Stay Connected!

It’s finally here! Please enjoy the 7th Edition of our MHCBM Insider. As we wrap up a great year, we would like to take a moment to reflect on our rapidly evolving Program and acknowledge all the people who make it a great success! Our tight-knit program is not only driven by the students, but also guided by our core faculty, adjunct professors, and staff. We truly appreciate their academic knowledge, clinical expertise and emotional support.

We hope you take advantage of this Newsletter to keep our MHCBM Community updated on your new endeavors, and to network with Alums, graduating students and current students.

Many thanks to all who have and continue to contribute to the program and to this Newsletter! CHEERS!

Your Student Representatives 2011-2012
mhbmreps@bu.edu

The Director’s Corner

As you know, the mission and vision of our program is to train clinical mental health counselors with a complementary background in behavioral medicine and neuroscience. This includes training clinicians to be able to counsel diverse clients across the lifespan. In order to accomplish this goal, we have been very busy this academic year. We welcomed new students in September and are now completing recruitment for the next academic year. We’ve successfully recruited a new core faculty member, Carryl Navalta, Ph.D., which expands our ability to counsel clients across the lifespan.

We launched a vastly improved website at www.bumc.bu.edu/mhbm, which will facilitate sharing information about the program, faculty, students and alumni. We are beginning the process of intensive self-study designed to achieve accreditation. We are refining our efforts toward student learning outcomes, which we will implement next year and most likely will include a portfolio of students work. We have implemented a new course and program evaluation system online so that we are better able to capture data from students and make changes as needed. We are offering new course options for students this academic year and expanded opportunities for clinical and research fieldwork.

Finally, we are particularly pleased to award degrees to students who will complete the program in May and hope to help launch them in meaningful careers. At the end of the day, our program is successful if we are able to inspire, train and help launch graduates as clinical mental health counselors. No program, faculty, student or alumni are perfect. Our faculty and staff always strive to do better and be better. It’s a little cheesy, but I always loved the line from that noted philosopher, Jack Nicolson, “you make me want to be a better man”. We hope our Program makes all of us “better men and women” including faculty, staff and students.

Sincerely,
Dr. Stephen Brady

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CURRICULUM CORNER

Somehow the years go quickly and it's already time for the yearly newsletter! It's been another busy and productive year for us in the program. Our most exciting news has been welcoming Dr. Carryl Navalta as our newest core faculty member. Dr. Navalta's areas of expertise are with children and adolescents, and he has filled an important gap in our program with regard to that area. We're thrilled to have him with us.

I have continued to keep busy with classes, teaching first year and second year students. Ethics and BMed continue to fascinate me, and I've really enjoyed it when alums have passed on some of the medical and ethical dilemmas that have presented themselves post-graduation. The issues really come alive when I can say that these are things our own alumni are experiencing.

Our HIV prevention study continues to go well. Our clinical staff have done an impressive job with recruitment and retention of a very difficult population. Also, in the past year we were able to hire Kathleen Reid, who graduated from our program in 2008. We're thrilled to have her back. I have been most interested in reviewing the data we've collected on women, trauma, and sexual risk-taking, and we have found some really compelling findings related to gender and risk.

In my personal life, my daughter will be graduating from kindergarten in June, and my son will be three in the fall. It really does fly.

A big thank you to this year's student reps – Kim Phan, Joelle Emery, Liz Piper, Coley DiCecca, Charlie Patten, and Amanda Jacobson. Your work is always, always appreciated.

And heartfelt congratulations to this year's graduating class. It's always bittersweet, but we're proud of you and can’t wait to hear about the next chapter.

CLINICAL CORNER

This has been an exciting and extremely busy and vibrant year clinically. We have officially reached a new and exciting goal this year. We know offer clinical training opportunities across 160 programs!! To think when I began in this program we had 6 students and 5 placements. This academic year alone 29% of our first year students have conducted their training in new programs and 34% of second year students are pioneers in some of our new internship programs. We have expanded and revitalized our training to include specialized programs for working with culturally specific populations, such as Arbour’s Latino Mental Health PHP Program, Fenway Community Health Center, which services the LGBTQ population, and Dorchester House Multi-Service Center. We are currently in the works of also developing an internship Program with BMC’s Boston Center for Refugee Health. We have also expanded our work with children, adolescents, home based services, and geriatrics. As always our students continue to be appreciated, respected, and valued in their field placements. It was just recently during a site visit when a supervisor commented that of all the trainees they work with across all universities in the Boston area she considers our students to be “the most well trained, achievement and team oriented trainees that she has ever seen.” Go MHCBM!

On another note I can’t believe it, but as of this coming August I will have been with the Mental Health Counseling and Behavioral Medicine program for 10 years. It has been quite a decade. It has been such a pleasure and a gift to work with every student that has walked through our doors. I remember beginning here with a total class size of 19 and here we are today. While I hope that I have impacted your training in some way, please know that every single one of you has impacted me personally and professionally in a profound way. You have taught me so much about being a supervisor, clinician, advisor, and just an ordinary human being. Thank you for all that you have given to me and for all that you have given and continue to give to your clinical communities. I am so proud of the work that you do. Congratulations to the class of 2012!
Dr. Navalta
Associate Professor
Child & Adolescent Psychotherapy

I am both proud and honored to be the newest core faculty member of the MHCBM Program. Although I have been onboard for only a couple months, I have come to realize that our program is 'one-of-a-kind' with a dedicated and talented cadre of students, an irreplaceable staff, and a supportive and vested faculty who create and sustain the program's integrity and excellence.

