



Association for Child and Adolescent Counseling in Illinois

ACACI Fall Newsletter November, 2018



Helping Children and Adolescents Thrive!



Message from the President

**Peggy
Mayfield**

Dear Valued Members,

My message to you can be found on page two this month!

We have some exciting news in store for you!

Kind regards,

Peggy

Peggy Mayfield
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Helping Children & Adolescents Thrive!

@Children_Thrive
www.ACACIllinois.com

Join the Association for Child & Adolescent Counseling In Illinois!!! Meet us at the 70th Annual ICA Conference November 8 - 10, Westin Chicago Northwest Itasca, IL

ICA's Continental Breakfast, November 10 @ 7:30 am
ACACI Membership Meeting, November 10 @ 4:30 pm
ICA Awards Ceremony, November 10 @ 6:45 pm
https://www.ilcounseling.org/page/2018_ICAConference

Helping Children & Adolescents Thrive!!! Look for the Purple & Orange Balloons!!

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ASSOCIATION FOR CHILD & ADOLESCENT COUNSELING IN ILLINOIS

Dear Valued Members,

Welcome to our fall newsletter!

We are excited to announce our first annual Association for Child and Adolescent Counseling in Illinois conference, scheduled for March 1, 2019, at the Nineteenth Century Charitable Association, 178 Forest Avenue, Oak Park, IL. Our conference theme is **Helping Children and Adolescents Thrive!** Please save the date and plan to join us in the spring!

We are looking forward to meeting many of you at the ICA conference that is being held at the Westin Chicago Northwest, 400 Park Blvd. in Itasca, IL. on November 8-10th. Our ACACI membership meeting will be held at the ICA conference on Friday, November 9th at 4:30 pm. Please plan to attend to hear about ways you can be involved and our efforts to support all members! We will likewise have a presence at the ICA Continental Breakfast on Friday. Look for the purple and orange balloons to find us!

Please reach out to me if you have questions or if you would like to be involved!

Helping Children and Adolescents Thrive!

Warm regards,

Peggy

PRESIDENT

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TF-CBT Play Interventions Trauma-Focused Cognitive-Behavioral Therapy for Children Exposed to Trauma

Cecily M. Neita, MA, LPC, NCC



Ms. Cecily M. Neita is a Child and Adolescent Therapist at CLS Comprehensive Services in Flossmoor, Illinois. She is also an Adult Transition Instructor at Thornridge High School in Dolton, Illinois. Ms. Neita received her M.A. Degree in Counseling from Chicago State University.

Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT)

Trauma-focused cognitive-behavioral therapy (TF-CBT) model was developed by Cohen Deblinger, and Mannarino (2006) to integrate research-based programs developed to address what was found to be effective in reducing symptoms in children following sexual abuse. The model was later expanded to other trauma (traumatic grief, terror, physical abuse, life threatening illness, disaster) as well.

TF-CBT is a short-term treatment approach that can work in as few as 12 sessions. Individual sessions for children ages 3 to 12 and for the parents or caregivers, as well as joint parent-child sessions, are part of the treatment. Forming a therapeutic relationship with the child and parent is critical to TF-CBT.

Play Therapy Interventions

Psychoeducation is a component of TF-CBT and is provided to children and their caregivers about the impact of trauma. Play interventions are helpful to teach the child about trauma. I use The What Do You Know Game, it contains cards with animals to be matched with questions on topics such as physical and sexual abuse, domestic violence, common reactions, safety and general questions.

Parenting Skills is a component of TF-CBT. I provide parenting strategies through teaching behavioral interventions such as praise and contingency plans/behavior modification. This component can be initiated by the therapist by using the "Me and my Mom Technique" (Crisci, Lay, & Lowenstein, 1998) which makes apparent the changes that have occurred in the parent-child relationship due to the trauma.

Relaxation is a component of TF-CBT. Children are taught ways to manage their anxiety through relaxation. Breathing interventions and progressive muscle relaxation are used. I use the Four-Square Breathing. The child draws a square and labels the corners; breathe in, hold it, breathe out and do nothing.

Affective expression and modulation teaches children to identify and regulate their emotions. Oftentimes children can become overwhelmed by emotions, and this TF-CBT component teaches skills to be able to successfully express and manage their feelings. I use positive self-talk, thought stopping and positive imagery.

