



# Chi Sigma Iota - Beta Upsilon Chapter

*Counseling Academic & Professional Honor Society International*

## Beta Upsilon News

The Official Newsletter of Barry University Counseling Program 's Chapter of Chi Sigma Iota Counseling Honor Society International

Fall 2018

### Beta Upsilon Chapter Presidential Address: Lori Reibach

#### Chi Sigma Iota

The mission of Chi Sigma Iota is to promote scholarship, research, professionalism, leadership, advocacy, and excellence in counseling, and to recognize high attainment in the pursuit of academic and clinical excellence in the profession of counseling

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This semester the board and our chapter members have effectively worked together to establish new ideas for our chapter to flourish. For the first time, this year, we have collaborated with FIU to create a conference designed for CSI chapters in the South Florida area. This conference was created to assist students in immersing themselves in specific issues that are taking place in our communities and professional field. In addition, the members of the board have continued to listen to the requests from students in our program. Some of these requests were more social events and community service events. The board hopes that you will engage in these events to further grow as a professional in the field, give back to the community, and get to know others in the program. (Make sure to keep a look out in your emails! Dr. Machuca always sends the calendar of events and reminders of events coming up!) The board of CSI loves to hear requests, ideas, and areas for growth. If you ever come up with any ideas or have a concern, please reach out to us! We listen to everyone and take all requests into consideration!

Additionally, I would like to extend my gratitude to a few different individuals. First, a huge thank you to my executive board. Without their hard work, commitment, and dedication, none of our events would occur as smoothly as they do. The board works hard and diligently to provide different resources and events for the students. A special thanks to Dr. Maki for stepping in as a faculty advisor while Dr. Casani was on her maternity leave. A huge thank you to Dr. Machuca for always moving

around his busy schedule to assist the board with daily tasks and meetings. Additionally, I would like to thank Kimberly Allison for being our presenter for Sunshine Seminar. Your knowledge on sand tray therapy was apparent and so informative to the students that attended. All of us have such a wonderful time doing the demonstrations with the sand trays. Another big thank you to Leo Balserio for leading our journey into the field event for the second time. This event has been so informative for the students who attend and allows us to get a very good understand of post-graduation life as a counselor in the field.

Finally, I would like to welcome our newest BU-CSI member – Westen! Congratulations Dr. Casani! The board is so excited to meet our newest member!





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## Faculty Advisor's Greeting: Raul Machuca, PhD, LMHC

This is the seventh year in the role of Faculty Advisor for the Beta Upsilon Chapter of Chi Sigma Iota. In this role I have witnessed the leadership potential and realization of such potential for many of our outstanding counseling students. The memories I have of all those who have had an active role in our chapter continues being the strongest motivation to continue mentoring, advising and supporting new students every year.

For this edition of the newsletter, I would like to share my most recent reflections around my journey with CSI, as well as, what it means for me to be part of this professional organization. As I stated in my nomination entry for the treasurer position of Chi Sigma Iota this year, "Starting as an international student first and then as a counselor educator and supervisor, being part of a counseling academic and professional honor society has been one of my most significant sources of pride. CSI has been my professional home and the place where I have felt connected and supported".

Chi sigma Iota has been my main professional home since 2005 when I first became a member. My first experience in a leadership position within CSI was as graduate student at large for the Alpha Eta chapter of the University of New Orleans. In this role, I discovered the importance of being involved, both in the chapter mission and activities, and most importantly, in the promotion of excellence and professional identity for current and future counselors and counselor educators and supervisors. CSI became the closest place where I could experience an actual professional connection to the field of counseling.



In the year 2011, I transferred my membership to the Beta Upsilon chapter at Barry University. A year later, I became the chapter faculty advisor. Since then, I have been part of the national Counselor Community Engagement Committee and the Faculty Advisors Committee. Through these experiences I have had the opportunity of collaborating with CSI leaders around the country in the development of important initiatives oriented to fulfill our honor society's mission of excellence and leadership at the national and international levels.

I have been trainer and co-trainer of new faculty advisors through workshops and presentations sponsored by CSI headquarters at various regional and national conferences. The most recent, the Southern Association for Counselor Educators and Supervisors conference in Myrtle Beach South Carolina. In this role, I have shared the successes and challenges of a chapter's day to day life, as well as my pride and commitment to our profession, and the promotion and defense of our professional identity as counselors.

Through this journey I am very grateful to have counted with the incredible support of many mentors, the support of our faculty co-advisor Dr. Casani, and of course, the confidence and support of our student leaders and members. I am particularly grateful for the work of our current board and their continuous effort to maintain the legacy of excellence of our award-winning chapter.

## Doctoral Spotlight: Kimberly Allison

### Tell me about yourself.

I moved to Ft Lauderdale from Huntsville, Alabama last year to attend Barry University. While living in Alabama, I earned a Master's of Science in Clinical and Counseling Psychology at Alabama A&M University.

While working towards my Masters degree, I felt drawn to work with individuals coping with trauma. I received training as a Registered Integrative Sandtray Therapist (RIST) and in basic EMDR. Since my graduation, I have continued training in CBT, TFCBT, ARC, and DBT. I completed Gottman Level one training with Dr. John Gottman. I also obtained the designation as a Certified Clinical Trauma Professional (CCTP). I am a member of the following: American Counseling Association (ACA), Florida Counseling Association (FCA), Association for Creativity in Counseling (ACC), and International Association of Trauma Professionals (IATP). I am the Graduate Student Representative for the Florida Association of Child and Adolescent counseling. I am also currently in the process of creating a Broward County division for the FCA.

I am employed with Henderson Behavioral Health as a youth and family counselor within the Living Independently from Trauma (LIFT) program. I provide in-home therapy for children and their families impacted by traumatic events. Feeling a little ambitious, I am in the process of starting my own business, Seaside Counseling, which will enable me to provide both counseling and consultation services. I am also currently a member of the Alabama Air National Guard and am attached to the 117<sup>th</sup> Civil Engineering Squadron.

### Why did you choose Barry University to do your doctoral program?

My decision to attend Barry University was based on a variety of factors. It offers a CACREP accredited program on a beautiful campus with small classes. The University's program offers opportunities for growth as a new professional within my field.

### What expectations do you hold for yourself while in the doctoral counseling program?

While completing the doctoral counseling program, I desire to grow as a counselor. I seek to gain knowledge that will enable me to expand my abilities to help others.

*"In learning about Bowen therapy, I have begun applying it to my own life and have been working on myself. This experience has enabled me to reduce my reactivity and examine my part in my interactions."*

### Since you are currently working as counselor, what populations are you working with and are you interested in working with other populations? Why?

I currently work with children and families that have experienced trauma. I would like to eventually also work with adults and couples. In obtaining my doctorate, I am learning a great deal that I will share with my clients when I have my own practice.

### Do you believe populations are unique to their experiences?

Yes, in several ways. When I think of populations having unique experiences, I think back to my training in multicultural counseling. Culture and identity are important factors to consider when working with clients.

### In order to deliver quality care to your specific population, what areas of knowledge do you believe counselors-in-training should possess in order to become well versed?

I believe that counselors-in-training desiring to work with children and adolescents that have experienced trauma should seek to understand trauma and the brain. They should also seek out specialized training in the healing of trauma. One of my favorite books for understanding trauma is *The Body Keeps Score* by Bessel van der Kolk, M.D.

### So far, what have you learned about yourself while in the doctoral counseling program?

I have learned a great deal about myself since entering the program. In learning about Bowen therapy, I have begun applying it to my own life and have been working on myself. This experience has enabled me to reduce my reactivity and examine my part in my interactions within my family and my friends.

### In what ways do you think you will change by the end of your doctoral program?

I believe that I will become a more capable teacher, supervisor and researcher. I also believe that I will become a better marriage and family counselor.

### What advice can you provide to master level students who are considering pursuing a doctoral degree in counseling?

If you choose to embrace the opportunity to enrich your life through pursuing a doctoral degree, be prepared to work harder and to apply your new knowledge. It can be stressful, demanding and time consuming, but the reward will be getting to a worthwhile end.



# Faculty Spotlight: Dr. Justin Maki By: Natalya Bliskavka



I would like to introduce Dr. Justin Maki, who is our latest counseling faculty member at Barry University. Dr. Maki comes from a culture-filled background. He has traveled to many countries and cities all over the world, and has a passion for people and their diversity. One of the reasons Dr. Maki decided to come to Florida, and Barry University is how much at home he feels with the diversity, warm weather, and colorful vegetation that is so much a part of Florida.