So far, I have enjoyed my interactions with our students in my child therapy course and internship supervision, especially during those moments when I 'see' that they are truly immersed in learning. I've also cherished the collegial relationships with my fellow faculty members. Based on these initial experiences, I fully expect to become a mainstay of the program for years to come by continuing to impart my passion for the field to our wonderful students – the next generation of mental health counselors!

Dr. O’Hern
Professor Emeritus
To The Class of 2012

Graduation is a time to celebrate your successes as a student and as a clinician with your family and loved ones, but it is also a time to take pause and look at the future. You are entering a profession that is fraught with challenges including, but not limited to, budget and personnel cuts, seriously ill patients who need our care and the demand for outcome measures that can help the public understand our mission.

You are talented clinicians and the mental health counseling field needs you. Find your niche, obtain the supervision and experience you need and become the leaders our profession requires. We are proud of you and pleased that you are about to become MHCBM alumni. Please keep in touch, let us know where you are and what you are doing, and come back and visit. Carpe Diem!

Mrs. Mark
Program Coordinator

Dear Students,

What an exciting year it has been for me, in January 2012 I was promoted, to Program Coordinator in the MHCBM program and celebrated my 17th year at Boston University.

In February, we launched our new program website. I played a significant role in the development and creativity of our program website, hopefully by now I anticipate that all of you had the opportunity to review it. In between the holiday events, open house sessions, recruitment events, and graduation, I have always tried to stay connected with all of you, even if it was only to make sure, all of you have the administrative support that was essential during your time spent in the program. I realize that my position does not allow me enough time to connect with each one of you the way I would like to however, there were those special times when student’s would graciously stop my office, just to see how I am doing, those moments will never be forgotten with the graduating class of 2012.

Next year, I look forward to being more activity involved with the students by taking on a more committed role in working with the student representatives, while continuing my relationship with our alumni.

To the graduating “Class of 2012”, I want to openly congratulate all of you in your accomplishments, as you venture off into the world, I would like leave you with this thought, “No matter where life may lead you, know that you are well prepared for the road ahead”.

Best wishes to you all in your future endeavors.

Mrs. Bernice R. Mark
One of many strengths I see in the MHCBM program is that each of you enter and complete the program as part of a small cohort of students. This model promotes connection, I hope you’ll stay connected for the rest of your lives to some of the students and faculty you’ve come to know here.

I thought about the nature of connection the other day when I went out to lunch with my husband, and I observed four kids, probably high school students, sitting together in a small booth. Each one had a laptop up and running. Each one was plugged into some kind of iPod or MP3 player. Several were wielding iPhones, which appear to have replaced Blackberries, which I understand came to be known as ‘Crackberries’, given the speed with which some people become addicted to their use and the panic they experienced if their access to the device was blocked. Four people, eleven electronic devices among them, and I don’t think they exchanged a single word that hour. The kids did smile from time to time, and occasionally elbowed each other to point out something on a screen, but I admit, at first I was horrified. Why can’t they put down these devices and actually have a conversation? How can they process information from so many sources simultaneously? What does this tableau of disconnection say about our culture? This is terrible!

At that point in my rant, my husband looked up from his iPhone. “They’re studying together,” he said. “What’s the big deal?”

I know. If I can get more help mastering technology myself, I might have been able to respond to these kids with empathy and curiosity instead of judgment.

We do need each other. When you graduate from this program, you’ll need the support of a community as you reckon with organizational and individual challenges in the practice of mental health counseling. I like what Marsha Linehan has to say about the importance of community. When she was interviewed about her work with people in pain who engage in parasuicidal and suicidal behavior, her advice was this:

“I think therapists have to believe in their clients, that you have to find the strength and the capability that’s there and amplify it; you have to believe they can make it. Then, you have to believe in yourself, and find the capability and effectiveness within yourself, and amplify that, bring that out also. Then, when you lose all faith—and take it from me, everyone does—you’ve got to have someone who believes in you, and you’ve got to talk to them. You’ll believe in yourself again, and you’ll believe in the client again. There’s got to be a circle of believing.”

Let’s be part of each others’ circle of believing. I hope you’ll stay in touch. Call me, drop in to talk, email. And I admit, I have learned how to text and g-chat. It’s all good.

Janice Furlong
jfurlong@bu.edu

Dr. Erdos
Psychopharmacology

Hey there to the Class of 2012! My deep felt congratulations to all of you for reaching this point. Now the real fun begins!

I too have found myself “graduating” in a sense, leaving the VA Hospital in West Roxbury after 7 plus years to take a position at the Beth Israel-Deaconess Hospital on their medical-psychiatry service. But don’t fret, don’t worry - I promise to remain faithful and a part of the BU MBHBM Program. I have been teaching psychopharmacology for the program for 11 years now, and each year I find myself impressed by your diversity, drive, interest and passion. This year is no different. May all of you go out and do some good, working with people, getting to know them, their lives. Always remember to listen to your patients. They know themselves best; they may not know that, but in time, with patience, persistence, and listening, you will never be lost.

To all of you, thank you for being a part of my class and this program. I have enjoyed working with all of you, getting to know you, answering your questions, and you answering mine. Please keep in touch. I look forward to hearing about all the great things you all do. CONGRATULATIONS!

(And please come to a show, support local music!)
Dr. Kates
Family Therapy & Human Sexuality

It’s been wonderful to watch you all grow from our first techniques class to all the smiles during Human Sexuality to the accomplished clinicians you became during Family. I’ve been so impressed to see your skills grow these last two years. Our discussions have always been stimulating. I think I always will remember the presenter in our Human Sexuality Class that scared me!