Cognitive Triangle is a component of TF-CBT; it involves identifying the connections between thoughts, feelings, actions and helping children develop the ability to choose thoughts that could bring them to their desired feelings and actions. I use the How I Think, Feel and Behave activity.

The component that has been described as the most important by children and their parents when assessing the effectiveness of TF-CBT is the creation of the Trauma Narrative and the processing thereof (Cohen, Mannarino, & Deblinger, 2006). The trauma narrative is developed in therapy over many sessions. The telling of the traumatic experience (creating the narrative) can be done with the child playing out the trauma while dictating to the therapist the trauma narrative. I use puppets with children to act out the trauma.

Vivo exposure reminders are used to help children overcome their avoidance of situations that are no longer dangerous, but which remind them of the original trauma. For example, a child who was sexually abused in a bathroom might now be afraid of all bathrooms and be unable to use bathrooms at school. This might

eventually lead to school refusal, which may impair the child's functioning. In order to help this child return to school, the child needs to learn that not all bathrooms are dangerous, and that school is a safe place. A vivo plan can be created to decrease this unnecessary avoidance.

Conjoint Parent-Child component of TF-CBT involves the parent and child working together to improve communication and learning how to discuss the abuse in a healthy and therapeutic manner.

The final phase of the treatment, enhancing future safety and development, addresses safety, helps the child to regain developmental momentum, and covers any other skills the child needs to end treatment. I use role playing with puppets and dolls as well as specific interventions addressing safety concerns.

The integration of play therapy interventions with TF-CBT allows the therapist to provide clients with engaging, developmentally appropriate, empirically validated treatment for trauma.

- *Cecily Neita*



Contact Greta Nielsen if you would like information on hosting a networking event:

gretan@clinicalcareconsultants.com



October Networking Event Attendees: Monique Johnson, LPC Upswing Counseling; Brendan Bell, LCPC Upswing Counseling & Cherry Hill Counseling; Karolina Hogueisson, LCPC Private Practice; Blake Osborne, LCSW Private Practice; Corey Lariscy, LPC, NCC Owens & Associates Counseling & Therapy Center; Andrew Fishman, LSW Jewish Child & Family Services; Kyla Dannelke, LCPC Psychotherapy Associates of Chicago, & Norwegian American Hospital; Peggy Mayfield, President ACACI; Leslie Contos, LPC, NCC, CCMHC, Homeschool Counseling & President-Elect ACACI; Greta Nielsen, LCPC, NCC Clinical Care Consultants & ACACI Outreach.

Our Third Networking Breakfast was great fun!

We had a wonderful turnout for our third breakfast networking meeting! Member, Leslie Contos of Chicago opened her office and hosted our dynamic exchange of ideas and resources. We hope to see more of you at our next meeting to be held in March 2019 in the North Suburbs with board member Laura Doyle. More details will be sent as we get closer to the date.

2018-19 ACACI Networking Events

- **April 2018** Northwest Suburbs: host was Greta Nielsen. Schaumburg, Einstein's Bagels
- **July 2018** Far South Suburbs: host was Karolina Hogueisson. Orland Park, Counseling Office
- **October 2018** City of Chicago host was Leslie Contos. Chicago, Counseling Office
- **January 6, 2019**, Arlington Heights, TBD host Laura Doyle



Gregg Bagdade, Master's student, Clinical Mental Health Counseling at Concordia University.

The Prevalence of PTSD in Children and Adolescents

Becky is a nine-year old girl living in a suburb of a large city. She loves soccer. She also likes to eat pizza. What she doesn't enjoy is watching her mother getting beaten by her boyfriend on a regular basis. She sees the hitting, the yelling, the crying, the blood. Anyone would feel unsettled at these horrific scenes, but how does this affect Becky over time? These events may result in Becky receiving a positive diagnosis of Post-Traumatic Stress Disorder.

When the general public thinks of Post-Traumatic Stress Disorder (PTSD), their mind immediately thinks of war embattled veterans who have succumbed to gun battles and large artillery fire. News articles tend to write about how these individuals have come back from their service with increased levels of mental health issues. Often these individuals will

be diagnosed with PTSD.

There is a growing body of research showing that the effects of trauma and abuse on children and adolescents should be looked at under these circumstances as well. In fact, diagnostic criteria for children have been added to PTSD in the DSM-5 to include repetitive play, frightening dreams with no recognizable content, and reenactment of the traumatic event(s) (American Psychiatric Association, 2013). These criteria are meant to provide practitioners with a framework to help properly diagnose children with PTSD.