Dr. Maki did his masters in his home state of Wisconsin and his Ph.D. in Alabama. His passion lies in Gestalt therapy and multiculturalism, specifically in LGBTQ+ issues. His specialties lie in mental health, counselor education, eating disorders, alcohol and other drug abuse, and academic advising. He advocates for the LGBT community, and is the LGBT

Concerns Chairperson for FCA.

Here at Barry University, Dr. Maki is teaching Social and Culture, Legal and Ethics, and Counseling Theories. He has also stepped into the role of being a co-faculty advisor for Chi Sigma Iota.

When I asked Dr. Maki what he would like to say to students through this article, he stated that he



would like students to, "Focus less on being a student and more on being a counselor-in-training." Dr. Maki values the learning and growth process that happens for students as they go through the counseling program. While going

through the program, he would like to encourage students to do research projects and presentations. He stated that he would be more than willing to guide them through the research and presentation process.

Welcome Dr. Maki

## The Importance of Self-Care

By: Lilya Aghzadi

When is the last time you did something for yourself? Took time to exercise? Do you get your nails done? Massage? Go to the movies with your closest girlfriend then enjoy a girls' night? During my first semester as a Barry University Counseling MS student, I never understood why all the teachers kept emphasizing the importance of self-care. This is a crisis class, why is Dr. Shure asking us what we do to take care of ourselves? Dr. Rudes making me tell the whole class more about my face masks and how relaxed I felt while I was face masking; how was this relevant to making a genogram? Was self-care the 9<sup>th</sup> concept of Bowen theory?

I graduated a year early from the University of Miami by always taking the maximum credits one was allowed to take during a semester and by taking all the summer sessions available. I graduated during the summer and a week later began my master's at Barry University. I prided myself for not taking any time off between both, I love challenging myself. During my first semester, I wanted to challenge myself even more which led me to become certified in Nutrition & Wellness by the American Fitness Professionals and Associates (AFPA). Once that was done, I decided to start my own website, The Perks of Being, which educates people about the benefits of different foods. I truly felt like I was on top of the world, I challenge myself daily academically and would share my knowledge daily on my website. My world revolved around two things: my new school and my new website

Then second semester rolled in, I challenged myself and decided to enroll in four classes instead of three. Halfway through the semester, I could no longer keep up; I could no longer keep up school; I could no longer keep up with my website; I could no longer keep up with my life. Everything that I once would do with so much love now seemed like the biggest tasks. This

included calling my parents in the morning, planning cute dates for my boyfriend, completing homework assignments, sharing new posts online on the Perks of Being. I no longer cared about the things and people that meant the most to me; my attention to detail and motivation seemed to have disappeared. Instead it was replaced by extreme exhaustion. By the end of the semester, I had become someone I did not recognize, someone who never took time for herself and no longer cared about the things she used to care about before. I was always so exhausted and stressed that I could no longer pay attention in class and my performance significantly decreased.

As students, we tend to forget that we are not invincible; we do not ask for help be it to our peers or more importantly our teachers. We focus too much on assignments that we forget to notice the physical signs that our bodies are trying to tell us that it is time to take a break.

We are now entering a field where we will be promoting self-care to all our clients, why not start with ourselves? There is an infinite amount of ways to take care of yourself, to each their own. What seemed to work best for me was exercising. In no way was my goal to lose weight or tone up, my goal was to take an hour a day to focus just on me. I now make it a point to work out every day, even if it means heading out of my house at 6AM to make it to my boot camp class. Perhaps for you, reading a novel you keep hearing about, going to the movies to watch the new movie everyone seems to talk about, or getting your nails painted red might seem more fitting. However, in the case that you do want to work out and need a partner, you can always count on me.

# Sexual Addiction

## By: Aline Cohen

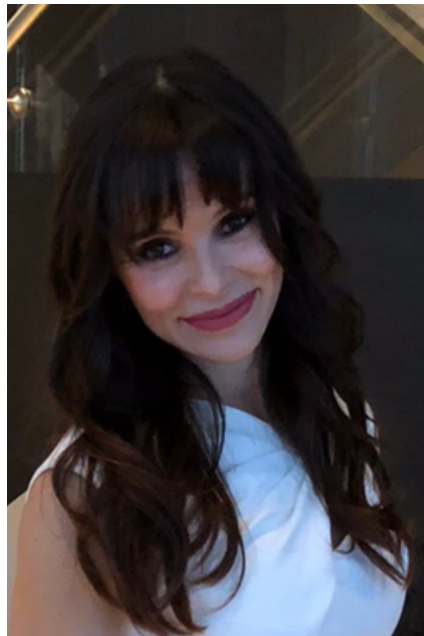
It is estimated that 17 to 37 million people suffer from sexual addiction (Hagedorn, 2009). It has become a more recognizable disorder as a result of the media portrayal of celebrities and government figures. Sexual addiction is defined as a state characterized by compulsive participation or engagement in sexual activity, particularly sexual intercourse, despite negative consequences. It is one of several sex related disorders within an umbrella concept known as hypersexual disorder. As stated by Carnes, O'Connor & Rosenberg (2014), hypersexuality can occur with a wide range of sexual behaviors, including cybersex addiction (the excessive use of internet pornography, chat rooms and paid online sex).

According to Kafka (2012), hypersexual disorder is characterized as a pattern involving repetitive and intense preoccupation with sexual fantasies, urges, and behaviors, leading to negative consequences and significant distress or impairment in social, occupational, or other important areas of functioning. An impulsive component it is also associated with this disorder, and is a maladaptive behavioral response with unfortunate consequences. Furthermore, hypersexual individuals typically experience multiple unsuccessful attempts to control or diminish the amount of time they spend engaging in sexual fantasies, urges, and behaviors as a result of stressful life events or dissatisfaction with life in general.

Besides from occupying a lot of their time engaging in sexual fantasies and in sexual behaviors, sexual addicts have an impairment in their willpower and they

lose control over their thoughts and actions. Sex addicts engage in their addictive fantasies and behaviors as a way to self-soothe emotional discomfort brought on by life stressors and/or by the state of uneasiness associated with depression, anxiety or unresolved early life trauma (Kafka, 2012).

Unfortunately, there is still a lot



of unknowns about this disease and as a result sex addiction is a highly controversial area amongst the general public and those who work in the addiction field. The latest Diagnostic and Statistical Manual of Mental Disorders (DSM-5) does not contain a diagnostic criteria or treatment suggestions for sex addiction. The organization believes that there was not enough scientific evidence to support defining hypersexuality as an addiction, and that sex can indeed become an addiction. Usually the DSM is reviewed and edited around every ten years so until then therapists must rely on the decades of scientific research

and analysis in order to treat their marginalized and suffering clients.

According to Delmonico (2011), the American Psychological Association will not be able to exclude Hypersexual Disorder from the DSM much longer as powerful new research is emerging in support of this behavioral disorder. A MRI study conducted by researchers at Cambridge University compared the brain activity of self-identified sex addicts to the brain activity of non-sex addicts, and also to brain activity of drug addicts. The researchers found out that when sex addicts are shown pornographic imagery their brains light up in three specific areas while the brains of non-sex addicts do not. In addition, when sex addict's brains light up they do so in the same places and to the same degree as the brains of drug addicts light up when they are exposed to drug related stimuli. This proves that sexual addiction is an identifiable and diagnosable disorder.

Once sexual addiction is identified and the severity of the clients' addiction is determined, with the guidance of the therapist, the client will start a life long process of recovery, as with any other addiction it is of the utmost importance that the client is aware of the reality of his condition and that he is honestly willing to recover from this disease. Psychoeducation at this time is extremely important. The counselor should discuss with the client his or her reasons for seeking treatment and as with any other type of disorder, the therapist should start treatment putting great emphasis on self-care, nutrition, physical exercise, and healthy living.

# Sexual Addiction

## By: Aline Cohen

*Continued from previous*

emphasis on self-care, nutrition, physical exercise, and healthy living.

The therapist should work collaboratively with the client and establish the goals of treatment and set short and long term goals. The counselor should co-construct with the client a comprehensive treatment plan and help the client to identify his triggers of relapse. Since sex addicts act out on their addiction as a result of their inability to deal with stressor of life, the therapist should identify ideas and behaviors that interfere with client's ability to solve problems and create a plan with coping strategies that can help the client to manage stress effectively and deal with intense emotions.