I hope you look back at your time in the program with fondness and remember some of the haunting words you heard from us like, "you'll see someday!"

I hope your post-graduation plans bring you much joy and happiness.

For me, I am preparing to be a high school Dad; the years are flying by. And, it’s so much fun to tell Dr. BG, "You'll see what I mean in a few years when your daughter starts talking about all these things!" and listen to her reaction.

Enjoy these last few months and the special friendships you have made the last two years!

Professor Suvak
Group Dynamics & Processes

This year’s incoming class will always have a special place in my heart! As a new teacher to this program, I was hopeful that the students in my class would feel as passionate and excited about the work as I do! What happened, in fact, was that my own passion for clinical work and teaching grew immensely! Much of this was due to the students in my class. I was so impressed and delighted at their eagerness to learn, willingness to take chances and trust that the process would work for them. I loved teaching Group, and I can’t wait to do it again in the fall.

Since the class, I have continued to work in my private practice. I am very excited about putting together a short-term group for new moms who are trauma survivors. I also continue my work with the Boston Area Rape Crisis Center, currently working with local childcare center staff and parents around healthy sexual development and policies around safety. I am looking forward to a great summer and a new class in the fall!

Dr. Joseph
Neuroscience and Human Growth & Development

Last year, I started to teach Neuroscience to first year MHCBM students, in addition to teaching Human Growth and Development in the second year. I’ve enjoyed teaching neuroscience, and hope I have helped make it relevant to students’ future careers. Teaching a major course in the first year of the MHCBM curriculum has also allowed me to get to know students a lot better, which has been a thoroughly positive experience! I wish the best to our latest graduating class, and hope you will keep in touch and consider me a resource as you pursue your careers and future studies.

Apart from teaching in the MHCBM program (and teaching biostatistics for Graduate Medical Sciences), since last May I have been working as the lead psychologist on a NIH-funded, multi-site study investigating the neurocognitive and neuro-behavioral outcomes at age 10 years of 800 children who were born at extremely low gestational age. The primary aim of this project is to determine if biomarkers related to neural inflammation at birth in low gestational age infants predict less favorable outcomes in later life. One of the most intellectually exciting and rewarding aspects of my role on this project has been to work with clinicians and scientists from many different disciplines, not only psychology, but neonatology, neurology, radiology, and public health.

My experience on this project brings to mind the strongly interdisciplinary nature of the MHCBM curriculum, which I expect will open similar opportunities to our graduating students.

www.bumc.bu.edu/mhbm
Jennifer Driscoll, Class of 2011
I took my licensing exam on August 1st, 2011 and passed. I am currently collecting supervision and direct hours, so hopefully, at this rate, I will be licensed in 2013 in MA.

I currently work as a mental health counselor in an Early Intervention setting - I work with both parents and children. I work with parents regarding anything - whether it’s getting on Masshealth/applying for SSI, post partum depression, DV, substance abuse, or the stress of being a parent. I also service coordinate children ages 0-3. I work with kids with general delays (speech, motor, self-care, etc), kids on the Spectrum, with MR, blindness/deafness, strokes/paralysis, chromosomal disorders, etc. Services are done at home or at center, and can be individual or in a group setting. My caseload is about 20-25 children/parents, and I run two groups. My current child caseload's age range is from 6 months to 35 months. Our catchment area is 14 towns.

I am interested in further training so that I can work closely with specific populations, such as Applied Behavioral Analysis. I had planned on training so that I could diagnose Autism but MA law just changed in Jan so that only MD’s or PhD’s can diagnose Spectrum disorders.

Jessica Fidalgo, Class of 2011
I am currently working in Rhode Island. I passed the Licensing Exam and am working towards my license, both in RI and MA. I work in primary care as part of the behavioral health department, adult medicine, pediatric and women’s health departments. I work with a varied population: uninsured, unemployed, disabled, working, college students, immigrants, Spanish/Lao/Portuguese/Arabic, etc; the population is very similar to BMC. Since graduating, I have worked in the same facility. I was hired in June, following graduation.
Robert Garofano, Class of 2010

I currently work as a Clinical Case Manager at a Community Mental Health Center in the Partial Care Program. It is a voluntary day program for individuals with severe, chronic mental illness including mainly schizophrenia and schizoaffective disorder as well as dual diagnosis. I carry a caseload of 15-20 “consumers” (a NAMI approved term voted on by consumers) for which I am responsible for brief, “solution-focused” clinical interventions, case management, and to a lesser extent, resource finding. In addition, I am responsible for running psychoeducational groups around different topics such as Healthy Living & Nutrition and Social Skills.

I am currently seeking licensure in New Jersey. New Jersey employs a 2-stage licensure process. Upon graduation, you submit a license application to the State, as well as the NBCC for approval to sit for the licensure exam (in NJ, it is the National Counselors Examination or the NCE). It is HIGHLY recommended that, when submitting your application, that you accompany with it printed out copies of your course syllabi. Once you have been approved by the State and the NBCC and take your exam, you are awarded a License as an Associate Counselor (L.A.C.), a provisional license to practice counseling. From that point, you are required to complete 4500 supervised field work hours, after which you are awarded a License as a Professional Counselor (L.P.C., the NJ equivalent of an L.M.H.C).

