



LIVING RITE

COMPASSIONATE PROFESSIONAL CONFIDENTIAL

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SPECIAL POINTS OF INTEREST:

Meet Dr. Megan Noren, PsyD

An interview with Raya Newman, LCSW from Youth Service Bureau

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Letter From the Editor

You may have a fresh start any moment you choose. For this thing we call “failure” is not falling down, but staying down.

Mary Pickford

Whether it is for symbolic reasons or because we’ve been conditioned to “begin anew” on January 1st, this time of year often offers us the opportunity for a new beginning in the areas that we’ve identified have not gone the way we’d hoped . What is important to understand is that “beginning anew” is something that we have the opportunity to do all year long, 365 days a year. I’m often talking to clients about what it means to them to fail at something. What I share with them, is that ultimately, unless we choose to “stay down”, we have not failed. Our path or direction may change, or our method of transportation may be altered, but we can not fail unless we stop trying. I encourage each of you to be reflective throughout the year regarding the things you would like to change in your life and give yourself the ability to make those changes when you’re able. I would also encourage you to offer self compassion while facing obstacles, and allow yourself to “stumble” along the way, as long as you remind yourself that you’re allowed to get back up.

In this quarter’s LivingRite newsletter, I had the opportunity to interview Raya Newman, the clinical director at YSB in Dekalb County regarding the services they provide and her experiences working there. In addition, LivingRite has the honor of introducing Dr. Megan Noren PsyD as a new clinician on staff. Dr. Megan Noren has specialized training working with youth who identify as LGBTQ and has contributed an article on how families can help their LGBTQ teen. Finally, please enjoy a poem contributed by a client of LivingRite called *Life as a Leaf*.

Sincerely,
Brittany P. Male

Brittany Male, MSW, LCSW
Staff Social Worker
Director of Marketing and Outreach
Newsletter Editor-In-Chief



Staff Spotlight:

Dr. Megan Noren, PsyD



From a young age, I have had a strong interest in the professions that help people. I developed a specific passion for psychology during my undergraduate years at the University of Illinois at Urbana-Champaign. After receiving my Bachelors degree, I knew I wanted “real world” experience before pursuing graduate school. I challenged myself to step outside of my comfort zone and moved to Portland, Oregon. During this time, I worked with adolescents who often had significant trauma backgrounds contributing to emotional and behavioral concerns. This experience solidified my passion for counseling and motivated me to pursue graduate school.

I returned to the Midwest to attend The Illinois School of Professional Psychology in order to learn how to support individuals through challenging times and facilitate lasting change. Throughout my training, I worked in a variety of settings including private practice, community mental health, and university counseling. I had the opportunity to learn from accomplished clinicians and internationally recognized scholars in the field. I completed my Master’s Degree in Clinical Psychology in 2014 and obtained my Doctoral degree in Clinical Psychology in 2017.

My clinical training and warm, genuine personality allow me to support clients on their journey of exploration and growth. I aim to help people see how distressing past experiences shape the way we feel about ourselves, other people, and the world. Together as we develop a trusting, supportive therapeutic relationship, we can explore vulnerable emotions, create new meaning, and ultimately develop a more secure sense of self. I feel privileged to be a part of the healing that transpires throughout this journey.

Fun Facts:

1. I have an amazing four month old baby girl.
2. I grew up on a dairy farm.
3. I love to do crafts (when I find time).

Helping Your LGBTQ Teen

Written by Dr. Megan Noren, PsyD

Adolescence is a time where youth attempt to figure out who they are, who they want to be, and ideally develop a healthy, secure personal identity. In addition to the struggles many teenagers typically experience during this process, lesbian, gay, bisexual, transgender, and queer (LGBTQ) youth face additional problems as they simultaneously negotiate their gender and sexual identities. Developing these various parts of self can be difficult as they face a society that seemingly expects cisgender (i.e., gender identity matches sex assigned at birth) and heterosexuality. Several factors can positively or negatively affect their development (e.g., family, peers, school, religion, and community) and can lead to a more positive, integrated identity or contribute to psychological distress.