Cooper, Ellis, Miles & Nugent (2016) described that the best approach to be used with clients that are suffering from sexual addiction is cognitive behavior treatments. Therapists should first educate clients regarding the disease and refer them to a support group where clients will be able to learn coping skills and get the support they need from recover addicts just like themselves. This will help to normalize their experience and they will not feel so scared and alone.

Therapists should teach clients that cognitive oriented techniques are tasks that should be performed on a regular basis in their everyday lives. By understanding cognitive process

and irrational thinking the therapist can educate the client to reframe many circumstances in his life. According to Cooper, Ellis, Miles & Nugent (2016), the client should learn to recognize concepts of CBT as all or nothing thinking, magnification, personalization, mind reading, generalization and avoid jumping to conclusions. Therapist and client should jointly create an action plan to implement solutions to change thinking. Client should work on modifying his beliefs and learn to relate to others in new ways.

In general, treatment consists of procedures that have been used for other addictions such as individual therapy, family therapy to resolve conflicts, cognitive behavior therapy, relapse prevention strategies, insight oriented therapy to identify deeper causes, exercise and nutrition, treatment of simultaneous chronic diseases and addictions, and referral to a 12 step based recovery group (Hagedorn, 2009).

Special attention should be given to the family of the addict. According to Bird (2006), marital therapy is highly suggested for couples dealing with sexual addiction. It helps the healing process specially for the partner of the addict. The therapist works on themes as the restauration of the trust in the relationship, the awareness of the individual's issues and emotions,

forgiveness, dealing with sexual problems, establishing boundaries, improving intimacy (positive interaction), and reducing shame. Establishing rapport with the family and significant others, is very important as many clients seek counseling as a result of marital or family crisis (Hagedorn, 2009).

Therapist should pay special attention to the termination of the counseling process. Client should be prepared for it and empowered to recognize that the overall goals of treatment are to assist them in eliminating the maladaptive behaviors, to improve their overall lifestyle and to reduce the likelihood of relapse.

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## Grief- Redefining our Relationship

By: Sarah Matthews

Some things you can't predict. Four years ago, I lost someone very close to me. Some would describe her as my primary caregiver but what she really provided was unconditional love. Scars are a part of life. Losing Edna was a scar that cut me deep. The deeper the scar is evidence of the love that was shared. I hadn't anticipated life without her and that's the thing about wounds, you don't see them coming.

The months after Edna passed were a teary blur, I was drowning in denial. Sleep wasn't an option so I would throw myself in my studies and social life to numb out the pain. In England, therapy isn't well recognized and you are conditioned to hide your feelings. During the first few months, I baked a lot, a hobby we shared but after a while, I stopped engaging in any activities that reminded me of her, as the pain was too great. Yet, at the same time, I was trying to stay afloat grasping onto anything I could that reminded me of her such as pictures or books. I was constantly searching for a letter, anything of her saying goodbye; as surely, she knew it was her time to go.

Eventually there was a break in the grief and the waves starting coming in sets. At first the waves are just as tall but provide relief to breathe in-between. As time goes by the waves begin to get smaller the sets a little wider. Allowing you to live life in between. Until finally you can predict it more often brought on by a birthday, favorite song or a milestone. Milestones have been a tough time for me as I had always pictured sharing them with her, she had been my greatest cheerleader after all. My graduation was one that I didn't attend despite getting the best grade in the school as the thought of her not being in the crowd or the pictures was too much. The thing about grief is that part of you doesn't want the waves to stop crashing, the waves are a reminder of what was lost. A reminder that the love was even there.

Most people are familiar with the stages of grief. However, this model didn't resonate with me. In my case they weren't stages, the emotions followed no set sequence. The waves were choppy with a rip current. When I started the Counseling program, I started therapy. It was recommended by most professors since this is the field we are entering. As I started therapy I began to realize that I had-

n't dealt with the grief, I had denied its existence and tried to cram it down out the way. The issue with that is that it always bubbles up in the end. Therapy provided me a safe space to talk about the love we shared. Sometimes all you need is an ear to listen. A visualization that my therapist described was to picture the energy, the love that we shared, our relationship, like a bubble around me constantly protecting me. Energy cannot be created nor destroyed merely transformed. What I love about this is that I know that this would be the greatest protection anyone could ask for. Therapy gave me awareness and insight. I know that I will survive the waves no matter how high, "This too shall pass".

Even after all these years, there hasn't been a day that she hasn't entered my thoughts or we haven't had a conversation. My relationship to grief evolved this year after a conversation with Dr. Shatz. We spoke how although she may not physically be here it doesn't mean that the relationship has to end, it evolves just as the grief has. The truth is that I know what she would say in any situation. Instead of missing milestones now I know that she is still there my biggest cheerleader. When life gets a little tough I know I can call on her and enjoy an activity that we shared together. As our relationship evolves I feel more at peace knowing that she is by my side. I can look back at our memories together and be eternally grateful that she made me the person I am today, always catching me when I fall and helping me rise again.

I think that most important thing that we can do as future Counselors is to be an ear for the individual to talk to, to make them feel heard and allow them to share memories of their loved one. Losing loved ones is a part of life and something clients will come to us with. Grief is unique for everyone and so are the waves and currents. The way we handle grief is unique and depends on the individual, the relationship and how close we were to the one we have lost. Some say that scars are ugly but those are the people that don't understand the significance of the scar. The pain of losing Edna tore me deep but I think that was a testament of our love. The deeper the scars the fuller the life lived. I wouldn't trade mine for the world.



## Practicum and Internship

By: Samuel Lang

Hello fellow peers, guess what? Your classes will end, and yes, you will have your own clients. Not the CARE Center's clients, not your practicum placement site clients, but your clients. I say this for a few reasons. You are responsible for conducting therapy, creating and maintaining treatments, as well as having the responsibilities of thinking throughout the week where you believe the direction of the session will go? I do not mean to start this article in a way that may provoke anxiety, however I wanted to share with you the reality of the fact that these clients are (YOUR'S). Now, of course your clinical supervisor is there to help you, however, not bail you out of a session where you as the clinician do not know what to do next.

So know this my fellow peers entering practicum; put all your strengths and efforts into establishing at least a base of clinical skills that you yourself can rely on. Barring extreme situations, no matter how tough the case, always remember that they are your clients and it is our duty to help them no matter what. Even if that means scouring the scientific journals to figure out how to best handle any given client.

Part two, the fun part.

Picking your therapeutic modality. Yes, I know its nerve racking. You are not sure what model you like, you keep going back and forth between thinking you know which one you want when you really don't, and most importantly, you don't know any single model that well anyways. I mean, how could you, you have never had clients before from which you could have utilized a model. So here is what I did. I was attracted to Rational Emotive Behavioral

*"My clinical supervisor during practicum taught me to explore models until one clicks with you and that exactly what happened."*

therapy created by Albert Ellis in the 1950'S. I read two books written by Dr. Ellis about how to utilize REBT effectively in session. And then it clicked. I had found my model. Yes, I utilize some solution focused techniques (shout out to Dr. Shatz), but that's Okay. My clinical supervisor during practicum taught me to explore

models until one clicks with you and that exactly what happened. So my final thought is, when you start seeing clients, relax. You will figure out your model, I promise. Just know that for the first couple months of practicum and internship you may very well feel lost in terms of your clinical skill set, I Know I was.

## Using the language Mental Health Condition versus Mental Illness

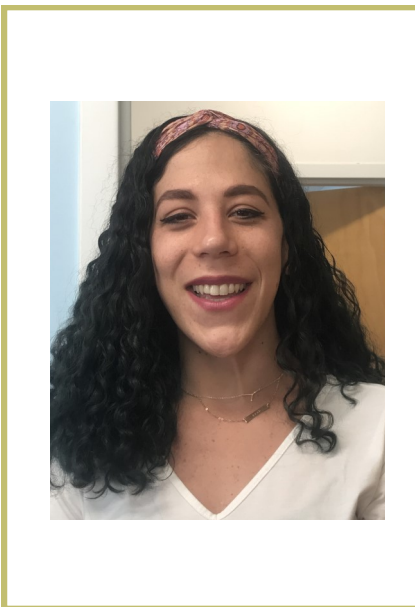
By: Daena Weinkle

It's a fair assumption to say that when most people think of therapy or a counselor they assume someone has a mental illness. Many people even will hide or avoid the fact that they may feel symptoms of depression or anxiety. When we see reports of shootings or suicide we are flooded with reports of mental illness and the lack of interventions set in place for people who were in need. Overall, it is fair to say that we as a community still face an enormous stigma against the normalization of mental health. Although the theme of mental health is brought up often as platforms within the democracy of the United States, it is severely neglected within the health care system.

