Supporting Professional Counseling in Illinois Since 1948

Illinois Counselor
An Illinois Counseling Association Publication

In This Issue:
Conscious & Compassionate Counseling

November 3 – 5, 2016
Wyndham Springfield City Centre
Springfield, IL

Special Edition Annual Conference Issue:
Up to 18 CEs or PDs for Counselors, Social Workers, Psychologists and Marriage and Family Therapists.
Joyce Marter, LCPC is founder and CEO of Urban Balance, a counseling practice with seven locations and nearly 80 therapists on staff. Prior to becoming President of ICA, she was President of IMHCA from 2013 to 2015.

Joyce Marter, LCPC

Why are you interested in Multicultural Counseling? You are white,” said the head of the Department of Cross-Cultural Psychology at the Ohio State University in 1993.

“Isn’t that kind of the point - to increase awareness and acceptance of all human beings?” replied my 21 year-old self.

My request to conduct a senior honors thesis was subsequently accepted. The study examined the relationships between racial identity attitudes and preference for a counselor’s race. I learned a tremendous amount about racial identity development, a process that moves through the biases that we all have as part of the human condition and hopefully reaches a point of awareness of differences, deep acceptance, and positive affirmation both for ourselves and others.

Awareness and acceptance are closely linked to the theme I chose for this year’s ICA Annual Conference, “Conscious & Compassionate Counseling.” My intention was to encourage each of us in our own personal journeys, and in our work with our clients, to focus on awakening our minds and opening our hearts.

As counselors, we have a professional obligation to advocate for all marginalized populations. We must serve all individuals with conscious compassion, help them heal and recover from trauma, provide them with the emotional and relational skills to succeed, and guide them towards healthy self-esteem, positive identity and empowerment. We also have the professional commitment to serve our communities, to facilitate effective communication, collaboration, connection, growth and evolution as a society.

During a time of horrific violence, this mission becomes all the more urgent. In response, ICA has created two new task forces. The Anti-Violence Task Force is chaired by Chuck Hughes, LCPC (chughesimpossibledream@gmail.com) and will focus on counselors supporting one another, our clients, and our communities in responding to violence and facilitating peace.

The Diversity in Leadership Task force is chaired by Dr. Benton Johnson II (dr.bentonjohnson2@gmail.com) and will work closely with IAMC, IALBTIC, ICSJ and ICA’s Leadership Development Academy to work towards increasing diversity in our leadership, so that as an organization we can best serve all members. Please contact the chairs to become involved; your help is needed and appreciated.

As an organization, we provide information and resources to members so they can best serve our clients and communities. We hope that you participate in this year’s conference and these important new task forces. ICA members create a powerful ripple-effect of healing through all the lives that we touch in this world. Let’s turn up the volume and make a difference! ♥
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I have been working with counselors for the past twelve years, for nine of which I have had the privilege of serving as your executive director. In my management career, I have found that counselors are especially thoughtful and appreciative and Dan Stasi and I have received notes of thanks in the past. (Dan Stasi is the executive director for the Mental Health and School Counselors and who is also our legislative lobbyist)

However, Ellen Waxberg, LCPC sent this email to Dan Stasi and I on August 5 and I would like to share it with you...
“I have been thinking about this for quite a while, and have finally had some time to send you a note of thanks.

I have been in the counseling field for 40 years and have been a member of The Illinois Counseling Association/Mental Health Counselors for approximately 25 years.

You have both done a wonderful job keeping us informed with the newsletters and emails regarding everything from political issues to individual counselor news in the field.

I have especially been impressed with the conferences and seminars that I have attended in the last 20 years.

You both have created a sense of community for counselors by focusing on training so we are at our best when performing our counseling duties, preparing new counselors for tests/exams and generally supporting the counseling field in a positive and empowering manner.

Thank you for your dedication and responsiveness in the past, present and future.”

Ellen Waxberg, LCPC

Our philosophy is simple.

Provide the best possible service to our membership.

Whether we are creating informative newsletters, professional workshops and conferences, acting as your legislative advocate in Springfield and in Washington, D.C., or simply picking up the telephone and answering your questions, we are here to serve.

However, as with any job, we don’t do it alone! We need to thank our many volunteers who submit articles for publication, serve as division board members, present at our many conferences, edit our publications, work as committee members, and fill the many leadership positions that ICA staffs each year. We are especially grateful to our 2700 members who support this association and make all of this possible. This one’s for you!

Thank you Ellen, for allowing me to share your wonderful email and to all our members who contribute to making this association successful!”
Mindfulness occurs throughout the day. Clients can benefit from mindful states in a number of ways including: concentration, relaxation, stress management, pain management, coping skills, etc.

The concept "mindfulness" has become a loosely defined buzzword but what does it actually mean to be mindful? In simple terms, mindfulness is focused attention with suspended judgment and acceptance of the immediate, present reality (Reeds, 2015). We are mindful when we have a strong sense of what is occurring within our bodies and our immediate surroundings. It has similar elements with following states: hypnotic behavior, meditation, relaxation, and ultradian basic rest cycle (the natural rest cycles). It is a state of being for that specific time frame.

We propose that mindfulness has levels of depth and that in order to reach these deeper levels, particular pathways can be utilized. In a recent paper, we proposed four levels of mindfulness ranging from simple focusing to reaching deeper trance states. At its most basic level, we are simply aware of what is happening around us. As you read this article, you are exhibiting mindfulness; you are somewhat focused on the words and perhaps a little detached or oblivious from what else may be going on around you. At deeper levels, your body becomes increasingly relaxed. Your eyes may begin to close, some daydreaming or fantasizing may occur, as you continue to focus on a particular stimulus.
These first two levels of mindfulness can be experienced as you go about your normal daily routine; however, deeper levels are possible with some interventions, preferably by a professional. At even deeper levels, which would occur in a professional therapeutic session, an individual may become so mindful of a stimulus that cataleptic or immobility of limbs may occur. Other effects can include partial amnesia hypnotic or post hypnotic suggestibility. At the deepest levels of mindfulness, total amnesia, age regression/age progression, and even complete catastasis is possible. Clearly, the deepest levels of mindfulness are not something one experiences under normal circumstances. They could, however, be experienced in a therapy session to aid a client in developing a better understanding of themselves or what has happened previously in their lives.

So, how exactly does one achieve these mindful states? The answer is simple. It depends on the person wishing to enter the state. A particular intervention, or pathway, may have a much bigger impact on one individual compared to another. Each pathway has an opportunity to allow an individual to reach deeper levels of mindfulness. Some are more intense than others and more appropriate when used in a therapeutic session. While the pathways may be different, the end result has the opportunity to be the same.

Some of the most basic pathways to becoming more mindful are things you do every day. As part of the human condition, the human body and mind periodically “shuts down” creating a brief state of relaxation or rest referred to as the ultradian rest cycle (Rossi, 1993). In this way the one’s system rejuvenates itself. Utilizing the ultradian basic rest cycle is one way to become more mindful. This cycle is a natural bodily response that occurs throughout the day at 90-120 minute intervals, in which the mind and body require relaxation in order to rejuvenate. After a really rough day at work have you ever taken a nap and felt absolutely wonderful afterward? This is an example of your body responding positively to the ultradian cycle. When the body feels well, the mind feels well, which can lead to increased levels of mindfulness.

Another pathway can come in the form of relaxation techniques and exercises. If one is able to slow their breathing, heighten the awareness within their body, and know how to control it, they have an opportunity to achieve a deeper mindful state. Similarly, meditation is another pathway to mindfulness.

The examples above are simple procedures that anyone can do on their own to become more mindful, however, more advanced skills can be learned or more likely induced in a therapeutic setting that can lead to deeper mindful states. Therapeutic imagery and other hypnotic techniques allow an individual to visualize particular stimuli in a safe setting with the aid of a therapist. Under their direction and with intervention, more mindful states are possible.

In the end, anyone wishing to become more mindful will determine what works best for them. Some may perform simple deep breathing exercises; others may prefer to talk with a therapist and engage in some imagery or hypnotic techniques. The easiest way to become more mindful is to find the most effective method that works for you and to practice and utilize that pathway.

Mark S. Carich, PhD

Zane Maus, BA

Lisa Brandon, BA

Dr. Carich is currently in private practice and is currently on the faculty of McKendree University, Counseling Dept. Dr. Carich retired from the IDOC after 27 years of service. He publishes extensively.

Zane Maus is a graduate student in the clinical mental health counseling master’s degree program at McKendree University.

Lisa Brandon is a graduate student in the professional counseling master’s degree program at McKendree University.
At age five, I suffered a permanent hearing loss that has been my lifelong unwanted companion. From a distance, hearing impairment can be considered the invisible disability. It is not until someone who has hearing difficulties joins in a conversation that the disability becomes apparent. I do not look disabled. I do not face the stares and suffer the avoidance wheel-chair-bound people endure, yet, I am disabled. Hearing impairment is the most prevalent disability in the United States.

There are kinds and degrees of hearing loss from slight to profound. Losses arise from aging, continuous exposure to loud noises, diseases of the auditory system or from diseases in other parts of the body, such as diabetes. In my case, a weeklong high fever wiped out my ability to hear high frequency sounds.

Most often those of us who are hearing impaired, but not profoundly deaf, hear people talking to us but have trouble making out all the words. When I was young, hearing aids could not distinguish between high and low frequencies. I became an unconscious face reader. Today’s hearing aids can be tuned for amplification at different frequencies but they are not perfect. I still miss a lot. A word here or there comes through maybe even a sentence, but often I can’t make out the larger meaning. I am constantly interpreting what I do hear within the context of the conversation.

