http://www.twitter.com/LUNOCounseling>

Loyola Graduate Student Research Symposium Presentations



Lisa Chew (left)—Tarasoff Thirty-Five Years Later: A Fifty-State Examination of the Statutes and Legal Interpretations that Define the “Duty to Warn” for Mental Health Professionals. Summary: Tarasoff v. Regents of the University of California (1976) established a legal duty for mental health professionals to warn third parties of potential violent acts of clients. In the years since that decision, many states have created unique “duty to warn” requirements through statute and legal interpretation.



Kathleen Hancock (above)—Play therapy for Socially Withdrawn Children. Summary: Literature review exploring reasons why children withdraw and various play therapy techniques to treat them.



M. Leigh Boyer (left)—Treating Oppositional Defiant Disorder in Adolescents Using Reality Therapy. Summary: Because of biological, social, and psychological changes, adolescents struggle with controlling emotions. This makes them susceptible to many self-destructive behaviors, especially if the adolescent possesses symptoms or a diagnosis of ODD. Choice theory and reality therapy can help these adolescents with ODD overcome their obstacles and take responsibility for their actions.



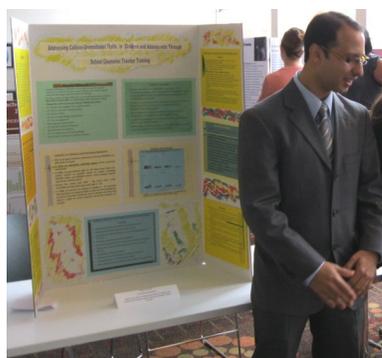
Alison Phillips (left)—Sexual Exploration During College: Healthy and Unhealthy Behaviors. Summary: College is often a time of sexual exploration. Emerging research suggests that students are often unaware of the emotional effects of this exploration, both positive and negative. This presentation aims to raise awareness about the psychological effects of sexual relationships.



Gayle Guillory (above)—Counseling Military Personnel with Eye Movement Desensitization Reprocessing (EMDR). Summary: EMDR shows promise as a method of counseling military personnel for war-related trauma, particularly PTSD. The ideal military treatment would be brief and suited to the unique environment needs which EMDR can fulfill by virtue of its flexibility.



Ari Evans (left)—Group Therapy in Treating Drug Addicted Mothers. Summary: Existential therapy in group work is applied to treating mothers addicted to substances. Suggestions for the formation and structure of the group are provided. Discussion topics and activities are also examined.



Basem Darwish (left)—Addressing Callous-Unemotional Traits in Children and Adolescents through School Counselor-Mediated Teacher Training. Summary: Experiencing stress, anxiety, social interaction issues, learning disabilities, and poor teacher efficiency can lead to the expression of problematic behaviors in school age children and adolescents. Over time, if steps will not occur to address such issues, children and adolescents may develop and express callous unemotional behavior traits (CU Traits), aggression, and deviant, anti-social behaviors. Expression of such traits interferes with the normal development, achievement, and interpersonal interactions of these children and adolescents. By designing and implementing a school counselor mediated teacher-training approach, school teachers will improve their skills in identifying early problems and issues with their students in the classroom setting, and can work with school counselors to address and mitigate these issues with their students before they lead to the development of undesirable behaviors and traits.

“Anyone who stops learning is old, whether at twenty or eighty. Anyone who keeps learning stays young. The greatest thing in life is to keep your mind young.” -Henry Ford

Loyola Graduate Student Research Symposium Presentations

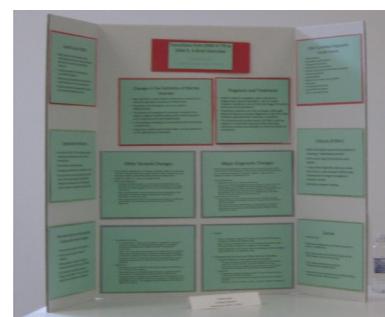


Nathan Koch (left)—How Spiritual Traditions Define Relationships and Guide the Counseling Process. Summary: A look at intimacy in Western Culture and how other cultural lenses approach intimacy. A description of how mental health professionals can help couples learn intimacy.