We see more commercials on the television for psychotropic medications, we hear the importance of consulting with a medical doctor, however never the benefit of pairing the medication with counseling. When I share my career path with my peers outside of the Barry Counseling program, I am often met with comments such as "wow, we need more counselors." Which are then followed by "I don't need to see a counselor though, I'm not depressed." Or when they call for relationship advice and one suggests seeking couples counseling "Oh, my partner would never go, they think it's for crazy people." I've started to liken counseling to an oil change for one's brain, and I will say to my peers if you service your car, or you go to a clinic when you have an internal ill-

ness, why not see a professional for your feelings.

Celebrities are beginning to share their challenges with mental health and they share experiences from their own counseling. We see Kristen Bell who is open about her battle with depression and her continued counseling journey. Musicians such as Kid Cudi and Kanye West were



open about seeking treatment for suicidal ideation. Suicides such as designer Kate Spade, the DJ Avicii, and Chef Anthony Bourdain. Following these events, we often see an increase in the awareness of how important mental health is. This is a start, however the language remains stigmatized. We label depression as a mental illness and blame the completed suicide on this illness. We can easily change the language to mental health condition. We ask others to reach out for support but some find themselves

unable to do so. Changing the language aligns with the theory of people-first language. You are a person experiencing a condition, like Kristen has a cold – Kristen has a bout of depression. In my work I am often met with teens that struggle with depression and anxiety, I remind them that if you walk in the rain and don't change your clothes you will likely catch a cold. The same rings true with depression, if you are faced with a difficulty that triggers sadness, if you do not reach out for support, it is the same as remaining in wet clothes.

It is clear that we as counselors are having this conversation and sharing this belief. After all, we are on the same pursuit of higher learning to help others to heal or better manage their mental health conditions. I often wonder, if we can take the time use the language mental health or mental health condition and educate our friends and loved ones, can we as a community end the stigma attached to seeking counseling. I am of the hope one day that our profession will be regarded in the same light as a primary care physician or an all-star neurosurgeon such as the fictional Dr. Derek "McDreamy" Shepherd. In this, we can also hope to reduce completed suicides because we have opened a door for people to feel respected and supported when reaching out for help.

## Be a Warrior, NOT a Worrier

By Davrielle J. Valley

Anxiety affects all of us. Even if you believe you are the least stressed out person in the world, the fact that you're alive proves that you have some amount of anxiety. Initially, anxiety was meant for survival. It would help keep us alert and aware of our surroundings. But what about those of us that live with a creek in our necks? Nothing is threatening you physically, but mentally, you're on the battlefield.

The thoughts of the future, have you constantly on edge. The memories of the past, have you tied up in regret. You think you're managing it because nobody is noticing your light getting dimmer. You are able to keep up appearances with everyone you interact with, because no one takes the time to look deep enough. Yet, when you reach home after a long day, and you finally have some time to yourself, you feel it. You are exhausted, physically, mentally, emotionally and spiritually. Your shoulders burn with the weight of the world that you've been carrying. Weights that are not your own to bare, yet you bare them.

"When was the last time I was truly happy?" you ask yourself and honestly don't even know the answer. For days, weeks, months, years, you've been going on autopilot. Living but not really *living*. And at night when you crawl in your bed craving the sweet release of sleep...it

never comes. Instead you lie awake thinking of all the 'could haves' and 'maybes' and oh of course, the 'ifs'. As hours pass by you sink deeper and deeper into a black hole of worry. And then faster than you realize it's time to do it all over again.

Then one day, the anxiety that had been building up, gets too much and it spills over as it chokes you. In and out you breathe, but air isn't entering your lungs fast enough. And your thoughts are racing so fast that it's making you dizzy. Like a tsunami, the revelation that panic attack brings with it is that you're not okay. Everything is not fine. You feel broken.

So what are you going to do about it? Nothing is wrong with being broken, it's an opportunity to transform yourself into something even better than you were before. It's okay to admit that you need help and to seek that help. It will take time and perseverance, to retrain your brain not to automatically worry. Take your time, build yourself together piece by piece. Worrying doesn't get you anywhere other than into an early grave. So take control over what you can and learn to let go of what you can't. Slow down, and just feel the sun on your cheeks, the air entering your lungs, the fabric on your skin. Be in the moment.

## A Comps Survival Guide

By: Molly Wright

Since the beginning of entering into one of Barry's counseling programs, you've probably heard talk about the comprehensive exam awaiting you. For me, the comps felt elusive and a bit mysterious. Professors would casually drop the line, "you'll need to know this for comps!" during class. Even students who are nearly graduated are reluctant to talk about their experience. So here it is, folks: one person's comps preparedness strategies and test-day tips.

1. Go to the comps review session(s): hosted by Chi Sigma Iota- Beta Upsilon chapter, Barry's counseling honor society, there are usually two comps review sessions each year. Go to at least one and go early in the program. I recommend going early so that you receive the packet at the outset of whatever counseling program you're in so that you know what to pay extra attention to during classes. You can always go again so that you're hearing the comps tips closer to exam time. And speaking of classes...
2. Go to class: it's tempting to skip when you're allotted three absences from classes, but don't do it. Your future-self will thank you when it comes time to study for the comps. Keeping thorough notes and paying attention during lectures will really pay-off. When it's test time, you'll be surprised at what you retained (I was!).
3. Know the biopsychosocial inside and out: this section of the exam probably took me the longest to complete. It will be beneficial to know the biopsychosocial assessment well for the sake of comps and because you're going to be administering them in practicum/internship.
4. Pick a theory: the comps probably aren't the time for theoretical eclecticism. Choose a theory and apply it to your case. Let the theory's assumptions and interventions shine through in your exam. And I'm not just talking about theoretical perspective here. Choose a stage and career theorist before the test and learn their models thoroughly.
5. Look over your DSM-5: especially with my clinical mental health specialization, I spent quality time with my DSM leading up to the exam. Think about your performance in the psychopathology course and consider your areas of weakness when reviewing for the exam. Before

the exam, I had heard that I really only needed to know more commonly diagnosed disorders (i.e., generalized anxiety, major depressive disorder, bipolar disorders, etc.), but wouldn't luck have it that neither of the clients in my cases had any of those disorders? Knowing a plethora of disorders well will come in handy, even if only to show off and list some as differential diagnoses that you've ruled out.

6. Have everything you need day-of: it was amazing to me how many of the people in the exam didn't bring a pen! Students are allowed scrap paper during the exam and about 70% of the people in my exam didn't have anything to write with. Don't be the person who has to scramble right before the test. Here are the things I brought with me to the exam: a pen, ear plugs, water, and a sticky note with my Barry ID number on it (you'll need to write it at the top of your exam).

And there you have it—one student's strategies to prepare for the comprehensive exam. Best wishes everyone who recently took it (I'll have my fingers crossed for the next four weeks) and good luck to everyone whose comps are on the horizon.





## Personal and Ethical Values in the Counseling Profession

By: Rachel Marx

The core set of values I have developed over the years come from a unique perspective. These values are honesty, accountability and open-mindedness. I have seen people in my life do the opposite of these and how wrong I felt watching them. What made me develop these ethical values is just that: seeing people do the opposite. I decided I did not want to be the type of person who lied to get what they want, or make excuses for the choices I made, or even judge those around me based on their exterior. Seeing other people I surrounded myself with made me want to be better. At the time, I knew this was going to make me a better person, but I did not plan for it to make me a better counseling professional someday. It is essential for me to set a higher standard for myself in my personal life in order for me to be successful in my professional life. The way I see

it is there will be troubled clients coming to me for my expertise and I must give them the best care I know how. In order for me to do this, I must be of sound mind, body and soul for the simple fact that they are lacking in at least one

area. These clients will be confused, hurt, betrayed and anything in between, so I would like to give them the kind of care that will uplift the areas they are lacking. In my eyes, in order for me to be an ethical person and an ethical counselor I must uphold my personal and unique set of values in my life at



home and in my life at the office. If I do that, I will be successful. It may not be the most important aspect of being a counselor, but for me, it plays an important role of being able to give the most top notch care. Am I wrong? I might be, but my gut says otherwise, and I always trust that.