Katie Kalina, Class of 2009

I am currently licensed in Massachusetts. It took me just over two years to get licensed. I am working as a substance abuse clinician, with a concentration on our 18-29 year old clients. Since graduating, I have been working at Community Substance Abuse Center in Chelsea, MA (a Methadone clinic).

Phoebe Gauthier (Lott), Class of 2010

I currently work for NYU School of Medicine in the Mental Health and Addictive Disorders Research Program as a Project Coordinator. I work out of the NY VA Hospital on a NIDA project titled ‘Screening, Motivational Assessment and Referral to Treatment in Emergency Departments’ (SMART-ED). I supervise research assistants on the team, as well as provide daily management of study execution. Additionally, I am a therapist on another protocol for which I provide CBT counseling for patients with cocaine dependence.

I have been with NYU School of Medicine since graduation but I began as a Clinical Research Coordinator/Interventionist for the SMART-ED study. For this role I worked in the Bellevue Hospital Emergency Dept. providing standardized substance use assessments and motivational interviewing counseling sessions.

Hilary Keller, Class of 2010

I am currently licensed in North Carolina. I strongly encourage anyone planning on moving to NC to contact me regarding licensure. NC has a few hoops to jump through before they will allow someone to be provisionally licensed.

I work at a non-profit residential program called CooperRiis, serving adults with moderate to severe mental illness. The following was taken from their website: The central concept is that of an environment where staff and residents live and work together as a functioning community. To strengthen the model, we have added the elements of integrated psychiatry, individual and group psychotherapy, nutritional counseling, dietary supplementation, and physical exercise programming, as well as substance abuse counseling, complementary modalities, and life skills/employment training. Together, these elements aid our residents in setting and achieving their dreams and goals in an environment that feels like a “Recovery College”. Prior to CooperRiis, I worked for a community mental health agency providing home-based and o/p therapy.
Lastly, I have also been working with Kids Empowered, running an empowerment group during lunch for middle school girls. Our focus has been on self-esteem, ending bullying behaviors, coping strategies and empowerment. The website for the organization is www.kidsempowered.com.

In addition, I continue to participate in half marathon races, and last year I completed the Rock n Roll Half Marathons in Chicago and Philadelphia as well as participating in a relay team during the Detroit Marathon. I have also been actively playing tennis for the USTA as part of the Beverly Hills Club’s team.

Melissa L. Maskulka, Class of 2009
Hello MHCBM Program! It’s been an adventure for sure. After a couple years in Upstate New York working in research, waiver services for those in foster care or recently adopted, and as a trauma therapist, I decided to get out of dodge and joined the United States Air Force. On 27 Jan 2012, I graduated Basic Military Training as an honor graduate, and I am currently at Goodfellow Air Force Base in Texas for training in my career field, intelligence. On base, I’m involved in quite a bit of volunteer work, including the Sexual Assault Response and Prevention program, so my civilian career has not disappeared completely. 2011 was also a year of fitness, as I finished my first half-marathon in May, two Warrior Dash mud races, various other distance races, and an Iron Girl triathlon in August. This year, I hope to complete another triathlon and add a full marathon to my litany of races. Also, in April 2011, my piece "A Critical Analysis of being Overly-Analytical" was published in the literary magazine Breakwall, highlighting the trials and tribulations of dating post-graduate school in psychology. Keep on party rocking.

Tanya Kuprianiak, Class of 2004
This year, several exciting professional transformations have occurred, and I am very excited to share. I recently joined the Child and Family Solutions Center, a private practice in Farmington Hills that focuses on the mental health treatment of children, adolescents and families. Check us out at: www.childandfamilysolutionscenter.com.

I am also working with the Muscular Dystrophy Association’s Michigan Chapter in providing a teen support group for both middle school and high school students diagnosed with a muscular disease. The group will be starting in April 2012 and will be meeting once a month.
I am working towards MA state licensure. I work with Geriatrics, Adults, Couples, Family, Adolescents, and Children. I have worked in Outpatient, Crisis Stabilization Unit, Emergency Services, Nursing Home, Assisted Living Home, Hospital, and In-Home. I've been able to work with people experiencing mood and anxiety disorders, crises, dementia, personality disorders, various types of adjustment difficulties, chronic medical conditions, serious and persistent mental illnesses, behavioral difficulties, etc. I am pursuing a Graduate Certificate in Gerontology: Management of Aging Services at UMass Boston.

Roxana Moayer, Class of 2009
(Dual MA, with Medical Sciences)
I have did one year of research in Neuropsychology at the Boston VA 2009-2010. I started Keck School of Medicine of USC in 2010, and I expect to graduate in 2014 (currently a second year).

Kristin Nicastro, Class of 2008
I am currently licensed in Massachusetts and working towards licensure in Rhode Island. I work with Adolescent Girls (13-19 years old) at the Home for Little Wanderers (Brighton, MA) Children’s Community Support Collaborative. I provide residential and home based services for children and adolescents 6-19 years old (residential is only 13-19 years old). I did individual, family, group therapy and case management for 6-7 clients, on average, at a time, dealing with various diagnoses; all have major mental illness and safety concerns.

I also worked at Justice Resource Institute (Taunton, MA) Cohannet Academy. Massachusetts only all girls Intensive Residential Treatment Program (IRTP). We serve girls (13-19 years old) who have active suicidal or homicidal ideation. I did individual, family, group therapy and case management for 4-5 clients on average at a time, all with major mental health issues (I specialized in PTSD work) including active psychosis. All have intense safety concerns.

I need to take a vocational counseling class in order to get licensed in Rhode Island (where I currently live). It was not a requirement when I was at MHBM. I'm most likely going to take it this summer online.