When otherwise healthy people age hearing loss creeps in. Seniors are not used to coping with hearing loss and it is disorienting. Twenty-five percent of seniors age 65 to 74 have significant hearing deficits. Fifty percent of seniors over 75 are affected. According to Columbia University, seniors with hearing problems are at greater risk of loss of cognitive ability, social isolation, anxiety, depression and even dementia. People with hearing loss are fifty percent more likely to drink in excess. Yet, only twenty-five percent of hearing impaired individuals use hearing aids.

Can this translate into a mental health issue? Social isolation often leads to depression. As mentioned, alcoholism is a serious matter. Constant annoyance, exasperation and anger, from not hearing everything said, can result in relationship problems. The twin demons, shame and humiliation, can follow for those vulnerable to them. This scenario often happens to me. Someone says something. I hear words, even understand most of them but can’t get the critical one. I stare blankly at them. They say, “Did you hear me?” and I nod my head when I have no idea what was said or what the question is. I am caught! The stoutest person can feel like a chastised child in those moments. The hearing defect becomes a character defect.

The frustration of constantly failing to hear; to catch the gist of what someone is saying often leads to a sense of worthlessness and depression in the hearing-impaired. When one repeatedly can’t hear what is being said in a conversation one can begin to feel irrelevant.

The knowledgeable therapist can help with strategies that go beyond the benefit one can get from hearing aids alone.

1. If vanity is keeping your client from using hearing aids, the therapist can help overcome that barrier. The idea of having hearing aids can make someone who resists aging feel old.
2. Teach your client how to inform others of their special needs without embarrassment or shame. Many people have no idea what to do in the presence of a hearing-impaired person. They, unintentionally, talk with their back turned or speak to them from another room. They may raise their voice when you tell them you are hard of hearing. There are even those that still equate hearing impairment with feeblemindedness. What an affront to the hearing-impaired person. Your hearing-impaired client needs support for informing others how to converse with them effectively.

3. Explain to your client that they have to take the lead. Let them know that it is all right, even a kindness, to help others manage the anxiety and frustration at having to repeat themselves. Assure your client that informing others usually works even with an exasperated busy person.

4. Learn about “speech reading,” which has replaced lip-reading. Speech reading allows one to use a variety of clues to understand what is being said including non-verbal communication. Therapists are good at non-verbal communication and can help a client learn the technique.

5. Help your hearing-impaired client know that it is okay to ask for accommodations. For example: Music is playing in a coffee shop. That music might be soothing and pleasant to most customers but it is driving the hearing-impaired person crazy. It blurs just enough of the conversation to make understanding impossible. Your client needs to know that it is all right to ask that the music be turned down.

6. Participating fully at family gathering, with friends in a restaurant, maintaining relevance at a reception takes intense concentration. One gets tired and needs a break. Assure your client that it is okay to take that break. I often ask a trusted friend to sit with me in a quiet place away from the action with out talking in order to give my brain a rest.

7. Show your client how to move into mindfulness. You can help the client learn this wonderful practice. Calm your mind, do some slow deep breathing. Give them permission to have compassion for themselves.

Helping your client take control of their hearing environment requires vulnerability, courage and support. As a counselor, you can help your hearing-impaired clients in this process. Believe me I know; I’ve had such help. I learned from a trained counselor that I could take control of my hearing environment.

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Jacques Gourguechon, MA, LPC, NCC

Jacques Gourguechon, LPC, NCC, AIPC is a therapist at Whole Hearted Psychotherapy, LLC, a private practice in Chicago. He can be reached at 312-203-9211 or by e-mail at jagourguechon.com. He enjoys working with couples, the elderly and the hearing impaired. You can learn more about hearing impairment and speech reading at http://hearingloss-wa.org/information/speech-reading-lip-reading/.

There all kinds and degrees of hearing loss from slight to profound. Losses arise from aging, continuous exposure to loud noises, diseases of the auditory system or from diseases in other parts of the body, such as diabetes. In my case, a weeklong high fever wiped out my ability to hear high frequency sounds.
DRAMA THERAPY
I bet your asking what is drama therapy and what are the benefits? Also how does this relate to the goals of the drama model? According to the North American Drama Therapy Association (NADTA), “Drama therapy is the intentional use of drama and/or theater processes to achieve therapeutic goals” (Heuristic, 2016, p. 1). The benefits of drama therapy for children and adolescents are, “…reducing feelings of isolation, developing new coping skills and patterns, broadening the range of expression of feelings, experiencing improvement self-esteem and self-worth, increasing sense of play and spontaneity, and developing relationships” (Heuristic, 2016, p. 1). The benefits align with the goals of the creative based intervention which are: help clients return to a normal level of functioning, help clients process the trauma that clients went through, and to help clients prevent relapse through coping mechanisms. These are general goals, but I believe the intervention that I developed for a class assignment will be adaptable to different crisis and traumas that a person (child, teen, adolescents, adults, and elderly) may experience during their lives. Drama therapy helps prevent flashbacks, dissociated thoughts, avoidance, phobic reactions, emotional numbing, hyper-vigilance, hyper-arousal, and other things (Landy, 2010). This helps support that drama therapy can reduce or eliminate a lot of symptoms that are able to put clients at risk for developing psychiatric disorders.

DRAMA INTERVENTION
The overview of the intervention goes as follows: developing the therapeutic relationship, teaching mindfulness anxiety relieving techniques (deep breathing, visual imagery, progressive muscle relaxation, etc…), Activity (Acting), and teaching coping skills from the activity.

Creative arts is a rising movement in the counseling profession. Counselors look for ways to help clients work through their barriers and traumatic events and one way to do that is with Drama therapy. Traumatic events can happen without warning to anyone at any time. People that are affected could develop irrational thoughts or fears that may lower them from their normal level of functioning. My goal here is to share my drama therapy intervention, that I developed for a class assignment, to help add to other counselor’s repertoire of techniques and help clients get back to their normal level of functioning.

Acting out the Trauma
By: Coresair Mack, BA
ACTIVITY STEPS

Here are the steps to the activity:

1. First start off with having or helping the client come up with a scene the client wants to act out. Make sure the client includes the setting of the scene, characters in the scene, and any props the client may want to use or make for the scene.

2. Before acting out the scene, process the scene with the client to gain more insight as to why the particular scene and any other aspects of the scene was chosen to find out the meaning behind their choices. This allows the counselor to make connections to the client’s presenting problem or issue that the client wants to go through.

3. Have the client create and/or pick out any props that may be needed. This will also allow the counselor more time to process with the client while the client creates the props, if needed.

4. Let the client be the director and the actor in the scene by having the client act out the scene and make changes when necessary. Counselors can take part in being a character or assisting with props, if the client is comfortable with the idea.

5. After the scene is finished reflect and process with the client about how the scene went as well as any changes that was made to the scene. This allows the client to do a deeper processing and reflection due to recently acting out the scene.

6. Allow the client to re-enact the scene with any new changes from the client or suggestions from the counselor.

7. Keep the story moving by allowing the client to invent a new scene to add onto the story or allow the client to create a new scene with different settings and characters.

VARIATIONS

There will be clients that may not like acting out scenes that they create. Here are a few alterations that may help with this barrier.

- **Story Telling.** Story telling is the same as acting, but meant for those that do not like to act or are not comfortable with acting yet. This gives clients a chance to verbally articulate a story that clients are comfortable telling, thus distancing themselves from the trauma enough to be able to tell their story.

- **Scene writing.** Screen writing is the same as acting, but clients get to write out their scenes. If the client is not comfortable acting or talking, clients can write out their scenes and characters.

- **Toy animation.** When acting or story telling may be too much for a child, toy animation makes telling or re-enacting the story easier. Children bring the toys to life to have human like characteristics, allowing for the child to tell the story through playing with the toys. This is also a chance for counselors to play and interact with children by acting out scenes with children (Schwartzenberg, 2008).

CONCLUSION

In conclusion, I believe counselors can utilize my drama intervention to help clients that go through traumatic experiences. Also the intervention gives counselors an additional tool to utilize or blend into their counseling style, if counselors choose to utilize the model. Overall, creative arts in counseling allows not only clients, but counselors to be creative in counseling. Creativity could foster the therapeutic relationship as well as help clients and counselors learn, grow, and develop together.
Family law for the LGBTQ community changed substantially with the June 26, 2015 landmark decision of the United States Supreme Court in the case of Obergefell v. Hodges, where the Court held that every state must allow and recognize same-sex marriages. While there is now no difference before the law whether a married or a divorcing couple are same-sex or different-sex, the newness of this situation means that helping professionals should inform themselves and encourage same-sex couples to inform themselves about the legal rights and ramifications of what, until recently, had been a societal status in which they had no stake. Same sex couples have some catching up to do.

**LEGAL IMPACT OF THE RULING**

Marriage laws still differ from state to state, but married same-sex couples in a given state have the same legal benefits and responsibilities as married heterosexual couples in that state. They now enjoy the usual spousal benefits, including the rights to own property jointly, take a tax deduction through filing returns jointly, extend healthcare coverage to a partner as a dependent, and be viewed and empowered as next-of-kin should the other spouse become unable to make medical or end-of-life decisions. Denial of any of these rights because of sexual orientation is now considered discrimination and is against the law.