## How Attending Professional Development Opportunities Can Enhance Your Growth

By: Marta Iglesias

During a professional program at a Master's or Doctoral level, to be specific in Counseling, it is recommended to enrich yourself with different personal and professional opportunities. The Counseling field is a vocational field that could impact our community, our system, and our small world. Therefore, being able to attend extracurricular opportunities will help counselors make a better impact in the life of others.

Each professional holds different goals and purpose in life that would be enriched by sharing experiences and perspectives with other professionals in the field. In addition, trainings allow counselors and future counselors to develop themselves and to improve their knowledge. These opportunities allow you to grow by learning from other professionals. People could be participating of the same environment but would never experience and learn the same from it. Having the opportunity to share different world-views with professionals of the same field in a safe environment will help you to grow personally and professionally.

Cultures always impact our community and our society. However, being able to get out of our comfort zones, allows people to discover personal resources. Professional conferences, are one way that allows you to reach beyond your comfort zone, with professionals and future professionals in the same field. This helps you make an impact in peoples lives. In addition, this provides you the opportunity to connect with people from different backgrounds, places, cultures. When connecting with individuals from different places it allows you to grow and to create a solid network for their professional future on the field. In this field, professionals need to be active, to immerse themselves in different environments as well as to keep up to date with new professional ways of helping and guiding people.

Currently, we live in a very competitive world where professionals have to differentiate themselves to succeed. Success means progress, and it means you have to grow. Professional conferences encourage you to become more specialized, discovering vulnerable areas that maybe you hadn't considered before. Attending this type of conferences could help you be inter-



ested in other areas, enabling you to grow and apply the new resources that you gained at the conference. These skills can then be applied to your work environment, specialty or future goals.

In conclusion, counselors should enrich themselves in other activities and opportunities outside of the program that they are in. This Allows you to be connected with professionals from your same field that become form different places and background that will benefit you on the future practice.

Some conferences students can attend are the American Counseling Association, Florida Counseling Association, American Mental Health Counseling Association and Florida Mental Health Counseling Association. Some professional development opportunities can be obtained through CSI such as webinars.

# Advocating for the Counseling Profession

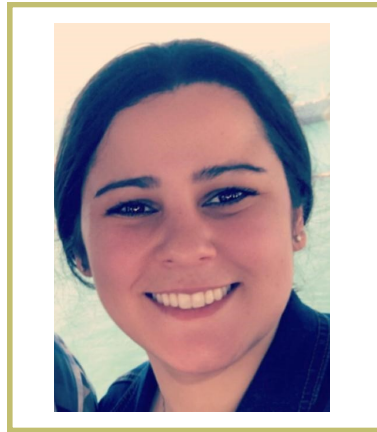
By: Samantha Campagna

The purpose of this article is to elaborate on the importance for counselors to advocate for the profession on a variety of topics impacting the field. One such topic is the portability of licenses from state to state. It is important for counselors to speak up regarding their opinions to ensure future created and edited policies reflect these opinions and ideals.

A core competency in counseling is to advocate on behalf of our clients. As mental health counselors, it is our duty to ensure we are helping our clients the best we can and assisting these individuals reintegrate into the community if needed (Erford, 2014). Advocating is an important skill in this process and should not be limited to the counselor only advocating for their clients. It is just as important for counselors to advocate for themselves within the profession. The people who know the field best are those working within it and it is these individuals who are most aware of the changes needed to improve the profession. Just as we advocate for clients to better integrate into the community, as counselors we should advocate to improve the profession as it continues to grow.

Public policies are laws that are in place to help regulate a community need and help to create a standard in which individuals are expected to follow. These policies help create a standard that can lead to future funding and community support and action (Kilpatrick, 2000). An example of a public policy within a state is the licensure process for mental health counselors. These professional credentialing processes are examples of public policies that help create a standard and create opportunities for action and funding. These policies, such as needing a certain number of

credit hours and internship hours to become licenses, help ensure all members of this profession are held to the same esteem and have gone through the same process towards their career. However, since each state can currently dictate their own state licensure process, it is difficult to move a mental health license from one state to another. Currently, the ACA Licensure Portability Model that has been accepted since June 2016 is in the process of being



recommended for states to adopt towards their own licensing boards (Counseling Today, 2017). This model will help in creating a public policy that allows a standard for mental health counselors to meet and thus qualify them for licensure mobility. This issue of licensure portability is an example of a current public policy issue that needs the backing of counselors currently in the field and who this will directly impact.

This kind of advocating require counselors to stay informed on the changes and potential changes for the profession. When current policies are not meeting the needs of the profession and the opportunity for a change is near, this is the ideal time for professionals to begin to share their opinions and begin to advocate for the desired changes. If

a current professional wants to see changes happen sooner than later, it is important for counselors to not let the idea become forgotten. Counselors have the ability to reach out to their local licensing boards to express their opinions and to write to their state legislation regarding the issue. They are also able to engage with other counselors at events and conventions which can allow for more exposure of opinions across state lines.

Overall, advocating is an integral part of the mental health counseling profession. From advocating for clients to advocating for coworkers, it is important for counseling professionals to share their opinions regarding current events, public policies, and ensure changes are to improve the community as a whole. As a future mental health counselor, it is important to ensure the future being created is one that helps professionals flourish no matter what state they learned or move to. With this, the more support policies such as the ACA Portability Model has, the easier mental health counselors will be able to continue their good work no matter the state. This can only be done with the collaboration of multiple individuals and as a collective, changes can be seen sooner than later.

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# Influence on Education and Behavior Based on a Child's Household

By: Jayme Thomas

Research has shown that a child's inclination to learn and social behaviors stem from their home life and the occurrences that take place at home or in their daily life. According to Morris, Huray, Skagerberg, Gomes, and Ninteman (2013), when there is less family involvement with a child and their education, it has been observed that the child performs poorly in school. The focus of my article will be to obtain the answer to "What is the relationship between a middle school student's grades and behavior in correspondence with a healthy or an unhealthy household?"

It is understood that a person's social environment greatly impacts their personal development, interpersonal relationships, and cognitive experiences. Many theorists, such as; Bandura, Skinner, Freud, Roger, and Maslow discuss how an individual's personal perspective on their environment can cause them to create their own experiences within particular situations. In order to comprehend how an individual reacts or responds to their environment; it is important to understand what environment they are in. Research has shown that individuals in a healthy environment elicit healthy actions, in contrast to individuals living in an unhealthy environment (Turner, Finkelhor, Richard, Hamby, Leeb, Mercy, & Holt, 2012, p. 210). When researching how the environment impacts an individual, it was identified that the greatest impact occurs in an individual's household when they are at a young age (Turner et al., 2012, p. 210).

Personality theorists have identified that personality development stems from a wide source of influences. Some theorists discussed have radical opinions, such as Skinner; while others have subtle opinions on what affects a person's personality development. Skinner sees personality development as a response to environmental events (Ryckman, 2013, p. 363). Majority of an individual's actions derive from how they have experienced and perceived their environment. The perception of the individual stems from interactions they have gone through in the past. From these interactions, individuals respond with a specific form of behavior. The relationship between a child and their family environment sets up the stage for how that child will interact in their social environment. The interactions between parent and child also significantly impacts future interpersonal relationships that these individuals will experience. There are many characteristics that

make up a family household, such as; income, parent-child interaction, and sibling-sibling interaction.

Hoglund et al. (2014) used surveys, such as: The Alabama Parenting Questionnaire and The Parent-Teacher Involvement Questionnaire to aid in his collection of data, in regards to how a child is perceived. These reports were used to assess homework assistance, home-school conferencing, and school-based support. The Social Skills Rating System was used to assess academic competence. The Behavioral Assessment System for Children was used to assess aggressive behaviors (pgs. 521-522). The results found showed that parents who were in unstable financial positions were less involved with their children's homework and school support. This being because they identified themselves as being stressed and overwhelmed. From this, it was determined that there was a negative correlation between parent homework assistance and child academic and social competence. However, parents who were identified as being in an unstable financial position produced a positive correlation with aggressive behaviors and home-schooling conferences. Aggressive behaviors were also positively correlated with home-school conferences, alongside home-school conferences negatively correlating with academic and social competence. When it came down to academic competence, social competence, and aggressive behaviors; academic competence and social competence mainly correlated positively, while negatively correlating with aggressive behavior. The author interprets that child maladjustment and children struggling in academics were brought about through parents that were financially struggling. Those that had an issue with their aggression, academics, and emotional behaviors correlated with those families that were defined as low-income. (Hoglund et al., 2014, p. 528).