Matthew Watson (right)—Reactive Attachment Disorder: An Integrative Examination of Etiology, Diagnosis, and Treatment. Summary: From origin to diagnosis to ultimate treatment, RAD is full of criticism and controversy. Considerations for counselors beyond “simple” diagnosis will be explored.



Jesse Clovis Roessler (left)—Cognitive Behavioral Therapy for Comorbid Asthma and Anxiety in Older Adults. Summary: Older adults commonly experience asthma and anxiety together. Research indicates a strong correlation between the two conditions. Either condition leads to a higher use of medication, symptom confusion, and decline in quality of life. Older adults with comorbid asthma and anxiety would benefit from CBT combined with asthma education.



Christine Bagala (poster pictured above)—Transitions from DSM-IV to 5. Summary: An overview of changes from DSM-IV to DSM-5, plus implications.



Jerrilyn Dixon (left)—Benefits of Play Therapy for Children Dealing with Trauma from Catastrophic Events. Summary: This research explores the effectiveness of play therapy for children who may be experiencing PTSD as a result of a hurricane, school shooting, or terrorism.

Mary DePartout (below)—What the (Mental) Health? Summary: An overview of mental health related helping profession graduate school and career options.

Mary DePartout (below)—Using Rational Emotive Behavioral Therapy to Treat Female College Students with Eating Disorders. Summary: A combination of the increasing prevalence of anorexia and bulimia on college campuses and the medical complications of eating disorders, including potential fatality, necessitate an intervention that targets the development and maintenance of eating disordered behavioral patterns. REBT intervenes by addressing the irrationality of beliefs creating body dissatisfaction and lowered self-esteem.



Jerrilyn Dixon and Viveca Johnson (left)—Play Therapy and Terminally Ill Children. Summary: Investigates the benefits of play therapy and what it provides for children dealing with terminal illness such as cancer.



Not pictured:

Kacie Fry—Pet Loss and its Place in Grief Therapy. Summary: This research explores the effect pet loss has on the individual and/or family; how it affects different genders and age groups, and ways to integrate dealing with such loss through grief therapy.

Walesa Kanarek—Attachment and Women in Prison. Summary: The potential benefits of integrating an attachment lens when providing therapy to women and mothers in prison.

Rae Jacobson—The Impact of Yalom’s Curative Factors on Adolescent girls with ADHD. Summary: Explores using Yalom’s curative factors as a means of managing ADHD and promoting healing and self-esteem in adolescent girls.

**LOUISIANA ASSOCIATION FOR MARRIAGE AND FAMILY THERAPY CONFERENCE
STUDENT AND FACULTY PRESENTATIONS**

Title: Non-traditional Protocols for Marriage and Couples Therapy

Presenters: Mary DePartout, Christine Bagala, and Dr. Justin Levitov

Summary: Several non-traditional protocols for couples therapy exist in current literature. These protocols vary by the number and gender of therapists involved, the setting the therapies take place in, and the nature of the couples' problems. In this workshop, the presenters will outline several of these non-traditional protocols as well as discuss the theoretical basis and rationale for each.

Title: How Spiritual Traditions Define Relationships and Guide the Counseling Process

Presenters: Nathan Koch and Dr. Justin Levitov

Summary: This workshop will explore how various spiritual traditions define relationships. The impact that spirituality exerts on couples and on couples counseling will be studied from this perspective. Ultimately participants will learn ways to better honor spiritual dimensions within the clients' relationship and the couples' counseling relationship.