According to the landmark Adverse Childhood Experience (ACE) Study, criteria such as emotional/physical/sexual abuse, divorce, mental illness, substance abuse, a battered mother, and an incarcerated family member were used to see how children under the age of 18 were affected. The staggering results revealed that even one of the eight adverse childhood experiences will increase the risk of ever attempting suicide from 2- to 5-fold (Dube, S.R., Anda, R.F., Felitti, V.J., Chapman, D.P., Williamson, D.F., Giles, W.H., 2001). These factors provide a strong correlation between children having horrifying experiences within their home and suicide. As children get older, they may start to manifest symptoms that are more akin to how an adult would respond with a PTSD diagnosis. Symptoms that may arise are nightmares, flashbacks of the traumatic event, intrusive thoughts, anxiety, and hyper vigilance (American Psychiatric Association, 2013).

Unlike the war scenes that our military personnel may experience, our children may be unwilling participants in a bevy of unfortunate events. These experiences are major factors in the growth of children. During these delicate years, exposure to such atrocities may affect their future indefinitely. Another example that could lead to PTSD is the recent uptick in gun violence, such as school shootings. There are many children who are exposed to these horrific scenes as they unfold within their neighborhoods or their schools. Ultimately, these environments will make the children much more prone to PTSD.

It is our responsibility as practitioners to educate ourselves in not only the diagnosis and recognition of PTSD in children, but the treatment that must follow for these individuals. Successful treatment of these individuals may include Cognitive Behavioral Therapy (CBT). Cognitive distortions, or misinformed thoughts, may arise regarding the traumatic event (Foa, E.B., Keane, T.M., Friedman, M.J., Cohen, J.A., 2009). CBT retrains the brain on how to better deal with these thoughts. It is important that children are assessed with the same level of attention to this diagnosis as are adults. The hope is children, like Becky, will be properly diagnosed and find the treatment they so badly need. With this knowledge, we can provide early intervention for these children and adolescents, so they may be able to function more effectively as they develop emotionally and interpersonally.

Newsletter Article Submissions

Please consider submitting an article for the ACACI newsletter. Articles may be from 2 paragraphs to 2 pages and must relate to counseling children and adolescents.

Submission deadline for the **February** newsletter is January 31st.

Please send questions or article proposals to lesliecontos@gmail.com

Join ACACI!!

Interested in Joining?

ACACI is a division of the Illinois Counseling Association (ICA). Therefore, you must be an ICA member to join. Please visit the ICA Website to become a member and add ACACI as your division!

[https://www.ilcounseling.org/general/register_member_type.asp?](https://www.ilcounseling.org/general/register_member_type.asp)



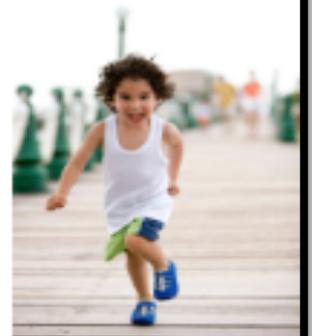
FIRST ANNUAL ACACI CONFERENCE

Helping Children and Adolescents Thrive!
Nineteenth Century Charitable Association

178 Forest Avenue, Oak Park, IL

Call for Proposals Open Until October 31
At the Following Link:

<https://goo.gl/forms/YGDlgGeOp8R3Y4ME3>



Member Resources

October is National Bullying Prevention Month: Let's encourage communities to work together to stop bullying and cyber bullying by increasing awareness of the prevalence and impact of bullying on all children of all ages. Follow the link to find how you can participate in raising awareness and help to change the culture by putting an end to all forms of bullying! <https://www.stompoutbullying.org/campaigns/national-bullying-prevention-awareness-month/>

October 24th is Unity Day sponsored by Pacer.org Make it **ORANGE** and make it end! Come together in one giant **ORANGE** message of hope and support, wear **ORANGE** to color our nation, and even the world, visibly showing that our society believes that no child should ever experience bullying. <https://www.pacer.org/bullying/nbpm/unity-day.asp>

Post a Mirror Message: Join a movement with DoSomething.org members to spread positivity in the schools! Post encouraging sticky notes on mirrors, lockers, desks, classroom halls & doors to boost someone's self-esteem. <https://www.dosomething.org/us/campaigns/mirror-messages/action>