Research by Sevón et al. (2014) discusses disharmonious and harmonious weeks contributing to the cognitive and social experiences of a child (p. 234). A disharmonious week was identified as a week where bad moments were more frequent than good moments. While a harmonious week was identified as a week where good moments were more frequent than bad moments. The results of the qualitative analysis shows that spousal interaction and parent-child interaction were statistically significant. These results indicated that

feelings and family interaction varied on a day to day basis (Sevón et al., 2013, p. 228). The authors interpreted that the difference between disharmonious weeks and harmonious weeks were not the identification of good and bad moments, but the frequency in which they occurred. (Sevón et al., 2014, p. 234).

It can be understood that a child's behavior is strongly influenced by his environment at home because this is seen as the foundation to where the child learns and mimics behaviors. A child is more likely to mimic a behavior that they see at home than in an external environment because of the relationship that child has with their parent or guardian in the household. Ryckman (2013), expresses Bandura's view on observational learning and modeling; stating that an individual's comfortability with the person they are modeling, greatly influences their own behavior (p. 416). In past research it was identified that positive emotions set the standard for behavioral routines that aid in an individual's adaptation to different opportunities in their environment (Bai et al., 2015, p. 9). Individuals were more inclined to experience their environment positively than negatively. From much research, it is important to understand that the influence of a child's household creates a great impact on a child's life and behavior. We also need to consider and acknowledge the involvement of a child's parent indirectly creates a relationship with how well a child does in school.

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## Analyzing Ourselves

By: Cynthia Ramirez

It is very important that we maintain ourselves healthy mentally, emotionally, and physically. As a future counselor I care about my well being, we must also care about others also and advocate and have discussions on the topics below. Life can get challenging at times and it is important that we maintain our serenity. We must wake up with a positive attitude; give ourselves positive self-talk when things are good and bad. As human beings we all are it can really help if we see what actions we have towards others, ourselves, and in the counseling setting. In my opinion counselors or future counselors, we must all go to counseling if there is something that needs to be worked on such as, relationship, or issues with our bias, and so much more. It is important to go to counseling so we can be in tune with ourselves and be able to juggle life.

### Personal motivation

Be happy with what you do in your life.

Be a genuine nice person.

Don't let other people's comments affect you.

It's our stimuli and positive incentives that help us continue.

We are all raised with different values and different personalities.

We must have Self-awareness, self-esteem, and self-knowledge.

Avoid negative self-talk and start your days off positive. Negative self-talk can produce many things such as low self-esteem and anxiety. Our thoughts and actions are in our control and we can make a choice each day to choose peace or choose anger. Becoming aware of your inner self and how it balances with your outer self is the foundation for good mental, physical, and spiritual health. "The outer self is generally concerned with material things, such as how

you present yourself (hair, clothes, etc.), as well as groups you belong to or personas that you portray" (Cuncic, 2018). "Your outer self spends it's time coping with the demands of school, work, home life, and whatever other real-world distractions you experience each day" (Cuncic, 2018). The inner self is about what can't be seen: feelings, intuition, values, beliefs, personality, thoughts, emotions, fantasies, spirituality, desire, and purpose" (Cuncic, 2018). "A strong inner self-means that you cope well



with your emotions, are self-aware, have clarity and a good sense of your values, and feel a purpose in life" (Cuncic, 2018). Problems begin when the inner self and outer self are in conflict or out of balance

(Cuncic, 2018). Your daily functioning may also be affected. You may feel successful on the outside but empty on the inside; at risk for quick fixes to heal your pain, such as turning to drugs or alcohol (Cuncic, 2018). Attitudes form directly as a result of experience. They may emerge due to direct personal experience, or they may result from observation. Social roles relate; people are expected to behave in a particular role or context and social norms involve society's rules for what behaviors are considered appropriate.



## Alumni Spotlight: Leo Balseiro

### Tell me about yourself.

My name is Leo Balseiro. I am a Miami native and graduate of the Masters program at Barry University. I studied toward a dual specialization in Clinical Mental Health Counseling and Marriage and Family Therapy. I am currently a practicing counselor, registered with the state of Florida as a Mental Health Counseling Intern, and I work within a private practice setting. My experience extends to about three years, which include dual-diagnosis residential care, marriage and family therapy, and community mental health. Truth be told, I am also aiming to become a Barry University alumni once again -- I am currently studying as a second-year doctoral student in the counseling program.

Outside of the professional landscape, I'm a partner, a brother, a son, and a friend. I enjoy most evenings following sports and news, adjusting my fantasy football rosters, engaging in other hobbies such as music, and spending quality time with my partner and family. Overall, I believe in a balanced life that includes hard work, quality of life, and a Miami Dolphins Superbowl. Unfortunately, I can only enjoy two of these at this time.

### When did you receive your Master's degree?

I received my Master's degree in December of 2016. The weather on that day was rainy, which happens to be my favorite from time to time. I remember the experience being worthwhile as my walk across the stage solidified my achievements in the Master's program. This was because of both how highly I valued the educational process, and how grateful I was to have studied among other aspiring counselors and supportive faculty. My mother also graduated from Barry University with a Master's in Educational Leadership. Fifteen years prior to my graduation I recall being present to see hers. The idea that I was walking across the same stage as she did was electrifying in of itself, and I intend to do it again.

### What are your future plans?

My current plan is centralized on one overarching goal; to be the most purposeful professional counselor that I can be, contributing the best I can for both the betterment of the field and to leave a helping impression in all that I engage with. I aspire to be a motivational, supportive educational leader in the field. I strive to continuously better my own practice using advanced theory and compassion toward the stories of my clients. I desire to contribute to the counseling literature through advancing research to increase our knowledge and power toward the profession. I am motivated to defend the profession by establishing the counselor identity in society through my own service

in the community and advocating for the marginalized and in-need.

### Have you specialized in a specific population? What areas interest you?

From time to time, I like to kid myself with a pun to say: "I'm a jack of all trades, but a Master of Science in Counseling".

Since my studies in economics as an undergraduate student, I have been taught how specialization is optimal in any profession. I have sought to find my own specialization for quite some time in the populations that I've served. So far, I've explored areas related to community care, substance use, couples counseling, family therapy, domestic violence, depressive disorders, and anxiety disorders. With that said, about three-years in I cannot say I have an astute interest in any specialization at this time. I intend to advance my knowledge-base in the area of trauma, specifically in relation toward natural and community disasters. As I have been taught, the question about trauma is not so much about 'if' but more about 'when'; this notion teaches us that while trauma will occur, especially bearing in mind the ever-changing environment and political climate across time, we as counselors ought to be prepared to serve on a short notice.

### What would you say was your favorite aspect of the counseling Master's program?

The Master's program, in my experience, never failed to disappoint in their efforts to prepare counselors-in-training for the field. One aspect is the program's stance toward professional development and leadership. I took my first step forward to professional development sometime in 2014 where I became a member of the Beta Upsilon Chapter of Chi Sigma Iota. Following my initiation, I had a taste for what leadership looked like in the counseling field through my own interactions with other students and professionals in the chapter. The impression that was left on me was in how important professional development is for any developing counselor. Moving forward, I sought to take every step I could to meet my professional needs. In my time with Chi Sigma Iota, I participated in webinars, contributed to newsletters, presented in the graduate student conference, and adapted to student-leadership roles. Upon completing my final semester in 2016 as the President of Chi Sigma Iota, I reflected in how never in my wildest dreams did I see myself in such an esteemed position. Glory goes to many things, but I'm grateful for Barry's program for empowering me to be the professional I am today. Currently, I'm left with a hunger for more leadership oppor-

## Alumni Spotlight: Leo Balseiro (Cont'd)

*Continued from previous page.*



-tunities, solely to be present to serve others in a big way.