Louisiana Association for Counselor Education and Supervision (LACES) Conference 2012 Lafayette, LA

Presenters: Dr. Christine Ebrahim, Alison Phillips, and Ari Evans

Title: Recognizing the Impact of Group Dynamics in Classroom and Supervision Settings

Title: An Introduction to MFTs and Their Role as a Therapist in the Mental Health Community

Presenters: Eddie Parish, PhD, Jana Sutton, PhD, Frank Thomas, PhD, and Tim Dwyer, PhD (pictured below)

Summary (by Alison Phillips): As a student attendee of the workshop presented by Dr. Dwyer and colleagues, I was impressed with the energy and passion all four presenters displayed for Marriage and Family Therapy and Systems Theory. They shared many pieces of wisdom from their collective years of experience. I learned that taking a systems theory approach means trying to understand a client not simply as an individual, but also in the wider context of their constellation of relationships – such as family, friends, work, and faith communities. A counselor should ask him/herself, "How does this client and his or her behavior make sense given everything else that is happening in his or her life?" Once a counselor understands the client's world-view, then he can help the client make sense of it. All four emphasized that it is important to not make assumptions about a client. They gave special advice to novice counselors, which included:

1. There's no such thing as the perfect session.
2. Techniques are what you use until the real therapist shows up. Techniques are usually used to help the counselor manage his/her own anxiety.
3. As you gain experience as a counselor, you learn to tolerate anxiety and uncertainty within a session better.
4. Don't act artificially. Be transparent. It's okay to tell your client, "I may not be able to help, but I will try."
5. Your first years as a counselor will be difficult, so don't forget to care for yourself by doing the things that "water your soul."

Much appreciation for sharing your wisdom!



FACULTY SPOTLIGHT ON

DR. LEVITOV

by Alison Phillips

I interviewed Dr. Levitov on a sunny Friday afternoon in March. Prior to my appointment with him, I had written down some specific questions, but as seems appropriate, my interview became a conversation with him. Leaving his office, I couldn't help but think to myself that Martin Buber would have approved. Below are the highlights from our conversation, only a snippet of the depth of wisdom Levitov has to share.

Alison (A): How have you avoided burnout? Or, how have you dealt with burnout if you have experienced it?

Dr. Levitov (L): I did experience burnout as a parole officer. In a matter of 3 years, I felt that I was unable to work effectively. I had made a deal with myself that if I ever found myself in that position, I would stop, so I did. It was a combination of factors—long hours, lots of clients, lots of responsibilities to the parolees and to my supervisors. Over the course of my career, I think that the main way that I have been able to manage burnout is by only seeing clients only part-time. Balancing teaching and counseling has been very helpful. In addition, I think it's really important to have a hobby that you can feel an immediate sense of accomplishment about. For me, I have always enjoyed bike riding and working with my hands fixing mechanical things.

A: What was the best piece of advice that someone gave to you when you were first starting out as a counselor?

L: I remember a mentor who reminded me, "Always remember what a privilege it is to be invited into the personal life of a person or family." Another important piece of advice I received is, "If a case is going to be hard for you, it would probably be hard for most mental health practitioners." What he meant by that is that just because you are a novice does not mean that you are at a huge disadvantage compared with practitioners with many years of experience. Having experience does not mean that you can easily help everyone. Regardless of your amount of experience, being transparent and human with a client is important. There is huge value in admitting to yourself and the client when you've erred in some way.

A: I know that you're a humble person, but in looking back at your contribution to Loyola, what do you feel the most proud about?

L: I would not call it a sense of pride, but what I reflect most upon is the realization of how important my students were to me. That in order to be a teacher, I had to have students. Students and teachers are mutually reliant upon each other. I am very reverent of that reciprocity.

A: What's the best piece of advice you can give to someone who is just starting out in the field?

L: Always be true to yourself. How you *are* is a gift you can give to someone. I think that when we study psychology, we can become very vigilant about ourselves and it can create a sense of anxiety, but it's important to remember to be true to ourselves.

A: Do you have a favorite story from your years of teaching?

L: One of my favorite stories comes from one of my students. This student was about 25-years-old with red hair and blue eyes and she was working with severely disturbed children who had experienced a lot of trauma. She decided to make puppets with one of her clients and every week they worked on their puppets. After the child had created a replica of each one of her family members, she asked the counselor if she could make one more puppet. The counselor agreed and asked her what supplies she needed. The child said, "Red yarn and blue buttons." The child continued to make the puppet in the next session with the supplies the counselor had brought. She did not recognize that the child was making a puppet of her until the child was finished. Without even realizing it, she had created such a safe and caring environment for the child that the child had invited her into her family. One of the things that I love most about Loyola students is that they are so humble.