This is particularly important since LGBTQ youth are at greater risk for social and emotional problems. As a whole, they report more depression, victimization, suicidality, anxiety, overall distress, and lower levels of self-esteem. Transgender youth have even more unique needs and circumstances as they are more vulnerable to victimization and discrimination as a result of not fitting a traditional gender binary and not conforming to social expectations (Grossman & D'Augelli, 2006). The recent National Transgender Discrimination Survey showed the prevalence rate for suicide attempts among transgender and gender non-conforming individuals was an astonishing 41% (Haas, Rodgers, & Herman, 2014).

Peer groups can be a major source of support and act as a buffer for LGBTQ youth, leading to healthy identity development, or they can be rejecting and contribute to an increase in mental health concerns (Shilo & Savaya, 2011). A recent national study on school climate reported many LGBTQ youth are verbally and physically harassed by peers and oppressed within their school system. They are subject to derogatory comments, experience cyberbullying, and also do not feel as supported by school staff. Sexual minority youth are also more likely to feel unsafe and miss more school because of such harassment and victimization when compared to heterosexual peers (Kosciw et al., 2016).

Given these risk factors, it is important to understand the role of supportive versus dismissive behaviors within the family system and learn how to provide a psychologically safe environment for your child. Several studies have shown that acceptance and support from family are critical for LGBTQ youth to experience self-acceptance. Ryan et al. (2010) reported, "Family acceptance predicts greater self-esteem, social support, and general health status; it also protects against depression, substance abuse, and suicidal ideation and behaviors" (p. 205). Perceived family rejection, on the other hand, contributes to negative outcomes including higher rates for suicide and depression. Such rejection can present as a wide range of behaviors from passively dismissing one's identity to actively shaming the LGBTQ community. The chart on the following page gives examples of the range of rejecting behaviors, all of which can be psychologically damaging. It also provides examples of how to demonstrate acceptance.

To continue reading turn to page 4.

Helping Your LGBTQ Teen

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Perceived Rejection			Perceived Acceptance
Active Rejection	Passive Rejection	Passive Acceptance	Active Acceptance
You are an abomination and you are going to hell. I will not have a queer living in my house. Get out.	At least you aren't one of those homosexuals. I don't know what I'd do if you were!	I love you and support you, but let's just have a nice family dinner without you talking about being trans.	I don't understand yet, but we will get through it together. I love you no matter what.
Transgender people like you are sexual deviants and should not be allowed in that bathroom.	I support you, but I don't want your lesbian girlfriend here for the holidays. It's still too weird.	Maybe change into something more masculine. I just don't want you to draw attention to yourself in that way. It's not safe.	Why don't you invite your new boyfriend over for dinner this weekend? I'd love to get to know him better.
If you just used the right pronouns, you wouldn't have so many of these problems.	You're just saying that because your friend is transgender. Why don't you find some normal friends?	I already told you I'm okay with this "being gay" thing. I don't need to learn anything more about the topic.	Let's talk to the doctor about the hormone treatment you mentioned. We will go at your pace.
You're not trans if you haven't had the surgery. Stop saying that you're trans; people will judge you.	Just keep an open mind about being trans. Maybe you just haven't met the right girl yet.	I know this candidate doesn't support equality for you. I don't like it either, but I'm voting this way because these other issues are more important to me.	I've realized our church is not very accepting. Let's find a place that embraces all and really celebrates diversity.

Research suggests that parents who exhibited rejecting behavior believed they were acting in the best interest of their child. These parents reported their intentions were to protect their loved ones (e.g., avoid victimization, save their soul according to religious beliefs) and help them fit in with peers. They were unsure how to best provide the necessary support, but were eager to learn and change once they understood the impact of their actions (Ryan et al., 2009). When caregivers are struggling to provide support or are having a difficult time navigating changes to the family system, it can be helpful to seek professional counseling services. This can enable families to address concerns, explore the impact of their interactions with one another, receive education, and ultimately heal together. Parents may also consider receiving services for themselves in order to process their own reactions. Additionally, LGBTQ youth often benefit from the support they receive at community support organizations. This space allows them to establish peer connections, feel that they belong, and experience genuine acceptance, all of which are important to psychological well-being.