### **What therapeutic model do you practice from?**

Good question. I feel that it's good practice for any counselor to begin with grounding themselves in one philosophical theory of practice. It's one thing to know interventions off-hand, but it's another thing when you can see the world through your therapeutic lens. Such a perspective lends power to informing any counselor in their helping practice. The more lenses the merrier, but I'd caution to do so only if they are responsibly integrated in one's practice and are especially meaningful to the counselor.

I like to think that I practice with multiple approaches in mind. At baseline, I view my practice from a Natural Family Systems Model, but it isn't always this case and my lens tends to be fluid. As a practicum student, my first theory I invested in was the Strategic Model and the Person-Centered Model. I eventually progressed to understand the post-modern perspectives such as Solution-Focused Therapy and Narrative Therapy. I've done the most work through a Natural Family Systems Lens through my clinical practice and my personal work in my own relationships (Thanks, Dr. Rudes). Looking back at the big picture, I can say confidently that I operate from a common-factors approach to counseling.

### **What advice do you have for students entering practicum?**

I'll never forget my first day in the Family C.A.R.E Center as a practicum student among my cohort. We were all anxious to begin practicing for the first time after our coursework. I remember sitting in the observation room watching the sweat of my beverage in anticipation for the 4 o'clock hour. There was a great ambiguity that awaited us all and would arrive in the form of the complex experiences and problems of the clients we would serve.

I mention my experience to reference that there is always a tremendous amount of ambiguity, an unknown force, that awaits every counseling professional prior to meeting their client for the first time. *The feeling is very normal.*

At the very least, be mindful toward a realistic standard for self and know that there is no such thing as perfection in counseling. Be prepared to be self-compassionate toward your efforts. Case-in-point, I've interacted with plenty of licensed professionals who exhibited errors in their clinical practice. Counselors are human too.

Through my own experience as a developing counselor at this time, I feel that a growing counselor is someone who is working toward becoming a self-authorizing thinker: someone who is self-reflexive, insightful, empathic, and tolerant of ambiguity. Be self-reflexive in recognizing your position in the room your continuous receptiveness toward supervisory feedback: they are integral factors toward your endeavor to continuously

improve your practice. Be insightful through your learnings, how you view the world, and how you interact with others. Be empathic in providing a safe space for all of the people you help. Build tolerance toward the unknown through your grounding toward seminal literature, multiculturalism, practice, and supervision.

Like many things in life, this process doesn't happen overnight. Continuously recognizing and growing your capacity to be a self-authorizing thinker is your best bet to be successful in your practicum and beyond.

### **What advice do you have for students taking the Master's COMP exam?**

#### **Study.**

The comprehensive examination should be respected as an evaluation of your knowledge and should not be taken lightly, as it covers all knowledge-areas of the program. Give yourself plenty of time to study. Use resources such as the Beta Upsilon Chapter's COMP's preparation seminar and study groups with your peers. Work through case conceptualizations to familiarize yourself with the format. Take time for yourself to rest, eat well, and mentally focus on the day of your exam. Be mindful to take solace in the fact that you're only revisiting and re-familiarizing yourself with content that you've covered in courses past, and be prepared to exercise your mastery as a counselor-in-training.

### **What advice do you have for incoming students into the Master's program?**

Welcome to the program! We're all happy you have joined us. Take each course with sincerity toward the profession and reverence toward informing your future practice. Your professors and senior peers, including myself, are present to guide you. Be eager toward mentorship for continuous growth. Read your syllabus thoroughly, and build your future professionalism by submitting your assignments on time and engaging in thoughtful and respectful discussions with peers. Consider becoming involved in pro-

fessional development opportunities on a school, city, state, or national level, to expand your experience as a counselor-in-training and to provide yourself an opportunity to professionally excel. Take the time to be yourself in your self-care practice and work-life balance. Recognize that you are a student that brings exceptional value to the profession through your experience, and that you are exactly where you need to be at this time.

*"it's good practice for any counselor to begin with grounding themselves in one philosophical theory of practice. It's one thing to know interventions off-hand, but it's another thing when you can see the world through your therapeutic lens."*

## Student Spotlight: Maria Alayza



### **Tell me about yourself.**

My name is Maria del Rosario Alayza Arca, I'm 24 years old and I'm originally from Lima - Peru. My first language is Spanish, and I'm very grateful I'm doing my masters in Miami because not only I can use both languages to better meet the needs of the population, but also it makes me feel like home. This is my third year in the United States as an international student, and it's been an enjoyable life changing experience so far.

### **Why/How did you make the decision to pursue a career in the counseling field?**

Since I was little, I have always been extremely interested in people's emotional wellbeing. Learning about how our minds work and understanding people's behaviors has always been fascinating to me. Back in 2011 when I started dental school in Peru, my daily life experiences related to dental school often made me think about the importance of assessing people's health. I figured I did not only want to contribute to their oral health, but I wanted to get more involved in their lives as a whole. Coming to this realization gave me the courage to leave dental school, get my major in psychology and pursue my masters in the counseling field now. I have no doubts I made the right decision.

### **What expectations do you hold for yourself while in the counseling program?**

While in the counseling program at Barry University, I hope to get myself involved in activities related to the profession, get experience, knowledge and make strong connections with people in the field. Since the very first day I started the program I was determined to take advantage and learn from every single opportunity that crossed my way. For example, during my first year I went to the ACA and FCA conferences as a volunteer, and

not only did I learn so much but I also had the opportunity to meet graduate students from different schools. Additionally, I've been volunteering at different programs with the intention of getting myself exposed to different populations and enlarge my cultural competence. However, I think this is a life time learning process that goes beyond the counseling program.

### **What populations are you interested in working with? What are some of the presenting issues you may encounter within this population? Do you believe any are unique to their experiences?**

I consider myself to be a family-oriented person. Thus, I'm very interested in working with families and couples. Things such as divorce, domestic violence, aggression, trauma, dysfunctional families and behavioral problems, are one of the most prevalent presenting issues I may encounter within this population. Because I consider family to be so important, I think that if I can somehow contribute to their wellbeing, happiness, and mental health, I'll be also contributing to form a better society

### **What areas of knowledge do you believe counselors-in-training be well versed in, or at least be prepared to be well acquainted with, in order to deliver quality care to the forensic population and/or their families?**

I think that being culturally competent is very important for every counselor but more so if you want to practice in the United States. Having knowledge of the diverse cultures, religions, etc. will help any counselor foster the therapeutic relationship with the clients. Also, knowing of referral sources and about other professionals is very important. This is when networking becomes very important once again. The truth is that even if we want to

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## Student Spotlight: Maria Alayza (Cont'd)

serve everybody, we might not always be well equipped and trained to provide services to do so. But if we are able to tell them where to go and what to ask for, we will be still helping a lot.

### **So far, what have you learned about yourself while in the counseling program?**

I'm very grateful for everything I've learned so far in the program, not only inside class but also outside. I've learned that becoming a good therapist requires effort and commitment beyond the classrooms. Throughout different experiences, I've gained awareness of my own personal biases and insight on my areas of growth. It's interesting to see how I keep learning every day something new about myself and others.

Since, there is a very diverse population at Barry, I've been able to learn about other cultures, religions, etc. Also, I've noticed I have matured and that I'm not the same person as when I first started the program.

Over time, I understand more what the professors mean when they say that at some point behaving as counselors and behaving as ourselves will be the same thing.

### **How will membership in CSI further your development as a counselor-in-training?**

I think that CSI brings people with shared goals together, and in cooperation great things can be accomplished. At a personal level, CSI will help me feel even more identified with the counseling profession. Additionally, I consider networking to be very important in this profession and being part of CSI will not only help me make new long-lasting friends but also future colleagues. At a professional level, being part of CSI can be my door to several opportunities in the academic field, and as

a counselor-in-training every experience I get will enrich my knowledge as a future therapist.

### **What advice would you give a first semester student just beginning the counseling program?**

I would suggest the first semester students to make every single minute in the program worth it because it goes faster than expected. The journey is very enjoyable but also requires a lot of commitment and effort. So, to be flexible, respectful and keeping an open mind will

be very necessary. Finally, I would suggest using their knowledge and putting into practice the counseling skills they will be acquiring over time, in daily interactions (with friends, family members, co-workers, etc.). This is because being a counselor should become part of your identity and the more you practice it the more you will embrace it as part of who you are.

### **How do you think you will change by the end of the program?**

I think I will end the program being a better version of myself. This includes fortifying my strengths such as the ability to work with people, being sensitive to their needs and having the ability to interact with diverse populations, among other things. Finally, I will be a more mature and settled person, who knows about the real existing problems of the context I live in, who cares and advocates for a change.