My daughter Adriana Elizabeth was born on January 26th of this year, and my husband and I are enjoying being new parents. We were thrilled when our little one got her first BU onesie (it’s too big to show off at the moment)- she is part of Terrier Nation from the very beginning of her life!
Alex Paiva, Class of 2008
I applied for MA licensure and got it got accepted by the review board. I am license eligible now.

I am working with the North Suffolk BEST team, seeing a wide array of disorders, substance use, demographics and ages. I worked at MGH as a research coordinator/study interventionist for 2+ years, working at NS BEST since Oct 2010. I have not been accepted to PhD programs and I am considering pursuing post bac requirements for pre-med, although I haven't started yet.

Gerald Reid, Class of 2010
I am currently in the Boston University School of Education Counseling Psychology doctoral program to become licensed psychologist. I will be interning at a college counseling starting in Fall 2012. I don't have a current internship. As a group clinician and assistant director of a summer program, I worked with children and adolescents (Asperger's Syndrome, ADHD, Anxiety, Depression) in a group program for social and emotional skills at the Triumph Center for Child and Adolescent Counseling.

Kathleen Reid, Class of 2009
This past August I got married, went on an incredible honeymoon to Costa Rica, and started a new job all within a few weeks! I have returned to Boston Medical Center as a Clinical Interventionist for Dr. Brady's NIMH funded HIV Prevention Study with the Homeless and Mentally Ill. My primary responsibilities include delivering the motivational interviewing-based intervention, conducting psychosocial and neuropsychological assessments, and data management. It's great to be back at BU/BMC and I am enjoying working in a learning environment again! I am also very excited to share that this past winter I officially became an LMHC in Massachusetts!

Kelly Robotti, Class of 2010
Since graduating in 2010, I have been working at a non-profit outpatient clinic for children and families. After a lot of hard and rewarding work, I hope to be licensed in May of this year. In my personal life, I got engaged to my wonderful fiancé in December and we will be getting married in July! Immediately following the wedding, we will be moving to North Carolina while my fiancé pursues his MBA. 2012 is shaping up to be an exciting and life changing year!

Megan Scerra, Class of 2011
I spent my summer working as a clinician at the Boston Area Rape Crisis Center prior to transitioning to my current position at the Baycove Boston Emergency Services Team. I have been with BEST since the fall, doing mobile crisis evaluations in the community. Along with settling into my position at BEST, I am also enjoying my new status as a married woman, having tied the knot on December 30, 2011 with many of my fellow MHCBM 11' graduates present for the big day.

Thank you and I look forward to seeing how others are doing!

Dora Shalts, Class of 2011
I am currently working as a Clinical Research Coordinator/ Interventionist at NYU School of Medicine in the Division of Alcoholism and Substance Abuse, for Dr. Stephen Ross. I am working mainly with individuals who are dependent on IV heroin, but also work on studies dealing with other substance abuse/dependence. We will also be looking to hire a Research Assistant in July/August so if anyone is interested, they should definitely contact me!

Dora Shalts
dshalts@gmail.com
Alicia Skorupinski, Class of 2010

Hi Everyone! I can’t believe I am approaching the 2 year mark of completing the program. I began working shortly after graduation (not before traveling and taking some time off) at Riverside Community Care at a day treatment facility. While working for the methadone clinic, I gained invaluable experience with individual counseling and case management. I carried a caseload of 52 patients.

I am originally from Northern Maine, and there is no doubt to me that working in Boston was worthwhile and fulfilling, but I missed my family. So while I was working for the methadone clinic, I actively applied and interviewed for various positions in my home state. I landed a job in the same county my family lived. Before I could take the position I needed to be licensed to practice in the state of Maine. To be licensed, I needed to be approved by the state licensing board to sit for an exam. To sit for the exam my courses from the MHCBM program needed to be approved by the Maine state licensing board. Once I received approval by the board of the MHCBM programs’ proficiency, I took the Nation Counselor Examination accredited by the National Certification Corporation. I passed the exam and was granted the credentials of Licensed Clinical Professional Counselor-conditioned (the conditional will be dropped upon completion of 3000 hours of supervised experience).

I am presently happily employed working for a nonprofit community mental health association as a therapist/consultant working with the crisis population. Specifically, I am the clinical supervisor of an adult stabilization unit, an emergency services crisis/sexual assault hotline, and an emergency services evaluation team. I am working towards full licensure and I am associated with the American Mental Health Counseling Association (AMHCA) and the Maine state chapter of this association.

I wish all the present students and past alumni the best in their continued endeavors.

Alex Slocum, Class of 2009

I am still working on getting my license. I have been working in Substance Abuse (Methadone Clinic) for the past 2½ years.

Nadia El Tayar, Class of 2010

I am hoping to apply for licensure in Massachusetts in August 2012. I am working as school-based mental health clinician for the Home for Little Wanderers; I provide school-based individual, group and family therapy services. I work with kids and families ages 5 to 15 (inner city school, with at-risk youth). I did my clinical internship at a residential program for DMH teens ages 12 and up, and I now do school-based outpatient counseling with children and families ages 5 to 15.
Kira Yanko, Class of 2006

Professionally this year: I continue to work for Northwest Passage, a company that has several adolescent residential facilities. I had been splitting my time between the girls and the boys programs equally, although I am not in the process of making some changes within the system.