However, predictably, there has been a cultural backlash against this new legal right for same-sex couples. As of this writing, more than three-quarters of all state legislatures have seen in excess of 200 bills filed which would give anyone the right to deny goods or services to same-sex couples if doing so would violate their personal religious convictions. Most of these bills have been defeated, but others that have passed, as in North Carolina, have sparked lawsuits now making their way through the court system and which ultimately may be decided by the U.S. Supreme Court. My advice to LGBTQ individuals, therefore, is to get informed, stay informed, and be wary. Societal attitudes toward same-sex marriage are liberalizing fast, but not at the same rate across the entire country. Be aware that in some states, lawmakers’ attitudes have yet to catch up to the more inclusive attitudes of the populations they represent.

**SEPARATION AND DIVORCE**

Along with gay marriage comes gay separation and gay divorce. If a married couple wants to end the relationship, they must do so formally, following the “Dissolution of Marriage” statutes.
in that state. They can’t just break up; they must actually file for divorce. Married couples, after all, have done more than declare their love before the world; typically they have intermingled assets, shared a home, made one another beneficiaries on insurance policies and investment accounts, and so on. When a married couple splits up, all of that must be formally undone. This is at the heart of the divorce process.

WHICH DIVORCE PROCESS IS BEST?

If the couple has any disputes over property, childcare, or maintenance, then the dissolution requires legal assistance—but there are several ways to do this. In my opinion, after helping more than 8,000 couples divorce, the goal for anyone who wants a divorce should be to stay out of court. Once the case comes to the courtroom, the spouses have relinquished all control over their future. There is no guarantee whatsoever that the judge will be fair-minded or the outcome will be just. The biggest mistake made by divorce clients is assuming that they will ‘get their day in court’ and the judge will inevitably see things their way. A divorce trial is always a gamble: the personal stakes are very high, and the outcome is almost always permanent, irrevocable, and very much influenced by the judge’s own values, personal baggage, and prejudices. Same-sex couples are particularly vulnerable in this regard.

MEDIATION

Mediation, without question, is the more respectful, amicable and cost-effective way to dissolve a relationship, and the best for the emotional welfare of children when there will be shared parental responsibility following the divorce. Importantly, mediation also keeps control of the process in the hands of the divorcing partners. They decide everything together. Nothing goes in the final document unless both have agreed to it. The role of the mediator is to help both partners focus on the future and negotiate with one another to resolve any outstanding disagreements about childcare, property, and maintenance. These decisions are made in the privacy of the mediator’s office, with the mediator explaining all the options available to them so that each can make informed choices and bargain constructively to create the best post-divorce future. After all issues are resolved—which typically takes about three sessions—the mediator summarizes their agreement in a document that is presented to the court for approval. In most cases, neither party ever has to appear in court. Once the judge signs off on the agreement, they are divorced—and the details remain private. This contrasts with a divorce trial, where the court reporter takes down every word, and everything—including supporting documentation, which can reveal personal matters and financial information—becomes part of the public record.

In addition, mediation allows the couple to move through the divorce process quickly and at a fraction of the usual cost of hiring two attorneys to argue for them. If joint custody of children is part of the plan, mediation has the enormous benefit of spelling out in detail just what each parent’s future responsibility will be, which goes a long way toward avoiding conflict in front of the children. Very often the negotiating skills learned by the partners during the mediation process also help them keep their future interactions peaceful. This is a huge gift to the children, who can stop worrying about their parents and adapt to the new normal.

More Information:

For more information about same-sex rights and responsibilities, contact a local LBGTQ Resource Center and/or a mediator or lawyer in your area that specializes in Family Law.
Pre-Conference:

Thursday, November 3

All Day Workshop

Sherene McHenry, PhD, LPC (Mi)

Strengthen Families, Improve Relationships, Increase Resilience

Do you want to strengthen families? Would you like an effective, often immediate way to improve relationships? What about helping couples on the brink of divorce fall in love all over again? Would you like to increase resiliency in children? Cut down acting out referrals in schools by up to 50%? Through stories, humor and concrete, easily implementable information, you will learn the various ways individuals are wired to give and receive love, respect and appreciation. Relationships can be rescued and restored. Clients can flourish. Counselors can quit beating their heads against the wall.

AM Half Day Workshop

Chris Rybak, PhD, LCPC and Lori Russell-Chapin PhD, LCPC

Mindfulness & Neurocounseling: Brain-Based Approaches to Building Compassionate Understanding of Self and Others

Participants will be able to identify and describe basic principles of mindfulness and neurocounseling through didactic instruction as a foundation.

Participants will apply and experience these principles through interactive exercises.

Overall Goals

- Participants will understand the concepts of mindfulness, neurocounseling, and interpersonal neurobiology and their role in building compassionate relationships
- Participants will understand the difference between neurotherapy, neurofeedback, and neurocounseling
- Participants will be introduced to basic neuroanatomy
AM Half Day Workshop Cont’d...

- Participants will be able to identify factors causing brain dysregulation
- Participants will learn about types of neurotherapy

Both presenters are Full Professors of Counselor Education at Bradley University.

The Bradley University Counseling program has been emphasizing brain-based and mindfulness counseling for a number of years.

Drs. Russell-Chapin and Rybak developed and teach graduate level classes specifically on brain-based counseling and brain-based counseling interventions.

PM Half Day workshop

Jonathan Nye, JD

Confidentially and the Law

Participants will be presented with a comprehensive introduction to the confidentiality requirements of the Illinois Mental Health and Developmental Disabilities Confidentiality Act, HIPAA, the Illinois and Federal Alcohol and Substance Abuse Confidentiality Acts; they will be introduced to Guardianship law for Adults and Minors; the Marriage and Dissolution of Marriage Act; the Domestic Violence Act; and the Illinois Abused and Neglected Minors Reporting Act obligations.

The intent of the presentation will be to assist in malpractice avoidance, understanding the process of an IDFPR investigation and prosecution of a case by the Department, and understanding how to minimize your chances of financial, criminal, and professional liability.
ICA 68th Annual Conference

Conscious & Compassionate Counseling

The Hotel:
The Wyndham Springfield City Centre, 700 East Adams St, Springfield, IL 62701. (217) 789-1530. Conference Rate: $99 + taxes per night. Reserve rooms using the special link on the ICA website or call the hotel and use the group identification, Illinois Counseling Association. The Wyndham, formerly the Springfield Hilton is located in the historic downtown area of Springfield 2 blocks from the Amtrak train station.

The City:
Springfield became the Illinois state capital in 1837 with the help of a young lawyer and politician named Abraham Lincoln. He lived in the city until he left to become the 16th President of the United States in 1861. From that moment on, the city’s history and future have been inexorably tied to this most famous and beloved American citizen.

While in Springfield visit the Lincoln Library, the historic Lincoln home, Lincoln’s grave and historic New Salem where Lincoln began his political career.

Conference Activities: A Total Conference Experience!
Workshops: 3 Pre-Conference workshops and 72 Main Conference Selections along with 20 Poster Presentations.

Thursday Welcome Reception • Continental Breakfast and Lunch on Friday & Saturday • Friday Awards Reception • ICA Division Meetings and Receptions on Friday.

Get your free professional digital photo taken, drop off used books and pick up new ones at the “Free Book Exchange”. Win a Division Gift Basket. Play Exhibitor Bingo. Get a free career consultation from our ICDA Division members and Network with other counselors!

2016 Conference Schedule of Events

Thursday, November 3
7:30am Pre-Conference Registration
9:00am Pre-Conference Workshops
12:00pm Lunch (on own)
1:00pm Pre-Conference Workshops
4:00pm Workshops conclude
4:45pm ICA Governing Council Meeting
7:30pm Welcome Reception
9:30pm Activities Conclude

Friday, November 4
7:00am Main Conference Registration
7:30am Continental Breakfast
8:45am General Session Announcements
9:00am Keynote
10:00am Morning Content Sessions
12:00pm Networking Lunch, Exhibitors and Poster Sessions
1:30pm Afternoon Content Sessions
4:45pm Division Meetings
8:00pm ICA Awards Reception
9:30pm Activities Conclude

Saturday, November 5
7:30am Main Conference Registration
7:30am Continental Breakfast
8:45am General Session Announcements
9:00am Morning Content Sessions
12:00pm Lunch, Exhibitors and Poster Sessions
1:30pm Afternoon Content Sessions
4:30pm Conference Closes
Visit the ICA Division Tables

Divisions will be raffling off Gift Baskets during the conference.
Tickets can be purchased at the conference registration desk.

ICDA Career professionals will be available for consultations.

Bring your resume and questions. Schedule your appointment at the ICDA exhibit table during the ICA Conference.

Free Books!

Our annual book exchange for counselors and students. Donate books no longer used. Pick up books you want at the ICA Free Book Table.

Free Headshot Photography!

Have a free head shot taken for your professional or personal use.

Studio Photography will be on hand on Friday and Saturday from 8:00 a.m. to 4:00 p.m. to take your photo.