I know that I speak for everyone (not so humbly) when I say that Dr. Levitov will be sorely missed. Best wishes on the next phase of your journey.

ASK PROCESS PETE

Process Pete keeps a mailbox in the Big Room. You can anonymously ask him any question and receive an answer here. Anonymous asked: "How does your garden grown?"

Dear Anonymous,

My Garden grows very well thank you. It's full of watermelon. I brought some to the Crawfish Boil!

Sincerely,
Process Pete



STUDENT SPOTLIGHT ON VIVECA JOHNSON

by Alison Phillips

Viveca Johnson is graduating in May of this year and looking forward to starting her career as a counselor. I spoke to her about her hopes for the future and her advice for new students.

Alison (A): What are you most looking forward to about graduating, and what are you most afraid of?

Viveca (V): What I'm most looking forward to is definitely practicing. I am only looking for jobs where I can do therapy, and if I can't do it, then I don't want the position. I feel like I am equipped with these skills and I want to put them to work. The fear part is being a novice in it and feeling like, "Am I competent enough?" I feel like I'm just now getting really immersed in my theory (Adlerian), which has been a blessing, but I wish that I had been able to identify with a theory earlier in the program.

A: What are your plans for the future? Five years from now? Ten years from now?

V: I can definitely see myself in private practice. I'm not sure where I will be, because I'm open to moving. It might be Baton Rouge or Atlanta or D.C. In five years, I definitely want to have my license and I would like to be venturing into a group private practice. I have been talking with several fellow students about the idea of starting a private practice together with the various specialties we have.

A: What population do you like working with the most and why?

V: I like working with couples the most because it's so fascinating. Love is and always has been such a mystery. Love can be difficult to explain or put into words but you can definitely feel it. No one knows why couples fall in love, but it is so powerful. I can still see it even in couples who are having major problems, and I call it my "light of hope."

A: What's the most frustrating part about working with couples?

V: When I see one partner putting another down and not letting the therapy room to be a safe space that is hard.

A: What is the most important piece of wisdom you learned in a class?

V: My two favorite classes were Family Systems and Multicultural Counseling. In Family Systems, Dr. Levitov emphasized that no one wants to be bad at something. For example, nobody sets out to be a bad parent. We are the way we are because that's the example we have been shown. We are the way we are because of our system. The class allowed me to have more compassion for others and even members of my own family.

A: What advice do you have for students just starting the program?

V: I have two pieces of advice. First, make friends with your fellow students in this program. A lot of times I will reach out to a friend in the program to consult with first before I even ask my supervisor. There are a lot of really smart people in this program and it's so great to be able to get their perspective and advice. In addition, I think it's really important to go above and beyond coursework, reading everything that you possibly can about a theory or topic. There's so much to learn beyond what we can possibly fit into a class.

Creative Corner

Untitled

by Nathan Koch

City Lights Beaming
Constant Action, Unnoticed
Healing, Growth, New Life



GOOD LUCK ON ALL OF
YOUR FINALS
LOYOLA
COUNSELING
STUDENTS!

ALUMNI SPOTLIGHT ON KELLIE CAMELFORD

by Alison Phillips

I interviewed Kellie Camelford, a 2009 graduate of our program, who recently presented at the annual conference of the Louisiana Career Development Association in Baton Rouge, LA on the topic of *Career Development for 8th and 9th Graders*. Her copresenters were Dr. Christine Ebrahim, Catherine McDermott, and Ashley Childs (see Alumni Spotlight on following page).

Alison (A): Where do you work?

Kellie (K): I work with 10th graders and college advising for juniors and seniors at Cabrini High School. I also did my practicum at Cabrini, so I would say that it's important to choose a practicum and/or internship site that you can see yourself working at in the future. When Cabrini had a position available, they called me first to let me know.