This year, myself and the other senior clinician have worked to incorporate DBT into all of the programs. It has been a slow change, but one that has already shown benefit uniting direct care staff, clinicians and residents with a common language. Aside from that, I have been developing and providing trainings about self harm and suicide prevention to county workers and the juvenile justice intake workers in Wisconsin. I had my first intern this year (made me feel old)!

Personally this year: My husband returned safely from his second tour in Iraq almost a full year ago. Life has been a bit of a transition as he changed from working full time for the National Guard and is now starting a job with the Union Pacific Railroad. I started a small, internet based cake decorating company in the last few months and this has kept me extremely busy, but it doesn't really feel like work at all. We hope to expand our “we” to “three” in the near future but until then, I’ll continue to treat my two dogs as my kids.

Hope you are all doing well!

Maggie Wentworth, Class of 2011

I graduated in 2011 and am working for the department of youth services (DYS) in a locked unit with adolescent males. My current DYS placement is my first job since graduating.

Chris Wong, Class of 2010

I'm working in a residential facility specializing in adolescent boys who have a history of sexually offending behaviors. Not all of them have sexually offending behaviors, but they have their own histories of severe trauma from a young age with their own attachment histories and developmental delays. Many of the boys also have autism/Aspergers/PDD.

My other jobs are per diem with the BEST team and fee for service outpatient with adolescents and their families. I'm working towards licensure, and once I finish the supervision, I should be all set. Students can feel free to call me or email me with any questions about working with adolescents, trauma, life after graduation, having multiple jobs, or anything else they feel like asking. My email is cyw104@gmail.com.
Jillian Edelstein  
*Student Representative*

Upon completing my first semester, I finally came to the realization I was actually going to be working with clients in just a few weeks! Even though I was really excited, I couldn't believe it was actually happening so soon. So far, my experience at Teen Conexions in East Boston has been more than I expected, and I have learned so much about working with teens. I have also been able to dip into some of the adult groups as well, which was way beyond my comfort zone in the beginning. I already know I am gaining a lot of skills and techniques for my rolodex in the future. I am also thrilled to be joining the McLean Franciscan Child & Adolescent Inpatient Unit for my internship position this coming Fall.

Hot Neighborhood Eateries

Every time I have visited Boston since I was a kid, I have distinct memories of going to Mike's Pastry in the North End for the best classic cannoli ever! There is no doubt that I have a great interest for great food, given my first delectable experience in Boston at a young age, so there is no wonder that I have been discovering other sweet hotspots since I've moved here. So, here I will provide you with my itinerary for some eateries around town:

⇒ **Breakfast:** South End Buttery, *South End*  
⇒ **Lunch:** The Chubby Chickpea Food truck, *usually hangs out by the Prudential Center*  
⇒ **Afternoon Coffee:** The Wired Puppy, *Back Bay*  
⇒ **Dinner:** Island Creek Oyster Bar, *Kenmore*

For prospective students, you are in luck, because there is no shortage of AMAZING nosh-spots in Boston. I have been enjoying checking off the top spots in my Zagat Guide to Boston, so I recommend exploring that little red book before moving to Boston. Obviously, there are many more restaurants in Bean Town - so you will just have to come visit to check them out!

*Bon Appétit!*
Now that you know where I am from, I would like to share a little more about my cultural identity. My father is from Mexico and my mother is from Costa Rica. I definitely consider myself tri-cultural (American, Mexican, Costa Rican) and I love it! I enjoy visiting family in both Mexico and Costa Rica and as a matter of fact, one day, I would like to live in Central America. Why? I am not quite sure, I have just always wanted to experience living in a different country, absorbing the culture and adapting as I have been doing for the past 6 months. This transition has really taught me that I am capable of becoming accustomed to a different environment, and if and when I do decide to move to another country, I should have an easier time adapting.

Kristen Naylor

So far, my experience in the MHCBM program has been generally wonderful. All of the professors are truly invested in helping students learn, and their passion for ethical and successful mental health counseling really shines through. I am learning so much, and I know that that will only continue over next year. My one complaint is, as a student going on practicum in the summer, I definitely feel like I am lacking in clinical experience. Considering I did not have much experience before the program either, I wish I had some clinical examples to share in class like most other students! I’m sure in good time I will have plenty of experience, one of the draws of this particular program, but right now I’m just ready to get out there! I am learning lots from my fellow students and thoroughly enjoy their company. I’m excited to see what the future holds.

Nicole Winter

Thus far, my experiences in Boston have been much different than I would have predicted. I cannot believe how fast the year has gone by! I absolutely love the diversity and the many, many opportunities the city has to offer. As a student, I am grateful for how much I have learned in the classroom, and for the tremendous exposure I’ve had in my clinical placement. Right now I am at BMC ED and love the fast paced and unpredictable environment. You never know who is going to walk in! Next year, I will intern at Dorchester Multi-Service Center.
Anna Kharaz

As I wrap up my second and final year in the MHCBM program, I am amazed at how much I have learned about myself, the field of mental health, and the amount of skills and techniques I have yet to acquire. So much learning in this field happens on site, and the students in this program are fortunate to not only delve right in during their first year, but also experience two clinical placements.

I completed my clinical practicum at Arbour Counseling Services Outpatient Program, where I learned to do intake sessions and improved my diagnostic skills tremendously. I am now a clinical intern at The Boston Center, which is a partial hospitalization program for children and adolescents. I accepted this internship because of my reluctance to (and fear of) working with this young population. To my surprise, I am loving this experience and find working with today's youth, particularly adolescents, as rewarding as it is challenging. At this site, I lead and co-lead groups, perform individual check-ins and intake sessions, complete case management tasks such as collateral contact and insurance authorization, do brief case presentations during rounds, and facilitate family and school meetings as needed.