Digital copies of the photos will be available for download from the ICA website following the conference.
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<td>A Model for School-based Crisis Response: Design and Implementation</td>
<td>Denise Chaitkin</td>
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<td>Addressing Value-Based Ethical Conflicts Within the Counseling</td>
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<td>An Affirmative, Cognitive-Behavioral Model Utilizing Age Regressed</td>
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<td>Beyond the Clinical to the Macro: Using Strengths and Positive</td>
<td>Vince Walsh-Rock</td>
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<td>Affirmations for Greater Change in Relational Systems</td>
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<td>Conscious and Compassionate Counseling: Broadening our View of</td>
<td>Katherine M. Wix</td>
<td>PhD, LPC, NCC, ACS, PEL: School Counseling</td>
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<td>Janis Clark Johnston</td>
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<td>Counseling, Congruence, &amp; the “Zen Master”: A Coach's Compassionate</td>
<td>Jim Klein</td>
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<td>Dealing with Domestic Violence Through Orders of Protection: Types,</td>
<td>Gwendolyn J. Sterk</td>
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<td>Nathaniel Gilham</td>
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<td>Enriching Student Motivation and Engagement</td>
<td>Steve Murray</td>
<td>LPC, Type 73</td>
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<tr>
<td>Five Days and Two Years: Conscious and Compassionate Counseling</td>
<td>Kimberly A. Hart</td>
<td>LPC, NCC, PEL:SC</td>
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<tr>
<td>Through Mindful Cross-Cultural Practices</td>
<td>Carol A. D’Anca</td>
<td>MS Clinical Nutrition, CNS Board Certified</td>
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<td>Food, Mood and Cognition</td>
<td>Rosa Julia García Rivera</td>
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<td>Healthy Minds, Healthy Schools: A New Approach to Mental Health in</td>
<td>Daniel Stasi</td>
<td>MS, Lobbyist</td>
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<td>Public Schools</td>
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<td>How to get your LPC or LCPC and Keep It. Details of Illinois</td>
<td>Anna Themanson</td>
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<td>How to Use Narrative Therapy in Complicated Grief Counseling</td>
<td>Katherine M. Wix</td>
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<td>Implementation of Data-Driven School Counseling Interventions</td>
<td>Toni R. Tollerud</td>
<td>PhD LCPC, NCC, NCSC, ACS</td>
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<td>Michele Kerulis</td>
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<td>Spiritual Assessment: What Is It, How to Do It, and When and to</td>
<td>Nathan Perron</td>
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<td>Supporting our LGBTQ Students in the School Setting</td>
<td>Allyson Adams</td>
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<td>Taking the Focus OFF the Identified Patient: A Comprehensive New</td>
<td>Cecilia Guzman</td>
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<td>Approach for Thinking about Symptoms.</td>
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<td>The End of Life: Facilitating Compassionate Conversations Around</td>
<td>Donna Kirkpatrick Pinson</td>
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<td>Death and Dying</td>
<td>Serena Wadhwa</td>
<td>PsyD, LCPC, CADC, RYT</td>
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<td>The Fatigued Soul: When Compassion Runs Out and What you Can do</td>
<td>Fredrick A. Kendricks Jr.</td>
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<td>The Indivisible Self: Exploring Coping Strategies of Self-Identified</td>
<td>Benton Johnson II</td>
<td>PhD, LCPC, LMHC, NCC</td>
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<td>Black Gay Christian Men who Attend Non-Affirming Churches</td>
<td>Sandra Kakacek</td>
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<td>Trauma’s Trouble; Children’s Changes; Families Functions &amp;</td>
<td>Lindsey Halpern-Givens</td>
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<td>Voicing Pain and Loss with SoulCollage</td>
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**Workshops**

**Title** *(Workshop presentations subject to change)*

**Friday:**

- “Moving Through It” by Laurie Siegel (LCPC, CADC, MISAII)
- A Model for School-based Crisis Response: Design and Implementation by Denise Chaitkin (MEd, ETHS)
- Addressing Value-Based Ethical Conflicts Within the Counseling Relationship: A Decision-Making Model by Michael M. Kocet (PhD, LMHC, NCC)
- After 40 years in Therapy What Have I learned? by Norman C. Dasenbrook (LCPC)
- An Affirmative, Cognitive-Behavioral Model Utilizing Age Regressed Dynamics by Jonathan Simon (MS, LCPC)
- Conscious and Compassionate Counseling: Broadening our View of Military Culture by Vince Walsh-Rock (LCPC)
- Conscious Grieving: It Takes a “Village” of Personality Parts by Janis Clark Johnston (EdD)
- Cooking Therapy: An Emerging Tool of Compassion in Counseling by Michael M. Kocet (PhD, LMHC, NCC)
- Counseling, Congruence, & the “Zen Master”: A Coach’s Compassionate Canons by Jim Klein (EdD, LPC)
- Dealing with Domestic Violence Through Orders of Protection: Types, Effects and Remedies by Gwendolyn J. Sterk (JD)
- Developing Compass Between Police and the Community by Nathaniel Gilham (EdD, NCC, LCPC)
- Enriching Student Motivation and Engagement by Steve Murray (LPC, Type 73)
- Five Days and Two Years: Conscious and Compassionate Counseling Through Mindful Cross-Cultural Practices by Kimberly A. Hart (LPC, NCC, PEL:SC)
- How to get your LPC or LCPC and Keep It. Details of Illinois Counselor Licensure by Carol A. D’Anca (MS Clinical Nutrition, CNS Board Certified Dietician Nutritionist)
- How to Use Narrative Therapy in Complicated Grief Counseling by Rosa Julia García Rivera (LCPC)
- Implementation of Data-Driven School Counseling Interventions by Daniel Stasi (MS, Lobbyist)
- News from the STATE: Legislative Update for Counselors in Illinois by Anna Themanson (MEd)
- Providing Balanced Therapeutic Alliances in Couples Counseling When One Partner Violates The Trust by Katherine M. Wix (PhD, LPC, NCC, ACS, PEL: School Counseling)
- Resilience Can Be Taught! 10 Tools to Motivate ANY Student by William (Tony) Victor (DMIn, LCPC)
- Selfies: Empowerment or Narcissistic? by Christian Moore (LCSW)
- Spiritual Assessment: What Is It, How to Do It, and When and to Whom to Refer by Michele Kerulis (EdD, LCPC, CC-AASP)
- Supporting our LGBTQ Students in the School Setting by Nathan Perron (PhD, LCPC, AC, NCC)
- Taking the Focus OFF the Identified Patient: A Comprehensive New Approach for Thinking about Symptoms. by Allyson Adams (MA)
- The End of Life: Facilitating Compassionate Conversations Around Death and Dying by Donna Kirkpatrick Pinson (EdD, LCPC, NCC, NCSC)
- The Fatigued Soul: When Compassion Runs Out and What you Can do About It. by Serena Wadhwa (PsyD, LCPC, CADC, RYT)
- Trauma’s Trouble; Children’s Changes; Families Functions & Interesting Interventions by Benton Johnson II (PhD, LCPC, LMHC, NCC)
- Treating Trauma with Equine-Assisted Psychotherapy by Sandra Kakacek (EdD, LCPC)
- Voicing Pain and Loss with SoulCollage by Lindsey Halpern-Givens (DMIn, LCPC, BCC, RYT)
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<tr>
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<tr>
<td>Asexuality 101: Becoming &quot;Ace&quot; Affirming and Conscious Counseling Professionals</td>
<td>Elisa M Woodruff</td>
<td>MSEd, LPC, NCC</td>
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<tr>
<td>Community Wellness Fairs as a Tool to Promote Integrated Service Delivery in Rural Areas</td>
<td>Ken Oliver</td>
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<tr>
<td>Compassion Beyond the Crisis</td>
<td>Ashley Cosentino</td>
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<tr>
<td>Compassion in the Classroom: Lessons Learned from the Relationship between Novice Educators and Counselors</td>
<td>Mandy Kellums</td>
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<td>Compassionate and Caring Counselors' Unrecognized Ableist Biases!</td>
<td>Kimberly K. Asner-Self</td>
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<td>Confidentiality: Overview, HIPAA tips, and practical technology tools</td>
<td>J Scott Nelson</td>
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<td>Consciously Counseling Clients with Adult ADHD</td>
<td>A. Maren Tolley</td>
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<td>Counseling Young Adult Cancer Survivors</td>
<td>Julie McGonigal</td>
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<td>Counselors' Propensity to Assess and Treat Clients for Issues Related to Pornography Use</td>
<td>Zachary Bloom</td>
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<tr>
<td>Gambling Addiction: Evidence Informed Practice</td>
<td>J Scott Nelson</td>
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<td>Helping Parents and Children Build Better Relationships through Therapy</td>
<td>Joseph Campbell</td>
<td>PhD, LCPC, LMHC (IN), ACS, CCMHC, NCC</td>
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<td>Integrated Behavioral Care</td>
<td>Keith A. Bair</td>
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<td>Integrating Neurocounseling into Counseling</td>
<td>Lori A. Russell-Chapin</td>
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<td>Introduction to Theraplay: Helping Parents and Children Build Better Relationships Through Attachment-Based Play</td>
<td>Dafna Lender</td>
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<td>Justice-Oriented Supervision: Supervisee Advocacy and Empowerment</td>
<td>Justin D. Lauka</td>
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<td>Managing Resistance: Understanding and Using Resistance to Inform and Enjoy</td>
<td>Lindsay Bicknell-Hentges, Ph.D.</td>
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<td>Managing Stress Through Mindfulness and Meditation</td>
<td>Angela Miller</td>
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<td>Mind, Mat, Couch: Varied routes to Conscious and Compassionate Counseling</td>
<td>Nona L. Wilson</td>
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<td>Online Dating and Empathy, Objectification of Others, and Quality of Romantic Relationships</td>
<td>Zachary Bloom</td>
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<td>Providing Constructive Feedback to Supervisees: How to Deliver Effective Feedback while Preserving the Supervisory Relationship.</td>
<td>Kimberly Duris</td>
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<td>Psychodynamic Psychotherapy Consultation: Fundamentals and Demonstration</td>
<td>Jay Einhorn</td>
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<td>Sensorimotor Psychotherapy Techniques: Ways to Show Compassion to Clients While Raising Body Consciousness</td>
<td>Christina Matthews</td>
<td>LCPC</td>
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<td>Squirrels, Butterflies, and Man, An Existential Approach to Counseling</td>
<td>Alan Owens</td>
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<td>Tales from the Front-Lines: Supervising Students During Practicum/Internship</td>
<td>Bob Zima</td>
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<td>The Association for Child and Adolescent Counseling in Illinois Announces a New Initiative</td>
<td>Maria McCabe</td>
<td>LCPC</td>
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<td>The Compassionate Counselor and Compassion Fatigue: Risk and Resilience</td>
<td>Corey Worden</td>
<td>LCPC</td>
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<td>The Effect of Schizophrenia on Family Dynamics: A Rehabilitation Counselor's Professional and Personal Experience</td>
<td>Lynda L. Boyd</td>
<td>EdD, LCPC, CRC</td>
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<td>The Language of Change</td>
<td>Kevin Strouffer</td>
<td>PhD, LCPC, NCC, CCMHC, CFT</td>
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<td>The Six Stage Self-Love Deficit Disorder Recovery Model</td>
<td>Ross Rosenberg</td>
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<td>The Use Metaphor: An Easy Tool For Complicated Problems</td>
<td>Annette McLean</td>
<td>LCPC, CEDS</td>
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<td>They Aren't Bad Kids, Just Mean Drunks: Interventions for Disruptive Behavioral Disorders</td>
<td>James Kling</td>
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<td>Treating Insomnia: Why We Should be Approaching it as More Than Just a Symptom</td>
<td>Celso Teixeira</td>
<td>MA</td>
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<td>Understanding Addictions: A Key Step in Coping with Addictive Behaviors of Close Others</td>
<td>Mary McClure</td>
<td>EdD, LPC</td>
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<td>Understanding Cross-cultural Conflict, Resolution Strategies, and Mediation</td>
<td>Tsui-ye Chow</td>
<td>EdD, LCPC</td>
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<td>Wake Up: Conscious Counseling Interventions for Today's African-American Client</td>
<td>Antoinette M. Schrader</td>
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<td>What were you thinking?? Neuroscience of the Teen Brain</td>
<td>Stef Standefer</td>
<td>LCPC</td>
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<td>When News is Too Easy to Get - Media Vicarious Trauma &amp; Cultural Conflict</td>
<td>Christy Wang</td>
<td>MA, LPC, NCC</td>
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<td>Workplace Bullying: Compassionate Counseling for Aging Targets</td>
<td>Judy Skorek</td>
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<td>Youngest Survivors: Identifying Concepts for Combating Child and Adolescent Trauma Experienced by Refugees during International Crisis Events</td>
<td>Nathan Perron</td>
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## Poster Sessions