Here are some videos on coping with bullying, defeating the bully meditation, and meditation for bullying and Self-Esteem

<https://youtu.be/zhY1dcZhszA>

<https://youtu.be/j4-TX2x82gA>

<https://youtu.be/j4-TX2x82gA>

November is National Gratitude Month - From the Greater Good Science Center at the University of California, Berkeley, we know that the benefits of practicing gratitude are: Stronger immune systems and lower blood pressure, Higher levels of positive emotions, More joy, optimism, and happiness, More generosity and compassion, Less feelings of loneliness and isolation. Here's a free Gratitude Worksheet you can give to your child/teen <https://kidshealth.org/en/teens/gratitude-worksheet.html>

National Stress Awareness Week, November 5th-9th – Mindfulness has been a proven technique to mitigate the effects of stress. Here are 25 Mindfulness Exercises for kids and teens <https://positivepsychologyprogram.com/mindfulness-for-children-kids-activities/>

November 13th is World Kindness Day – Be kind to others, and most importantly be kind to yourself. Here are some loving kindness meditation affirmations to say to yourself, to others and to the world <http://positivewordsresearch.com/embody-the-energy-of-loving-kindness-repeating-these-words/>

November 16th is International Day of Tolerance - "Tolerance is an act of humanity, which we must nurture and enact each in own lives every day, to rejoice in the diversity that makes us strong and the values that bring us together." — *UNESCO Director-General Audrey Azoulay* Here are some free activities for teaching tolerance to kids and teens <https://docs.google.com/viewer?url=http://www.mmsa.info/sites/default/files/downloads/pages/Tolerance.pdf>

Thanks, and have a great weekend!

We hope to create a list of on-line resources and tools that help our members provide quality care to our clients. You can forward any recommended resources to **Greta Nielsen, MA, NCC, LCPC**
GretaN@clinicalcareconsultants.com

[ACACI]

- The Association for Child and Adolescent Counseling in Illinois is a division of the Illinois Counseling Association. ACACI is also a state affiliate of the national Association for Child and Adolescent Counseling; a division of the American Counseling Association.

**[Mission & Vision]**

- Our mission is simple; to help children and adolescents thrive.
- Our vision is to connect our members with the most current and evidenced based resources, provide a support network, and offer ongoing opportunities to be involved.
- We are always looking to improve our services, please send ideas for events, presentations, and membership benefits to mayfield.peggyc@gmail.com

[Stay Connected]

- Website: www.acacillinois.com
- Twitter: @Children_Thrive
- Facebook: ACAC in Illinois
- www.ilcounseling.org

**[Benefits of Membership]**

- ICA Conference at the Hilton in Lisle/Naperville, October 9-11, 2017 with CEUs
- Serve on a Task Force
- Write an Article for the Newsletter
- Webinars on current topics in child and adolescent counseling – free of charge for members
- Have an ACACI speaker at your organization or university to learn more about ACACI

*ICA Membership is required for ACACI membership

ORGANIZATION	PROFESSIONAL	RETIRED/ STUDENT
ICA	\$65	\$37.50
ACACI	\$20	\$10

Name: _____
 Address: _____
 City, State, Zip: _____
 Work Setting: _____
 Position: _____
 Cell Phone: _____ Home Phone: _____
 E-Mail: _____
 License: (circle one) LPC LCPC License Number: _____
 *Student Members – Name of graduate school: _____

Payment by Check or Credit Card

Card Number: _____
 Exp. Date: _____ 3 or 4 digit Security Code: _____

Mailing address: Illinois Counseling Association - PO Box 367, DeKalb, IL 60115

Member Benefits

We are excited to offer members a variety of benefits such as:

- Serve on a task force
- Serve as an Emerging Leader
- Write an article for the newsletter and get published!
- Attend ACACI conferences
- Attend free ACACI webinars or
- Have an ACACI speaker at your organization or university to learn more about ACACI.

Please let me know if there are other benefits you would enjoy!

Are you looking for other ways to get involved? We have so many opportunities for you!

Please contact me at mayfield.peggyc@gmail.com or 217-972-7036 if you have questions or wish to serve in some capacity on the leadership team!

I would love to hear from you! Kind regards, *Peggy*