A: What do you love most about working with adolescents?

K: I like working with adolescents because I think it is such a difficult time in development where outside support is needed. The fight between independence and dependence is interesting to watch as adolescents explore their personality based on their self-perception, parent-perceptions, and peer perceptions. I like to support adolescents and help them through difficult times showing them that they can be heard and their opinions count. I love working in a school environment because it is a neat experience to watch a child grow and develop (hopefully into a mature young adult). It's great to see a whole-picture of a client since we meet with their parents, see them interact all day in the classroom and outside the classroom.

A: What is the hardest part about working with adolescents as a school counselor?

K: I think there are two "hardest parts" of my job as a school counselor. First, it's just balancing time and meeting with all students. It can be difficult to give all students equal access since administration sets expectations for us to meet with failing students more frequently, therefore sometimes I feel that I miss opportunities with the "average" kids per say. Secondly, I think it's always tough to break bad news to parents whether it's a student failing academically or students admitting to suicidal ideation, etc. You just never know how a parent is going to handle the information you have to give them (whether they will be grateful or blaming).

A: Did you always know that you wanted to be a school counselor?

K: I knew I wanted to be a school counselor before I came to Loyola. From my experience growing up in New Orleans, my school counselors were helpful from an administrative standpoint, but not from a personal development standpoint, and I knew I could make it better.

A: What's the best advice you received as a novice counselor?

K: Consult, consult, consult! Dr. Fall said it first to me and then Dr. Ebrahim. I think that when you consult, you feel like you're not alone, and you get other ideas, insights, and options. It's so important.

A: What's the best advice you can give to novice counselors?

K: If you're looking to get a school counseling position, send a cover letter and your resume to schools at the end of January or early February, because that is when schools ask all faculty whether or not they are returning. If you wait till May then you will be too late!

A: What was the best part about getting your Masters at Loyola?

K: The individualized attention that I received at Loyola. Professors are so willing to work with you one on one. The relationships between the professors and the students is really valuable. You can't have that kind of dialogue in a bigger program.

K: What is an issue that frequently comes up in your work with adolescents that a student at Loyola could prepare for by doing research?

K: A major issue is anything to do with social media (i.e. facebook, twitter, instagram, tumblr, etc.). Stay current on all forms of social media and how adolescents use them in their favor and against each other. Cyberbullying is an issue, yet the language used and types of pictures students post seems to be the bigger problem. I was surprised at how much adolescents use social media, but very surprised at how much their parents are unaware of their child's use of social media.

A: Do you interact with parents a lot?

K: Yes, and it can be a great thing, but sometimes it can be frustrating. Sometimes you can see the parallel processing—why the child is the way they are. Sometimes we get resistant parents. Parents are like second clients.

A: Dr. Ebrahim talks a lot about advocating for the profession of school counseling. Do you feel like you have to do a lot of that?

K: At a private high school, I think that I have more support and freedom than at other high schools. I meet with the principal every other week regarding various issues, and I try to use this time to show the value of my work and the depth of my work. It can be hard though because there is a power differential regarding confidentiality and sometimes it is difficult to tell the principal you cannot answer something based on student confidentiality. Advocacy is extremely important because the role of school counseling is still being developed and often is developed by the administration and not by certified counselors. It is critical to get principals and school administrators on board to be successful in a school counseling role.

A: What are your plans for the future?

K: I am currently getting my Ph.D. at UNO, and I think I might be writing my dissertation about school counseling advocacy. I would like to have a private practice in the future. I would also love to come back to Loyola and teach counseling, especially if they create a PhD program. Basically, I want to become Dr. Ebrahim and she knows that! I'm a born and bred New Orleanian, so I plan on being here.



ALUMNI SPOTLIGHT ON CATHERINE MCDERMOTT AND ASHLEY CHILDS

by Alison Phillips

I also spoke with Catherine McDermott and Ashley Childs, two 2009 graduates of our program who are working as school counselors in New Orleans. They offered advice about how to best utilize the resources Loyola offers to prepare for a future as a counselor in a school-setting or beyond.