**Title (Please note: Schedule is subject to change)**

### Friday:

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<td>Completing the Puzzle: Resource and Program Development for Children with Autism</td>
<td>Bryana Gadis</td>
<td>BA</td>
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<tr>
<td>Creating Connections: Attachment Based Group Work for Foster Children</td>
<td>Charan M. Bashir</td>
<td>BA</td>
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<td>Counseling Native American Families</td>
<td>Gabby Hidalgo</td>
<td>BA</td>
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<td>Stress Less: An Anxiety and Stress Management Small Group Curriculum for School Counselors</td>
<td>Kelsey Ward</td>
<td>BA</td>
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<td>No Harm, No Fowl</td>
<td>Kristina Wilkerson</td>
<td>MA</td>
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<td>Bikers Against Child Abuse (B.A.C.A.®)</td>
<td>Lori Beckwith</td>
<td>EdD, LCPC, NCC</td>
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<td>Art Therapy</td>
<td>Malkema T Martin</td>
<td>BA</td>
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<tr>
<td>The Intersection Between Chronic Pain and Addiction and Its Social Implications</td>
<td>Mary Collins</td>
<td>BA</td>
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<td>Conscientious Counseling within a Research Setting: Reflections from Field Researchers</td>
<td>Melissa Sherman</td>
<td>MEd, LPC</td>
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<td>Treatment of Trauma and Addiction</td>
<td>Stephanie Pruefer</td>
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<tr>
<td>Unmet Needs of Families Who Have Lost a Child to an Act of Violence</td>
<td>April Wilburne</td>
<td>BA</td>
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<tr>
<td>A Little Dirt Never Hurt: Heightening your School Counseling Senses with Nature-Based Therapy</td>
<td>Emily Schiro</td>
<td>BA</td>
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<tr>
<td>Creating an Inclusive School Counseling Program</td>
<td>Emily Schiro</td>
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<tr>
<td>It's Not About the Food: Understanding the Predisposing, Precipitating, and Perpetuating Factors Associated With Eating Disorders</td>
<td>Jennifer Rogers</td>
<td>BA</td>
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<td>Creative and Compassionate Constructs in the Counseling Classroom: Using Contemporary Narrative Techniques to Teach Counselors-in-Training About Group Counseling</td>
<td>Lucy Parker</td>
<td>LPC, NCC</td>
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<td>Facilitating Compassionate Dialogue to a Well-Perspective through an Un-Well Body</td>
<td>Rebecca Tadlock-Marlo</td>
<td>PhD, LCPC</td>
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<tr>
<td>OSMD: Conscious and Compassionate Cultural Counseling</td>
<td>Rebecca Tadlock-Marlo</td>
<td>PhD, LCPC</td>
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<td>Art-Based Techniques in Field Experience Supervision</td>
<td>Ryan Liberati</td>
<td>PhD, LCPC, PSC, ACS</td>
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<td>Teens of Chicago</td>
<td>Tianna A Hammond</td>
<td>BA</td>
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Pre-Conference & Conference Registration

Make your own hotel reservations by October 12, 2016 directly with the Wyndham Hotel using the link on the ICA website www.ilcounseling.org. The group code is ICA and the rate is $99/night plus tax.

Name ________________________________
Street/Credit Card Billing Address ________________________________
City __________________ State ______ Zip ________
E-mail ________________________________
Phone (H) __________________ (W) __________________
Card Number ________________________________
Expiration Date __________ CVV Code __________

ICA Members Only: Mark only one. The division you mark will receive a portion of your registration fee.

☐ IAACE Assessment
☐ ICA College Counselors
☐ IADDA Adult Development
☐ ICDA Career Development
☐ IACFC Couple & Family
☐ ICES Counselor Educators
☐ IALGBTIC LGBT Issues
☐ IC SJ Social Justice
☐ IAMC Multicultural
☐ IMHCA Mental Health
☐ IASGW Group Specialists
☐ ISCA School Counselors
☐ IACAC Children & Adolescent
☐ ISERVIC Spirituality & Religion

Special Needs:
Contact ICA in advance of the conference 877.284.1521

Cancellation Policy: Refunds, minus a $25 processing fee, will be made upon written request to ICA received on or before October 20, 2016. No refunds will be given for late cancellations. ICA shall assume no liability whatsoever in the event that a workshop(s) is canceled, rescheduled, or postponed due to a fortuitous event, Act of God, unforeseen occurrences or any other event that renders performance of this conference impracticable, illegal or impossible. This shall include, but not limited to: war, fire, labor, strike, extreme weather or other emergency. Speakers and topics were confirmed at the time of publishing, circumstances beyond the control of the organizers may necessitate substitutions, alterations or cancellations of the speakers and/or topics. As such ICA reserves the right to alter or modify the advertised speakers and/or topics if necessary without any liability to you whatsoever. Any substitutions or alterations will be updated on our web page as soon as possible.

Pre-Registration must be received before October 15, 2016 to take advantage of the early registration discount.

Thursday, Pre-Conference Workshop
Attendees may earn 6 Continuing Education hours at the Pre-Conference.

Circle Pre-Conference Payment Choices

ALL DAY: (Circle choice & amount)
Dr. Sherene McHenry: Strengthen Families
Member: .................................................$75................. $95
Non-Member: .........................................$125................. $145
or Both Half Day Workshops for the Full Day Fee
HALF DAY ONLY: (Circle choice & amount)
Half Day AM: Mindfulness & Neurocounseling
Half Day PM: Confidentially and the Law
Member: .................................................$50................. $60
Non-Member: .........................................$70................. $80

Thursday, Pre-Conference Workshop
Attendees may earn 6 Continuing Education hours at the Pre-Conference.

Conference Friday and Saturday
Attendees may earn up to 12 Continuing Education hours for participation in conference sessions.

Conference Package includes: Welcome Reception; Breakfasts; Friday and Saturday Luncheons; Friday Reception; Keynote Session; All Content Sessions

ICA Members
Full Conference Package (Fri & Sat) $225 $250
Friday only $135 $155
Saturday only $135 $155

ICA Member Retirees &
ICA Member Students
Full Conference Package (Fri & Sat) $180 $205
Friday only $110 $130
Saturday only $110 $130

Non-Members
Full Conference Package (Fri & Sat) $270 $295
Friday only $155 $175
Saturday only $155 $175

Non-Member Students
Full Conference Package (Fri & Sat) $220 $245
Friday only $130 $150
Saturday only $130 $150

Contribution for Volunteers’ Lunches $ __________________

TOTAL AMOUNT ENCLOSED: $ __________________

Continuing Education Hours: The Illinois Counseling Association is an NBCC Approved Continuing Education Provider, ACEP No. 2014. Programs that do not qualify for NBCC credit are clearly identified. ICA is solely responsible for all aspects of the program. ICA provides Psychologists with CEs under IDFPR license # 268.000065. This program is co-sponsored through IMHCA, recognized CE and Clock Hours for LSW/LCSW IDFPR license # 159-000650 and LMFT; IDFPR license # 168-000148. PDs are provided by ISCA through ISBE.
Developing and sustaining multicultural competency with immigrants appears to be a continuing challenge for the counseling professional. What is the best way to deal with feelings of discomfort and confusion about what to do? How do we avoid over identifying with one family member against another? These questions are even more important in an era of increased nativism, xenophobia and anti-immigrant sentiments in the US.