I have also been fortunate enough to complete the Research Seminar in Addictions with Dr. Devine and also volunteer my time at Harvard Medical School in a yoga research lab. I certainly feel prepared to enter the workforce and am proud to speak about my background as a MHCBM student.

Alycia Buchheit

I have been interning at North Charles Institute for the Addictions, which is a methadone maintenance treatment facility for opiate dependent individuals in Somerville, Massachusetts. I have had the opportunity to do long-term, psychodynamically-based individual counseling with clients as well as group counseling, and I really love it! Most of my work throughout graduate school has been in the addictions realm or with the dually diagnosed population.

I will be applying for a Ph.D. in clinical psychology in the next few years. Through my work at North Charles, I have become particularly interested in researching attachment theory as it relates to sociopathic behavior and substance abuse.

Joelle Emery

Student Representative

It's amazing to think that I have just a few weeks left in the program. Classwork and internship have made the year fly by. I've enjoyed my time spent at Massachusetts Society for the Protection of Cruelty to Children, and it's been a valuable learning and growing experience. It will be difficult to terminate with clients, leave a supportive supervisor, a great group of other interns, and of course, my classmates and supportive faculty, but I am looking forward to all that lies ahead. I plan to move to Michigan after the summer and pursue my licensure hours there. Good luck to everyone in their future endeavors!

Tanaya Kunnenkeri

I am currently interning at Boston Medical Center's Child and Adolescent Psychiatry Outpatient clinic. I have found it to be a very challenging and rewarding experience. I love working with young people, and hope to continue a career working with children and families. I have really enjoyed the MHCBM program - it has provided me with a solid foundation in the mental health field, and given me the tools to keep growing as a clinician. Thank you faculty, for all your dedication toward seeing us flourish as counselors. And second years - here's to continued growth and success!!
Dialectical Behavioral Therapy (DBT) is a post-Hanh “metaphorical neutrality” model of treatment that gives control and a sense of understanding to the patient of their mental status through four modules, all focusing on different aspects of an individual’s recovery and power. These four models are Emotion Regulation, Distress Tolerance, Interpersonal Effectiveness, and finally Mindfulness. The latter is where most people get lost when considering this approach. In addition, Linehan also incorporated journaling (diary cards), chain analysis, and stressed the importance of the relationship outside of therapy between the clinician and client. When looking at the big picture it becomes clear that DBT has a lot of similarities to CBT with an integration of eastern thought. Though this approach may not work for everyone, I have found tremendous improvement in clients when incorporating DBT into treatment, giving them the control and power.

About three months ago, I had a clinician at my internship site extend a chuckle my way when I expressed to her my love for Dialectical Behavioral Therapy, or simply DBT. She then followed her downgrading laugh with the following statement, “don’t fall into that crap, it is a cult!” My faced scrunched up as if she offended my unborn child (and it also doesn’t say much for her openness to other disciplines). The fact of the matter is that DBT is a tremendous tool if used correctly, but it is often misunderstood or feared because of the eastern influence of “mindfulness”, as well as the very personal and casual nature of DBT creator Marsha Linehan’s relationship with her clients. In my opinion, yes, Linehan’s style of self-disclosure and 24/7 available she extends to her clients is not exactly how I would prefer to live my life, but there has been obvious examples of success through her model.

Ultimately, I have found DBT to be an intensely useful modality of treatment and although I didn’t fully “drink the Kool-Aid” with this approach, I have found aspects of the modules to be extremely useful in areas such as relapse prevention, working with victims of trauma, as well as what it was originally created for, Borderline Personality Disorder. The comment made to me by a colleague at my site in regards to DBT as a “cult” made me take a deeper look at it. Like many other young clinicians in today’s clinical world, I am taking what I can from the approach and moving on. One thing to take home from this would be to begin and remain open when discovering new approaches, because you never know what you can take from it.

My Experience of the MHCBM Program:

The experience gained through the two years as a MHCBM Student has been everything but boring. I have gained tremendous experience, branched out my network broadly and have met friends that I will call when I need bail money, or you know, my first child is born. The "hands-on" element of the program has progressed me professionally in ways that just aren’t obtained in other programs’ classroom models. In fact, after my practicum at Wild Acre Inns, I stayed on the staff as a relief and overnight clinician. Of course, there are times when a student will question how much he or she is retaining from course content or in-field experience, but the fact of the matter is hindsight is 20/20. When everything starts to wrap up, that’s when it all starts to make sense. Looking back, the knowledge and experience gained through my time as a terrier at BUSM is priceless.
Andrew Rehs
"Where I Come From"
Andrew is a Mid-Western man with the heart of a Mid-Western boy. He was born in Cuyahoga Falls, OH which is a suburb of Akron, OH (yes, believe it or not, cities in Ohio have suburbs). At age 17, Andrew didn't realize how good he had it in the Mid-West and moved away as soon as he could, relocating to Kenya for a few months, only to have his heart relocate back to Ohio to start his undergraduate degree at Ohio University. About halfway through his degree, Andrew once again uprooted to Leipzig, Germany where he lived for 2 months while working as an Intern in environmental policy through the U.S. Embassy there. Though he has never made politics a career, it was always been a passion of his. Once his short lived political career was complete, Andrew naturally drifted back to the Mid-West to finish his undergraduate degree in Marital and Family Counseling, only to soon find himself as a Terrier. Once he finishes the program, he plans on returning to the only major city in the Mid-West, Chicago, to lay down some roots.