Alison (L): What do you think is the best thing about working with adolescents and what do you think is the worst thing?

Ashley (A): What I love the most about them is also kind of what I like the least. They have the ability to be completely in the moment, but because of that, they're also kind of flighty.

Catherine (C): What I like is that they're in such a critical learning period in their lives, where, for the first time, they're starting to not necessarily pay attention to what their parents think. They're starting to pay attention to their sense of self. As a clinician, you can really help them develop their autonomy. What I like the least about working with adolescents is dealing with their parents. I understand, because parents are just trying to do their job, but then the parent becomes like the second client.

A: Is the parent the client?

C: "They" say that the parent is the client. You have to involve them.

L: When working with adolescents, did you ever struggle with giving too much advice, because they are younger and are maybe asking for more guidance?

C: As a novice counselor, you do want to give them advice, and they are so open to your input, but you learn that when you're giving advice, you're not really helping them.

A (joking): I never struggled with that.

L: What are your plans for the future? Do you think that you will stay in New Orleans and continue to work in a school setting?

A: Well, I'm not from here. I'm from Dallas, and I've loved being in New Orleans. As for my future plans, I'm really not sure. If there's an opportunity for me to stay in New Orleans, I would like to, but if it's not possible, I am open to leaving.

C: As far as New Orleans goes, I'm here. This is my home. This is where I'm going to stay, unless some act of God happens. I'm New Orleans born and raised, and I think there's a lot we can do with counseling here, which is part of the reason I moved back after college. As far as school counseling goes, I don't think that this is where I'm going to end up, and I think Ashley can say the same. When we were at Loyola, there was not even a school counseling track, but neither one of us would have chosen that track if there was. We

would both like to work with adolescents no matter what, but school counseling is a whole different deal. There's a lot of politics that you have to deal with, and you don't have as much autonomy.

A: I agree.

L: Who are you most accountable to at your school?

C: The principal of our school is our direct authority, but she's hard to get in touch with. It slows things down. Feeling micromanaged, we don't always have the ability to start the programs we'd like to start. We kind of have to have permission before we start things.

L: What was the most important part of your education experience at Loyola?

C and A: The Philosophy of Counseling course.

C: For me, I think that class was in some ways, the whole fulcrum of my counselor education experience. Everything turns on that class. Dr. Levitov was very good at teaching that counseling is more than just telling people how to live their lives. It's about coming to the ledge with someone and recognizing how holy that place is. Also, Dr. Ebrahim was very influential as my supervisor and still is.

A: I think that Dr. Levitov and Dr. Fall's ability to teach through their experiences alone, beyond books, was the most valuable part of my time at Loyola.

L: Do you have any parting advice to current students?

A: Be in the moment. Make sure that you are mentally present for every class, every interaction, and every exercise that you're doing and really take the time to understand what the professors are trying to teach you. Appreciate the program, because it really is amazing.

C: My first piece of advice is to go to counseling at the counseling center on campus. I did that, and it was really, really helpful, because as I learned things about counseling, I was able to process them. I don't think that you can be a really successful counselor unless you know what it's like on the other side. My second piece of advice is to students interested in becoming school counselors. Even if you know that you want to be a school counselor, it's important to do at least part of your internship outside of a school. The school counseling positions are the highly coveted and it can be really difficult to get a job in a school, so it is important to have the experience and confidence to work in another setting if necessary.

A: I agree, but it's funny, because both of our school counseling positions sort of fell into our laps. We were lucky.

Thank you to Catherine and Ashley for taking the time to share their advice.