Counselors do not operate in a political or cultural free environment. The encounter with clients is an interaction between two personalities embedded in a milieu affecting how, and what we see and hear. Our interactions with clients include our characteristics, values, ideas about a good life, marriage, and parenting impacting the outcome of the counseling process. Ideas about immigration, therefore, also affect how counselors react to immigrant client(s) and families.

US policy makers wrestle with answers to difficult questions: How many immigrants should the US continue to admit? Does it matter what nations and/or races they come from? Who should be punished for the flow of undocumented immigrants, the immigrants or the businesses who hire them? Should the US extend access to services including education, and basic health care to undocumented immigrants? What about to their children?

At the same time, there seems to be a lack of information provided to the general public about important issues regarding immigrants. What are the differences between undocumented immigrants, refugees, and asylum seekers? Do immigrants care about the education of their children? Are immigrants taking jobs away from Americans? Why President Obama is called the “deporter in chief” by so many immigrants, while others say there aren’t enough deportations?

Conflicting and paradoxical attitudes from federal, state and local governments at different historical times have been the common thread in policies, while ambivalence may be the most benign word to describe the public attitude toward immigrants.

These issues seep into the media in bite size chunks of information affecting public opinions. Counselors exposed to these confusing policies may feel confusion, curiosity, criticism and/or compassion with immigrant clients in counseling increasing their own ethnic pride or ethnic shame.

The following are possible reactions in client-counselor dyads of the same or different ethnic or social class backgrounds:

- **Discomfort:** Feeling uncomfortable could stem from lack of knowledge, fear of being labeled insensitive or discriminatory and could result in being overly friendly or accommodating, failing to assess violence or alcohol abuse. Counselors may push their negative reactions underground which could lead to excessive curiosity and to spending too much time exploring aspects of a clients’ culture at the expense of client’s needs. On the other hand, counselors may also be uncomfortable and avoid discussing cultural factors all together with their client, creating distance.

- **Sadness or guilt about the immigrant client’s life:** This could lead counselors to feel too much compassion to be helpful, minimizing issues for fear of being labeled ignorant. Some may be tempted to extend session time, cross boundary lines, encourage dependency or have an attitude that places responsibility for change on the
Sadness or guilt may also lead to emphasizing victimization and oppression instead of strength and resilience.

- **Ethnic prejudice**: Counselors’ own ethnic shame could result in pressure on clients to adopt a lesser “ethnic characteristic behavior”. Or counselors may reject clients’ behaviors, mode of communication, style of dress, language, parenting styles, gender socialization or attitudes toward the counseling process. Some may react negatively to clients who speak with a heavy accent, (Why don’t they learn English?), to women who don’t act in an assertive way (Why is she so submissive?), or to male partners who skip counseling appointments (Why are they resistant?). Counselors may also take sides with one member of the family against the other, i.e. side with an adolescent against her mother or with a wife against her husband.

- **Ethnic pride**: Counselors may be influenced by idealization of the ethnic background of the client. This idealization may stem from clinicians own ethnic self-hatred, particularly if they identify as part of historical “oppressor” group. These feelings may prompt behaviors and actions that stem from a “your group is better than my group” attitude.

Some suggestions for counselors to help them deal more effectively with these reactions include:

- Becoming aware of what they are thinking or feeling. At the same time, monitoring these reactions frequently to increase awareness of their own ethnic/racial identity development.

- Increasing curiosity of one’s own self whenever criticism or compassion appears and learning to tolerate the resulting anxiety.

- Tolerating discomfort stemming from not knowing what to do.

- Striving to understand the interactional effects of cultural dimensions- gender expectations, ethnicity, social class- in shaping identity, parenting and marital relationships.

- Adopting a more collaborative approach to setting goals, based on neither romanticizing nor denigrating the client’s culture.

- To avoid stereotyping, learning about intra-group differences by reading real life stories to obtaining information from sources other the client.

The suggestions above may bring awareness of these intense feelings and may help find ways to deal effectively with them in all counseling settings with clients and their families.

Anita Jones Thomas, PsyD

Anita Jones Thomas, a psychologist and Dean of the School of Psychological Sciences at UIndy and writes about racial identity and racial socialization of African Americans. She is the co-author, with Sara Schwarzbaum of the upcoming third edition of “Culture and Identity: Life Stories for Counselors and Therapists”.

Sara Schwarzbaum, EdD, LCPC, LMFT

Sara Schwarzbaum, is a retired Professor of marriage and family counseling at NEIU and a couples counselor in Chicago. She writes about working with Latinos and immigrants.
Last year my partner was diagnosed with cancer. He was rushed into surgery to remove a tumor the size of a golf ball. He required to follow up quarterly with CT scans and test for a year. On the final checkup this past April, the doctor noted a growth on a limp node of his abdomen containing cancer cells.

This information I was receiving was about someone I knew, someone I was close to, someone I care and love deeply. I remember feeling numb at first, and then as it all began to really sink in a flood of emotions filled me. I was heartbroken, scared, and angry all at once. Even so, with all my education, training, and experience I found myself questioning, “What am I supposed to do now?” “How can I best support my partner in this process?” “How do I maintain my own self-care?”

As counselors, counselors-in-training, and counselor educators we have been fortunate to participate in fostering safe spaces for individuals who experience grief and loss. These safe spaces create opportunities for our clients to process their experiences in a healthy and meaningful way. However, I have found myself at a loss for how to allow myself to feel the grief and process it in the here and now.

There has been much said and suggested regarding how professionals can participate in self-care practices. Many wellness and self-care strategies note the following: seek professional counseling, exercise, meditation, prayer, writing in a journal, so on and so forth. All of these tips are great and I have engaged in many of them throughout my life and career.

However, many of the popular self-care options also come with various barriers such as cost, accessibility, interest, and even at times for me personally motivation. For example, often times I have found myself unable to continue counseling services because I am a graduate student and could not afford to continue services. I have also found that the exercises I enjoy are not...
accessible during all seasons (i.e. running outside in Illinois in winter). I have even struggled with the ability to stay motivated and focused on self-care practices like writing in a journal or meditating. So what could I do when I am in need of self-care?

What I believe is most important when engaging in self-care and maintaining one’s personal wellness is creating what works best for you! This could be a list of activities that you enjoy, a social network that you trust and find helpful, or a professional/work place that nurtures and fosters self-care practices. I have found that I am now beginning to create my own list of what works for me and for my partner during this difficult time. I have found that my list has not only began to help me and my partner process and navigate during his chemo treatments thus far, but my list has also become transferable in my professional life. I would like to share my list in hopes that my list will inspire readers to create their own list.

1. **Playing cards and games during chemotherapy treatments**: On the first day of treatment my partner and I had to be at the hospital for 9 hours while he received all his medications. I packed books, games and writing materials in case there was nothing in the treatment room. We found that playing card games and talking kept us occupied the whole time. It has now become a common practice every time I accompany him to treatment.

2. **Writing**: We write when we feel like writing. What we write helps us express our thoughts and feelings, some times it’s a word or quote, other times it is a paragraph or a blog. We write as much or as little as we need to.

3. **Planting flowers**: I have come to learn a lot about planting plants. I have shared this activity with my partner and found that it creates an alternative to walking outside when he is too tired and cannot be in the sun for long due to his treatments. It also allows us to share an activity that focuses us on the now and creates an opportunity for us to look toward positive outcomes in the future.

4. **Talking to family, friends, and colleagues**: I am an external processor. I need to talk to people often. I have found that I have created a great social network full of family members, friends, mentors, colleagues, and supervisors that I can come to and talk to about various things at various times. This is great because I can often get input, support, advice and encouragement from all my social supports as needed from who I need it.

5. **Set an alarm**: I have an alarm set on my phone so that I will eat. Yes, I have an alarm for that. As a doctoral student in a counseling program who works and is supporting my partner through a difficult time. Some basic needs have been ignored. By setting an alarm it has become a tool to keep me mindful of tending to my basic needs.

6. **Alone time**: even though it is difficult for me to be alone. I take time to just have me time. Even if it is just ten minutes drinking tea or engaging in a physical activity or workout on my own. I give space for just me to do and be me.

My hope is that my list will inspire others to create their own and minimize the idea and practice of self-care being a luxury when in fact it is a necessity!

Kristina Wilkerson, MA is a current doctoral student in the counselor education and supervision PhD program at Northern Illinois University. She is enjoying her journey in the counseling field!
The start of a new year brings a variety of new laws and amendments to existing laws that will impact professional counselors once they take effect in Illinois.

Thanks to diligent work in Springfield and suggestions from Illinois students, our budget may be up a financial creek, but we have adopted the pirogue, a native canoe made from a hollowed-out tree trunk, as the ‘official state artifact.’ The pirogue was historically used by members of the Illini tribe to navigate the region’s rivers and lakes.