Nicole Tanguy
I am currently completing my internship at St. Elizabeth’s Comprehensive Addictions Program (SECAP), in Brighton, MA, working in both the inpatient medical detox and outpatient substance abuse services. I have been conducting group therapy, facilitating a relapse prevention group and doing 1:1 counseling. I am planning to remain in the Boston area and would like to work in addiction and/or dual diagnosis services, working towards LMHC licensure and potentially LADC I certification. The clinical experience has been a huge part of my training in the program and my clinical experience has been fantastic!

Matthew Whitaker
A Mental Health Counseling & Behavioral Medicine Haiku

M-H-C-B-M
Intricate, thorny, and hard
Worth every penny

Anna Rosenspan
All three of us are doing great!

Ben is an adorable little man. He is smiling already, and he can raise his head to look around. He seems fascinated by artificial light; he's a little physicist in the making, I'm so proud. Our pediatrician told us that babies are easy, that they only cry when they're hungry or need to be changed. She failed to mention that this would happen every 45 minutes 24 hours a day! Luckily, that schedule only lasted for the first five weeks, and he now sleeps straight on through from 10:30PM to 4:30AM and again from 5:00AM to 9:00AM. We are grateful. So grateful. It was exhausting, but also a wonderful experience. Anna and Ben walk outside for a few hours of fresh air every day, and we’re planning our first restaurant trip soon. Big things to come!

Best Wishes for a Great Semester!
Anna & Jeff
I came into this program at an odd time, midway through the first year, and I have found myself simultaneously a member of the class of 2012 and 2013. My classmates welcomed me with open arms, and I have learned a lot about mental health (and life) from their experiences in the field. I have thoroughly enjoyed my time back in the classroom. I was a bit trepidatious entering back into higher education after a ten year sabbatical, but the experience has been overwhelmingly positive.

I am an anomaly in this program — the lone male in the class of 2013, drifting in a sea of strong, powerful, focused women. While this experience may be daunting to some, I have found the experience to be fulfilling and rewarding. This really is a great cohort, and I routinely find myself learning from their contributions.

I began my clinical work this semester, at Arbour-Fuller’s Acute Adult Inpatient Unit. My initial feelings of intimidation have been replaced with wonderment and motivation to become the best clinician I can. Next year, I am conducting my internship at the Brockton VA, in the Spinal Cord Injury Unit. This placement will give me the opportunity to work with a very unique population and the ability to garner experience in the field of neuropsychology.

My plans for the future include pursuing a Ph.D. in clinical psychology, hoping to complete post-baccalaureate training in neuropsychology and practice as a neuropsychologist. Although I will be finishing my graduate studies at 40 years old, it feels good to finally know what I want to do with my life. The MHCBM program has provided me with the foundation and experiences to bring my dreams to fruition, and for that, I am extremely thankful.

Finally, I’d like to congratulate the class of 2012 on graduation. It has been a pleasure getting to know you and work with you over the past year and a half. I wish you all the best on this next phase of your lives.
Get to Know Us!

Where Are We From?

Arizona
Phoenix, AZ

California
Central Valley, CA
Irvine, CA
Los Angeles, CA
Madera, CA
Sacramento, CA
San Francisco, CA
Santa Monica, CA

Connecticut
Farmington, CT
Rockfall, CT

Florida
Palm Beach Gardens, FL

Georgia
Atlanta, GA

New Hampshire
Bedford, NH

New Jersey
Princeton, NJ
Scotch Plains, NJ

New York
Buffalo, NY
Troy, NY

North Carolina
Winston Salem, NC

Massachusetts
Boston, MA
Hopkinton, MA
Lowell, MA
Malden, MA
Sharon, MA
Swampscott, MA
Wilmington, MA

Ohio
Akron, OH
Cleveland, OH
Cuyahoga Falls, OH

Oregon
Portland, OR

Pennsylvania
Carlisle, PA

Rhode Island
Cumberland, RI

South Carolina
Greenville, SC

Texas
Austin, TX
Houston, TX

International
Ajmer, India
Beijing, China
Bermuda
Calcutta, India
Dubai, UAE
Karachi, Pakistan
Kenya, Africa
Leipzig, Germany
Lvov, Ukraine
Moscow, Russia
Munich, Germany
Nicosia, Cyprus
Norwich, England
Saigon, Vietnam
Salamanca, Spain
Saudi Arabia
Seoul, Korea
Tel Aviv, Israel
Toronto, Canada
Utrecht, the Netherlands

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HOLIDAY PARTY with Students, Faculty & Staff

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BACK 2 SCHOOL SOCIAL

⇒ MHCBM Annual Alumni Event Discussion Panel

⇒ INTERNSHIP SUPERVISION with Dr. BG

⇒ SOCIAL GATHERINGS

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To the Class of 2012: We did it!

Tyler Andolina
Mamta Bhakta
Alexa Brewer
Maddy Brisotti
Shemika Brooks
Katie Buchanan-Howland
Alycia Buchheit
Kristen Corkum
T.J. Dinsmore
Joelle Emery
Jessica Farnsworth
Anna Kharaz
Kristen Lang
Hallie Leavitt

Simon Lu
Caitlin McPhelimy
Megan Meyerson
Jen Miller
Mari Minkel
Zuri Obado
Kristin Parent
Kim Phan
Liz Piper
Andrew Rehs
Jen Sardella
Tanaya Kunnenkeri
Paula Stewart
Nicole Tanguy
Matthew Whitaker