"I have never in my life learned anything from any man who agreed with me." -Dudley Field Malone



changing the conversation
about mental health

ACTIVE MINDS AT LOYOLA UNIVERSITY NEW ORLEANS

by Mary DePartout

The statistics for mental illness on college campuses are staggering. An estimated 26 percent of Americans ages 18 and older – approximately one in four adults – live with a diagnosable mental health disorder in a given year (Kessler, Chiu, Demler & Walters, 2005). In particular, young adults aged 18-24 have the highest prevalence of diagnosable forms of mental illness among the entire population (Hodges, O'Brien & McGorry, 2007). Onset of anxiety disorders (Kessler, Berglund, Delmer, Jin & Walters, 2005), bipolar disorder (Kessler, Chiu, Delmer & Walters, 2005), and schizophrenia (Robins & Regier, 1991) generally strikes before or during this age range. Despite the rate at which mental illness afflicts young adults, the 18-24 year old age range shows the lowest rate of help-seeking behaviors compared to older adults (SAMHSA, 2006).

As students in a counseling program, we understand the importance of recognizing and treating mental illness. We are open to talking about our own experiences in counseling and sometimes disclose our own struggles with mental illness. We have a warm, supportive atmosphere and are surrounded by students and faculty members who are passionate about helping others. Unfortunately, not all students in other programs on campus have constant access to such compassionate peers.

Active Minds is a student run organization that aims to increase the awareness and decrease the stigma of mental illnesses on college campuses. Alison Malmon, a graduate of the University of Pennsylvania, founded active Minds in 2001. Her older brother Brian committed suicide a year earlier while he was a senior in college. He suffered for years with depression and psychosis and was later diagnosed with schizoaffective disorder. Brian's death motivated Alison to push for greater recognition of and support for people struggling with mental illness on college campuses.

Active Minds Inc. received official 501(c)3 non-profit designation in late 2003. Chapters of the organization can participate in several national and campus initiatives. *Send Silence Packing* is a travelling exhibit of 1,100 donated backpacks that represent the lives of college students lost to suicide each year. Campus based initiatives include *National Day Without Sigma*, *National Eating Disorders Awareness Week*, *National Stress Out Day*, and *PostSecretU*.

A group of undergraduate and graduate students are in the process of establishing an Active Minds chapter here at Loyola, which will be the second chapter in Louisiana but one of over 340 chapters nationwide. If you are interested in becoming part of this great organization, contact Mary DePartout at mdeparto@loyno.edu. If you are unable manage the commitment of becoming a member, please join us for events we host on campus!

LEARNING TO BE WHOLE

AN OP-ED

by Gayle Guillory

Body-orientated therapies such as breath work, meditation, and particularly yoga, are becoming more common in the context of counseling. Yoga therapists are helping clients process thoughts and emotions inaccessible through more traditional talking therapies alone. While most people are aware of yoga as a form of alternative medicine which can reduce stress, they are unaware of its capacity to aid in the treatment of severe mental disorders, assuage trauma, or generally engender a stronger sense of being in and of the world. Through yoga, clients can cultivate a strengthened connection with the body which transfers to other connections, personal and interpersonal. The Sanskrit translation of the word "yoga" is "perfect union," and through the practice of yoga, clients can feel more attuned not only to themselves, but also to their life goals and inter-

personal relations.

Yoga is a personally empowering practice because it requires training and repetition of body postures (asanas), breathing (pranayamas), and meditation (dhyana). Yoga also helps counselors guide clients in developing an awareness of the present moment "here-and-now," with all of the thoughts, feelings, and bodily sensations that go with it. Yoga therapists describe the process of focusing attention in one direction while simultaneously maintaining a sense of being whole. The client must first hone the capacity to concentrate and differentiate between mental, emotional, or physical stimuli before re-integrating the whole self. This manifests as a sense of equanimity and equilibrium between mind and body. (CONT.)

LEARNING TO BE WHOLE CONT.

Body theologians hold this sense of equilibrium as sacred, and believe that the way we feel about our bodies colors our spiritual connections. They believe that one of the more severe consequences of trauma is a body-soul split; one which shamanic cultures treat by calling the soul back to the body.