“The pirogue reflects the importance of Illinois waterways to our history and development, while also recognizing the state’s namesake Native American tribe” Fine said in an April news release as the bill made its way through three committees, the House, and the Senate on its five-month journey to becoming law.

NEW LAWS
A number of new laws went into effect January 1, 2016:

Changes to the Confidentiality Act

Public Act 99-28, effective 1/1/2016, amends the Illinois Mental Health and Developmental Disabilities Confidentiality Act in two significant ways:

1. Amends the Mental Health and Developmental Disabilities Confidentiality Act. Provides that unless otherwise expressly stated in the Act, records and communications made or created in the course of conducting mental health or developmental disabilities services shall be protected from disclosure regardless of whether the records and communications are created in the course of a therapeutic relationship.

2. Provides that “record” does not include a reference to the receipt of mental health or developmental disabilities services noted during a patient history and physical or other summary of care. Provides that “therapeutic relationship”: (i) means a recipient of mental health or developmental disabilities services from a therapist; and (ii) does not include independent evaluations for a purpose other than the provision of mental health or developmental disabilities services.

Mental Health

HB 0217 created the Youth Mental Health Protection Act, effective Jan 1, 2016. Defines “mental health provider” and “sexual orientation change efforts” or “conversion therapy.” Provides that no mental health provider shall engage in sexual orientation change efforts with a person under the age of 18. States that a mental health provider shall not refer a client or patient to any individual for the purpose of sexual orientation change efforts, and that any sexual orientation change effort attempted on a person under the age of 18 or any referral made by a mental health provider shall be considered unprofessional conduct and subject to discipline by the licensing entity or disciplinary review board with competent jurisdiction.

HB 3599 Creates the Student Optional Disclosure of Private Mental Health Act which provides that all institutions of higher learning shall, at or near the time that an incoming student enrolls at the institution of higher learning, supply the student with the opportunity to pre-authorize in writing the disclosure of certain private mental health information to a designated person. States that all institutions of higher learning shall prepare a form for the purpose of such pre-authorization, and that all institutions of higher learning shall create a policy to ensure that every new student is given the opportunity to complete and submit the form if he or she so desires. Effective Jan 1, 2016
HB 4112 Amends the Illinois Police Training Act. Provides that the Illinois Law Enforcement Training and Standards Board shall create a standard curriculum for a certified training program in crisis intervention addressing specialized policing responses to people with mental illnesses. Further provides that officers who have successfully completed this program shall be issued a certificate attesting to their attendance of a Crisis Intervention Team (CIT) training program. Effective Jan 1, 2016

HB 2543 Provides that the Department of Children and Family Services must document its efforts to identify, locate, and provide notice to such potential relative placements and maintain the documentation in the child’s case file.

HB 3684 Creates the Foster Children’s Bill of Rights Act

Public Schools

SB 0226 Requires DHS and ISBE to develop a training program for case workers in every public school to register students who are developmentally disabled and qualify for services (under the PUNS list).

Subject to appropriation, the Department of Human Services and State Board of Education shall develop and implement an online, computer-based training program for at least one designated employee in every public school in this State to educate him or her about the Prioritization of Urgency of Need for Services database and steps to be taken to ensure children and adolescents are enrolled. The training shall include instruction for at least one designated employee in every public school in contacting the appropriate developmental disabilities Independent Service Coordination agency to enroll children and adolescents in the database. At least one designated employee in every public school shall ensure the opportunity to enroll in the Prioritization of Urgency of Need for Services database is discussed during annual individualized education program (IEP) meetings for all children and adolescents believed to have a developmental disability.

(d) The State Board of Education, in consultation with the Department of Human Services, shall inform parents and guardians of students through school districts about the Prioritization of Urgency of Need for Services waiting list.

Hospitals and Providers

HB 3848 Requires every hospital and health care professional to establish a billing protocol to ensure that no sexual assault survivor is billed for emergency or forensic services.

SB 1595 Creates the Music Therapy Advisory Board Act that must report recommendations for the certification, training, curriculum and best practices of music therapists. Note: The IMHCA Board has developed feedback to this advisory group recommending that music therapists be also licensed as LCPCs, LCSW, LMFT or Psychologists.

HB 1359 Amends the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. Provides that a health care worker licensed by the Department of Financial and Professional Regulation shall be automatically and indefinitely suspended at such time as the final trial proceedings are concluded whereby a licensee has been either convicted of, or has entered a plea of guilty or nolo contendere, in a criminal prosecution to a criminal health care or criminal insurance fraud offense, requiring intent, under the laws of the State, the laws of any other state, or the laws of the United States of America, including, but not limited to, criminal Medicare or Medicaid fraud. Requires that a certified copy of the conviction or judgment be the basis for the suspension. States that, if a licensee requests a hearing, then the sole purpose of the hearing shall be limited to the length of the suspension of the licensee’s license, as the conviction or judgment is a matter of record and may not be challenged.
ICA’s 7th Annual Southern Conference

Friday, March 24, 2017 • Collaboration & Courage: Uncertain Times & New Partnerships

DoubleTree by Hilton Hotel, Collinsville
1000 Eastport Plaza Drive, Collinsville, IL 62234
Tel: 618.345.2800

• 24 Breakout Sessions
• Workshop proposals should be submitted electronically by October 31, 2016
• See ICA website, www.ilcounseling.org for proposal form and registration information
In 2011, Amy Barth was a counseling graduate student actively seeking opportunities to develop her skills as a counselor and increase her knowledge for her future career as a Counselor Educator. Her Master’s program and course work as a doctoral student had not allowed her to receive training in teaching specific counseling theory. Ms. Barth looked for a training opportunity on Cognitive Behavioral Theory (CBT). She wanted better understanding of theoretical models as well as improved ability to instruct her future students about the differences among various counseling orientations. The workshop, Cognitive Behavior Therapy Workshop Level I: Depression and Anxiety, taught at the Beck Institute in Pennsylvania, was just the type of professional development she was seeking. But, as a student, how to get to the workshop and pay the registration fees was a concern.

**The solution …**

Ms. Barth completed an application for a Merlin W. Schultz Professional Development Grant from the Illinois Counseling Association Foundation. In November 2011, the Foundation awarded Amy a grant covering $1,000 of the $2,200.00 needed for registration, transportation, housing, and meals to attend the Workshop.

**The results …**

Ms. Barth put her Grant to work as she:
- Served as a Guest Lecturer on Cognitive Behavioral Theory for MA level counseling students at NIU (2014), DePaul University (2013), and NIU (2012).
- Presented at 2012 ICA Conference, “My Journey to the Beck Institute: CBT Principles, Model, and Conceptualization”
- Shared her knowledge and experience with her students and with other counseling professionals
- Joined the Foundation Board and served as Vice President during her tenure

Today, after earning her Ph.D., from Northern Illinois University, Dr. Amy Barth is an Assistant Professor in the Counselor Education Department at University of Wisconsin – Whitewater.

The Foundation is so proud of all of the grantees like Amy. In fact, in the 10 years the Foundation has awarded Grants to:
- 36 individuals
- a University Counseling Center
- two community based counseling services
- five professional counseling groups comprised of hundreds of members

To read more about the impact of Foundation grants, download a current grant application, and support the work of the Foundation visit the website; www.icafoundation.org.
I CA Chapter

Three-Time Foundation Grant Recipient

By: Melanie Rawlins, PhD & Amy Rasing

During the November 2015 Illinois Counseling Association (ICA) annual conference the Foundation announced that among this year’s grant recipients was the West Central Illinois Professional Counseling Association (WCIPCA). The Macomb-based ICA Chapter is a three-time grantee of the Merlin W. Schultz Professional Development Grant, having also been awarded grants in 2012 and 2013.

WCIPCA was founded in 1993 and has twenty-eight professional members. Current leadership includes: Angie Barker (President), Ellie Sivill (Treasurer), and Jim DiTulio (Secretary). The Chapter provides an annual educational workshop to members and others in the caring professions in Macomb and surrounding areas. The group meets on a monthly basis to offer a learning opportunity with a guest speaker. One of WCIPCA’s goals is to meet the educational and networking needs of professional counselors in rural western Illinois and to ensure affordable continuing education for members.

On March 11, 2016, WCIPCA hosted its annual workshop co-sponsored by the Illinois Counseling Association Foundation and the Illinois Mental Health Counselors Association. Held at Spoon River College, this year’s topic was The Human Magnet Syndrome: Why We Love the People Who Hurt Us. The presentation by Ross Rosenberg, M.Ed., LCPC, CADC, CSAT, had an attendance of fifty-three people from throughout the area representing a wealth of experience and contributions to the counseling field. Other timely and relevant workshops have included: Mindful Self-Compassion, Communication and Relationship Skills for Couples, and Eating Disorders. The knowledge gained in WCIPCA workshops, by participants, is applied in their work with clients and their families.

WCIPCA is just one example of how Foundation Grant funds are at work in our state daily and their impact is lasting. Other recent foundation grants include: a counselor-led teen substance abuse group offered by the Youth Service Bureau in Rock Island and a video series on the high end of the Autistic Spectrum. This video series provides counseling professionals with effective tools and increases awareness of the impact counseling can make in the lives of people on the Autism Spectrum.

Grant awards like these became possible when the Illinois Counseling Association Foundation became a non-profit, charitable organization in 2005. Since being established to fund professional development, research, and social programs, the Foundation has been able to make a significant impact on the availability of resources for professional counselors and counseling graduate students.