# Integrative Approach to Counseling

## By: Maria Sosa

“What great leaders have in common is that each truly knows his or her strengths - and can call on the right strength at the right time.” –Tom Rath

Throughout my semesters in the counseling program, I have gone from wanting to be a solution focused therapist, to a cognitive behavioral therapist, and the list goes on... to finally realizing that an integrative approach is possible, and will most likely be the way I treat my future clients. Carl Rogers developed his idea of person-centered counseling through his own personal development (Seligman and Reichenberg, 2013). As a counselor, I have developed all my ideas through my own personal development and the realizations, and self-reflection I have done throughout my counseling journey and ultimately where I can showcase my strengths as a therapist.

Considering how a person's presenting concern originates is closely related to how a

therapist views human nature.

As a marriage and family therapist, I have spent time learning about structural family therapy. Minuchin's theory of the family subsystems illustrates one of the focal points of my view of human nature. That view is also closely related to Post-and Neo Freudian psychotherapy and that is that our early relationships set the foundations for relationships we have as adults (Seligman and Reichenberg, 2013). These relationships are part of the family subsystems and I believe correlate to Post-Freudian psychotherapy in how it sets the foundation for our current relationships. From personal experience, I think our relationships with our family and peers are very important in how we set foundations for current relationships. Secondly, our presenting concerns may originate through our life with experiences or trauma we face.

Person centered counselors emphasize how our resulting be-

haviors form from our perceptions and past experiences (Seligman and Reichenberg, 2013). I believe that our experiences and how we perceive these experiences ultimately shape what our presenting concern will be. There may be two people experiencing the same experience and or trauma and each as an individual will perceive their problem in a different manner either positively or negatively.

Considering how a presenting concern develops is important in how to provide positive changes for a client. There are two theories whose goals and interventions I ultimately think will provide the most effective therapy for a client. These two therapies are Solution-Focused Brief Therapy and Cognitive Behavioral Therapy (CBT). CBT's overriding goal is to help clients think clearly and cope effectively with their lives (Seligman and Reichenberg, 2013). While Solution

# Integrative Approach to Counseling

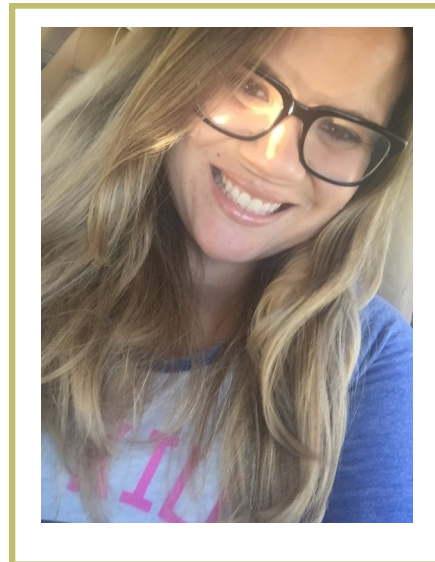
## By: Maria Sosa

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Focused emphasizes the empowering of the client to allow individuals to become more confident and capable of solving future problems (Seligman and Reichenberg, 2013). These two goals are important because not only is it important for an individual to effectively cope with their lives but also to incorporate those skills into problems they may face in the future.

In addition, the interventions in these two theories will allow myself as therapist to provide a foundation for my clients to reach these goals. Under Solution Focused Brief Therapy, I will utilize the miracle question with my clients. The Miracle Question is useful in providing the therapist with a concern that the client may have not come up with and in providing the client with hope for change. When I first learned about the Miracle Question I did not believe it can provide any change. However, when I further dove into Solution Focused

for my class presentation. I realized that using it in addition with other interventions, it can be very useful to both the client and the therapist. In addition, reframing the client's perceptions will work under CBT's approach. I think this is the most important intervention I can uti-



lize as a therapist. I found that this is the most useful in helping the client develop skills for their life outside of counseling.

Lastly, the most important strategy I will utilize as a counselor is to provide positive changes for my client. I will be able to provide this for my

clients by further developing my counseling skills. The first way I will do this is by continuing to self-reflect on my personal life. Although, the goal is for our clients to develop these skills. It is very important for us as counselors to develop these positive changes in our lives. Not only will this help us as individuals, but also it will help us as clinicians. In addition, by looking inward we can become aware of our own personal biases. I believe in my personal journey this is the most important. The journey to becoming a great therapist begins with the individual self, and if I can recognize the positive changes I need in my life, I will be able to create a positive therapeutic alliance with my future clients.

### Reference

Seligman, L., & Reichenberg, L. W. (2013). *Theories of Counseling and Psychotherapy: Systems, Strategies, and Skills* (4th ed.).

## Florida Counseling Association Elissa Chakoff, LMFT & Vanessa Elias, LMHC

On Friday, October 5- Saturday October 6<sup>th</sup>, we attended the 69<sup>th</sup> Annual Convention of The Florida Counseling Association. This year's theme was "Celebrating Diversity: Counselors as Leaders, Advocates and Voices for Marginalized Individuals." Barry University faculty in attendance, were Dr. Rudes and Dr. Sacco-Bene. Doctoral Students Michelle Prashad, and Leo Balseiro presented. Several Master's-level students from Barry participated in the conference as well. When we were not presenting or participating in sessions, we discussed possible dissertation topics and explored increasing our levels of differentiation and multigenerational family patterns of emotional cutoff.

Along with Dr. Rudes and Michelle Prashad, we presented on The Public Conversation Project (PCP). The title of our presentation was: Can We Agree to Disagree? How to talk about difficult issues in a safe, structured space. The aim was to reduce stereotyping and polarization and allow all views and voices to be heard.

We conducted a 90- minute presentation, which highlighted how to open conversational space between people/groups who hold opposing views. We demonstrated and shared our experience at Barry conducting a PCP dialogue on the topic of gun regulation with Master's students in response to the school shooting at Stoneman Douglas High School in Parkland, on February 14<sup>th</sup>, 2018. At the conference, we invited audience participation, in order to engage participants in addressing conflict, driven by differences in identity, beliefs and values. The audience chose the topic to discuss, which created a genuinely emotional experience. Our overall takeaway, was that the

PCP approach to discussing difficult topics, presents a novel format that does not necessarily look for a resolution, but instead, a way in which to engage in discourse with others in a safe, structured environment.

Overall, attending and presenting at the conference was invaluable. We gained a great deal of knowledge as far as our role as counselor's and future counselor educators as advocates for our clients. Most notable were the sessions we attended that spoke to the impact of layered marginalization as well as trauma-informed care. We strongly encourage students to attend conferences as a way to expand their knowledge and interact with other individuals in the counseling profession. We are looking forward to the annual American Counseling Association (ACA) conference in New Orleans, March 28-31 and invite all to attend with us!





# You Are Stronger Than You Think

## By Davrielle J. Valley

People often see the strength in others and not themselves. We measure our lives by what we think is the popular social norm. Everyone looks happy on social media; it's hardly likely that the people you are following are going to reveal their darkest truths online. That's because everyone wants others to view them as perfect. But the grass isn't always greener on the other side.

I'm sure there are things that you've lived through, that have been pretty damn hard. It might have been dealing with the chronic illness of a loved one, an abusive relationship, being bullied, getting abandoned or maybe just never feeling understood. The truth is, you can never live my life and I can never live yours. The very fact that you've made it to today speaks volumes. However, you are coping with the bumps and hurdles in your life have got you this far, even though some may not be so healthy.

Maybe today is the day that you finally look in

the mirror and realize that there is no one in the billions of people on the Earth, like you and that's pretty damn special. Only you can live your life to the fullest. Nobody can do it better than you. And despite whatever anyone else might say or how many mistakes you've made, you are more than worthy of that happy life you want. You just have to work for it and believe in yourself.

You shouldn't measure your life to others because you don't know what dragons they have to slay at night. What you do know, is that no one else can win your fight, only you can.



*NAMI Walk*

Davrielle J. Valley



Davrielle J. Valley &amp; Maria Alayza

*Comp Exam Review*

Marlene Kashton



Devora Liberman

## *Sunshine Seminar*



Kimberley Allison demonstrating how to start sand tray session.



Kimberley Allison presenting about sand-tray therapy



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