The number of body therapies is extensive. A few early 20th century examples are the Feldenkrais Method, invented in 1904 with the aim of fostering more flexible minds and bodies, and the Alexander Technique, invented a decade later by a Shakespearean actor who noticed that his emotional state resulted in physical tension which further hampered his performance. Another form of therapy which recognizes the body's importance is "body mapping," which aims to describe a client's personal narrative pictorially. In addition, Eye Movement Desensitization and Reprocessing (EMDR) uses the body to help reprocess trauma. These therapies suggest to us that the body may be the *only* conduit to that which is unconscious, procedural, or possibly traumatic in nature.

Although becoming attuned to your body is a natural stage of human development, this process can be stunted or sabotaged. I believe that we live within the context of a culture that does not promote mind-body integration. Consumer culture stands to profit from those feeling disconnected from their bodies by offering solutions such as plastic surgery and the latest fashions. The emphasis is on presentation, and there is a temptation to view one's body as a tool, or even worse, as an adversary. Yet the hurdles we encounter in connecting with the body make it all the more vital that we do so, not only for ourselves but for those we seek to help within the context of this culture.

The good news is that this disconnection is an identified need being attended to by a growing number of counselors. Yoga is being incorporated into sessions to treat anxiety, depression and insomnia. As clients reconnect with themselves, they discover more possibilities for processing negative emotions. A recent Time Magazine article described how Yoga Therapists tailor therapy to presenting problems, with energizing breaths for depressed clients, balancing breaths for anxious clients, or "grounding" positions, like the warrior pose, for those with Post-Traumatic Stress Disorder who are struggling with dissociation (retrieved from: <http://www.time.com/time/health/article/0,8599,1891271,00.html>). The Langley Porter Neuropsychiatry Institute in California found that anxiety levels remain reduced, even 12 months after yoga training (retrieved from: <http://www.psychosomaticmedicine.org/content/41/8/637.full.pdf>).

Yoga has even shown promise for some schizophrenic clients, reducing symptoms better than exercise

alone or a waitlist placebo, according to a 2007 study, and increased their ability to recognize facial emotion better than exercise alone during a 2010 study (Visceglia, 2007). Considering that many schizophrenic clients feel severely isolated, disconnected and disorganized on multiple levels, the sense of connectedness fostered through yoga makes an ideal contribution to treatment.

Schizophrenic clients are not alone in humanity with their exaggerated sense of disconnection. The Indian philosopher Sri Aurobindo describes feeling separated from each other and our deepest selves as the ubiquitous human struggle. It's a disconnection which has been recognized throughout the ages, most recently by psychoanalysts. Feeling alienated from one's body-ego might be a subconscious motive for clients seeking body therapies. What the recent popularity of yoga and other body therapies may show us is our natural inclination towards wholeness. Yoga has the remarkable potential to bolster clients' relationships, including the counselor-client relationship. As Martin Buber might conceptualize it, yoga has the potential to reduce "I-It" experiences and increase "I-You" encounters. Yoga helps teach, in a procedural and emotive manner, a sense of wholeness that might not be communicable with words alone. As Carl Jung stated, "Yoga is the perfect and appropriate method of fusing body and mind together so that they form a perfect unity."

References and Further Reading:

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PICTURE THIS, TAKE TWO

Department-Wide
Crawfish Boil



Left: Dr. Steen teaches her daughter to suck the heads of the crawfish.



Left: Megan Murphy selects the winning raffle ticket from Stephanie Ducros, while Lisa Chew, Rachel Levesque, and Ali Rivera monitor for any “inconsistencies” in the raffle system.

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CALL FOR NOMINATIONS

The Alpha Phi Chapter of Chi Sigma Iota would like to extend an invitation for nominations for the 2012 – 2013 Executive Board. All current, active members are eligible to run. Self-nominations are accepted. Please submit a short bio to Dr. Ebrahim before 5:00 PM on Friday, April 20th. We are accepting nominations for the following positions:

- President Elect
- Secretary
- Treasurer
- Parliamentarian/ Historian
- Alumni Member at Large

Elections will be held April 24th-27th. This board will serve from September 1, 2012-August 30, 2012. You must be a current, active member (up to date on dues) in the Alpha Phi Chapter to be eligible to participate in the election.

Best of luck!