The Foundation Board of Directors is comprised of ten professional counselors, including three Foundation grantees and four of the original founding members: Dr. Melanie Rawlins (President and founding member), Dr. Stephany Joy-Newman (Vice-President), Ms. LaCleta Hall, M.S. (Secretary and founding member), Dr. Donna Kirkpatrick Pinson (Treasurer), Mr. Earl Bracey, J. D. (Director and founding member), Dr. Michael Illovsky (Director), Dr. Kenneth Oliver (Director), Ms. Roseanne Oppmann, M.S. (Director), Dr. Maricruz Ramos (Director), Dr. Dale Septowski, (Director and founding member).

Together, the board has over 300 combined years of experience as counselor educators, school counselors, student affairs personnel, and therapists in university counseling centers, private practice, and agencies. They also represent geographic areas throughout the State including; Chicago area, Rockford, Springfield, Macomb, and Quincy. In November 2014 they hired an Executive Director to help them build on their efforts to continue to put
Illinois Counseling Association

Foundation

Empowering Professionals ... Enriching Lives

Since 1978 Dr. Melanie Rawlins has held numerous positions within the Illinois Counseling Association (ICA). These include Governing Council over 19 years, conference Program Committee co-chair, ICA President (2002), and a number of task forces. She is a Founding Member and President of the Foundation.

In November 2014 the Foundation hired the first Executive Director, Ms. Amy Rasing. She holds a degree in Communications and Non-Profit Agency Administration. During her 28 year career in non-profit development and marketing she has held leadership roles in both local and national charities.

their tagline, Empowering Professionals... Enriching Lives, into action. This group is the driving force behind the Foundation's growth and financial ability to grant over $138,000 to counseling professionals and counseling graduate students in the past ten years.

Funds managed and utilized in grant making by the Illinois Counseling Association Foundation are available due to the generosity of donors who recognize that government funds are in short supply and yet the need for professional counseling services in Illinois has never been greater.

To learn more, apply for a grant, and support the Foundation's work visit www.icafoundation.org.
2017 ISCA Annual Conferences

Mark Your Calendars!!!

“The Power of Counselor Connections”
April 7, 2017
Bloomington, IL – DoubleTree Hotel

April 21, 2017
Rosemont, IL – Donald E. Stephens Convention Center

IMHCA
Annual Conference

featuring
Dr. Steven Hayes
March 10, 2017-Friday
One-Day Introduction to
ACT-A Brief Introductory Workshop
in Acceptance and Commitment Therapy

Dr. Fredrike Bannink
March 12, 2017-Sunday
Solution Focused Brief Therapy
for Common Client Problems

Northbrook, IL
Earn up to 18 CEs

For information or to register: T 815.787.0515 • F 815.787.0505
• myimhca@gmail.com • www.IMHCA.org
Upcoming Dates to Remember

September 2016

9/7/16 Using a Labyrinth for Self-Exploration and Healing – WCIPCA • Macomb
9/9/16 NCE/LPC Test Preparation – IMHCA (2 Days) • Schaumburg
9/10/16 Starting, Maintaining, and Expanding a Successful Private Practice – IMHCA • Skokie
9/24/16 NCMHCE/LCPC Test Preparation – IMHCA (2 Days • Skokie

October 2016

10/3/16 Addressing Advanced Issues In Counseling Supervision – IMHCA • Naperville
10/15/16 DSM-5®: Elimination of the Multi-Axial Diagnostic System – IMHCA • Naperville
10/21/16 Evaluation and Assessment In Counseling Supervision – IMHCA • Chicago
10/23/16 Executive Committee Meeting • Lombard

November 2016

11/3/16 Governing Council Meeting • Springfield
11/3/16 ICA’s 68th Annual Conference (3 Days) • Springfield

December 2016

12/2/16 NCE/LPC Test Preparation – IMHCA (2 Days) • Skokie
12/2/16 Use of Data in Schools – ISCA • Springfield
12/3/16 Starting, Maintaining, and Expanding a Successful Private Practice – IMHCA • Chicago
12/8/16 Addressing Advanced Issues In Counseling Supervision – IMHCA • Naperville

Check out the ICA Calendar for Additional Workshops and Dates for 2017.
Information

- As a Professional you need to keep informed as to what is happening in all areas of your chosen field.
- Educationally, you need to keep current with all developments in the scope of your work. Learning new models and methods doesn’t stop in college or graduate school.
- Politically, you need to know what laws affect you and your profession. You need to know what bills are being considered that have an impact on your work, and what you can do to influence legislation to promote your profession.

How does ICA help you?

- ICA publishes a quarterly newsletter and an annual magazine, the Illinois Counselor, that keeps you up to date on all aspects of Counseling in Illinois and on the National front.
- ICA’s web site: www.ilcounseling.org keeps you current in this fast paced professional world with information at a click of your mouse.
- ICA’s blast email system sends you notices about items of interest quickly and efficiently, so you always know what’s going on in the Counseling world.
- Follow ICA on Facebook, LinkedIn and Twitter!

Professional Development

- Professional Associations offer their membership quality continuing educational opportunities. Your membership not only provides you with significant discounts on the Conferences and Workshops offered, but more importantly, makes those Conferences and Workshops possible, so when you need continuing education, there are quality workshops for you to choose from.
- ICA hosts a 3 day Annual conference providing as many as 80 different workshops on a variety of interesting topics.
- ICA’s 14 Divisions and Chapters host workshops throughout the year on topics from NCE and NCMHCE test preparation and Counselor Supervision, to workshops on a variety of specialty topics like College and Career Counseling, School Counseling, Counseling for the Elderly, and many more.

Members’ Only Benefits

- All Professional Associations offer their members a little something extra, only for them.
- ICA offers members a Job Listing service that is accessible only to ICA members. We also offer a registry for LCPC’s in Private Practice to list their Mental Health practice for public access as well as a Speaker Registry that allows our members to list themselves as being available for speaking engagements.
- New to the ICA website is the College and Career Counseling Registry. A place where College and Career Counselors can list their services to the public.
- Also, new to the ICA website is the “Book Nook” where members can showcase their publications and books are featured on a rotating basis on the ICA Home Page.

Networking

- Professional Associations provide many opportunities for networking and interaction with your fellow professionals. Whether it’s through working together on a committee, attending meetings, workshops and conferences, or chatting on the web site forum, you can make many connections that can lead to increased knowledge or a better position.
- ICA through its’ Chapter and Division activities as well as the ICA annual conference gives Counselors the opportunity to network with up to 500 other Counseling professionals.
- ICA also offers the ICA Forum, our web based chat room, for you to use 24/7, which gives you the opportunity to network with over 2,600 of our members!

Advocacy

- The whole is always greater than the sum of its parts.
- ICA is vigilant in our monitoring of legislation that can affect the Counseling Profession in Illinois and nationally. ICA is a recognized voice in Springfield. ICA is Your Voice in Springfield!
- The over 2,600 Counseling Professionals that make up the Illinois Counseling Association can share in the pride that they are, through their membership, supporting a high level of professionalism and competency in Illinois Counseling. Together with you, the Illinois Counseling Association is dedicated to making lives better through community service, educational opportunities and political advocacy.
- Being a part of ICA gives you a voice in shaping counseling in Illinois. Join TODAY!

Promote Professional Counseling In Illinois

Join The Illinois Counseling Association

P.O. Box 367 • DeKalb, IL 60115-0367
877.284.1521 • fx 815.787.0505
IL.counseling.org@gmail.com
www.ilcounseling.org

If you’re asking yourself why join a Professional Association, then read on!
# Illinois Counseling Association Membership Application

Name ____________________________________________

Address ____________________________________________

City ___________________ State _______ Zip _______

Work Location __________________________

Position __________________________________________

Business Address __________________________________________

City ___________________ State _______ Zip _______

Phone (H) _______________ (W) _______________ (M) _______________

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## Your Work Setting

- [ ] Elementary School
- [ ] Middle School
- [ ] Secondary School
- [ ] Post Secondary Inst
- [ ] Community Agency
- [ ] Rehab Program/Agency
- [ ] Business/Industry
- [ ] Association/Foundation
- [ ] Private Practice
- [ ] State/Local Government
- [ ] Counselor Educator
- [ ] Other _______________________

## ICA Membership

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**Donation to the Illinois Counseling Association Foundation**

**TOTAL PAYMENT**

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## Payment by Check or Credit Card (AMEX/Discover/VISA/MC)

Card Number ____________________________

Exp. Date ___________ V-code #*  

*3 or 4 digit security code

## Ethics Pledge:

As an Illinois Counseling Association member, I do hereby pledge to uphold the American Counseling Association Code of Ethics and Professional Standards of Practice at all times.

Applicant’s Signature ____________________________

Date ____________________________

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**Required for Student Membership:** A Student must be enrolled for at least a half-time basis of six semester hours of credit.

Student Signature ____________________________ Date ____________

Faculty Signature_________________________ College ____________

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**Thanks For Supporting Professional Counseling In Illinois!**
Free at the conference: Professional Digital Photo for your personal or professional use.

75 Workshop Presentations for up to 18 CEs or PDs for Counselors, Social Workers, Psychologists and Marriage and Family Therapists.

Thursday Full Day Pre-Conference Workshop: *Strengthen Families, Improve Relationships, Increase Resilience.*

Two Special Half Day Workshops:
* *Mindfulness & Neurocounseling: Brain-Based Approaches to Building Compassionate Understanding of Self and Others*
* *Confidentiality and the Law*