Ultimately, LGBTQ youth strive to feel accepted and understood. For optimal identity development, they truly need the support and acceptance of family, peers, and community during these formidable years. If caregivers are able to provide acceptance and support and serve as a source of comfort and strength, they will likely improve the youth's sense of self, protect them from emotional distress, and subsequently strengthen the parent-child relationship. Suggestions on how to provide such support to your loved one are summarized on the following page (Noren, 2017).

In the interest of giving readers some reference to terms associated with various gender and sexual identities, a comprehensive and current list of vocabulary can be found at the Safe Zone Project website (<http://thesafezoneproject.com/activity/core-vocabulary/>).

Quick Guide:

Listen with an open mind. Show youth you are present with them and care to hear about their experiences without casting judgement.

Ask the individual what they need. Parents do not have to have all the answers yet; they just need to be there for their child.

Show an interest in their lives. Take an active role in the youth's life and ask questions about their experiences, good and bad.

Do not "out" LGBTQ individuals. Never disclose an individual's sexual orientation and/or gender identity without their approval.

Go at their pace. Refrain from pushing the youth to do something they are not yet ready to do (e.g., disclose their identity to others, begin hormone treatment).

Get educated. Find credible sources to answer your questions and learn all you can about various marginalized identities. Avoid biased or intolerant sources.

Learn the importance of language. Seek to understand why pronouns matter, use them, and correct others who fail to do so. Learn to communicate using affirmative language.

Connect youth to resources. Assist them in identifying LGBTQ-friendly counseling services, mentors, support organizations, physicians, etc.

Seek your own support. Find outlets to connect with other parents (e.g., PFLAG, community support organizations) or engage in counseling services to process various experiences and learn how to best provide support to youth.

Repair past experiences. Work to restore positive communication and a healthy relationship when damaging interactions (e.g., initially responded with rejection) have taken place. Do not ignore the experience; address it and work through it.

Advocate for the youth. Be a support within the school system, in the community, and in government agencies.

Be an ally for the LGBTQ community. Do not stand for intolerance. Effect change.

Celebrate diversity. Consider ways to honor the youth's identity (e.g., rebirthday party) and recognize various milestones.

Demonstrate unconditional love and support. Show the youth they are respected, cared for, and valued. Tolerance is not enough; youth should feel accepted and embraced.

References

- Grossman, A. H. & D'Augelli, A. R. (2006). Transgender youth: Invisible and vulnerable. *Journal of Homosexuality*, 51(1), 111-128. Retrieved from <http://search.proquest.com/docview/204997452?accountid=34899>
- Haas, A. P., Rodgers, P. L., & Herman, J. L. (2014). Suicide attempts among transgender and gender non-conforming adults. *work*, 50, 59.
- Kosciw, J. G., Greytak, E. A., Giga, N. M., Villenas, C., & Danischewski, D. J. (2016). *The 2015 national school climate survey: The experiences of lesbian, gay, bisexual, transgender, and queer youth in our nation's schools*. New York: GLSEN.
- Noren, M. E. (2017). *Support needs and challenges of LGBTQ youth during the coming out years* (Unpublished doctoral dissertation). The Illinois School of Professional Psychology, Schaumburg, IL.
- Ryan, C., Huebner, D., Diaz, R.M., & Sanchez, J. (2009). Family rejection as a predictor of negative health outcomes in white and Latino lesbian, gay, and bisexual young adults. *Pediatrics*, 123, 346-352. doi: 10.1542/peds.2007-3524
- Ryan, C., Russell, S., Huebner, D., Diaz, R., Sanchez, J. (2010). Family acceptance in adolescence and the health of LGBT young adults. *Journal of child and adolescent psychiatric nursing*, 23, 205-213. doi: 10.1111/j.1744-6171.2010.00246.x
- Shilo, G. & Savaya, R. (2011). Effects of family and friend support on LGB youths' mental health and sexual orientation milestones. *Family Relations*, 60, 318-330. doi: 10.1111/j.1741-3729.2011.00648.x

Community Voice:

Dekalb County Youth Service Bureau:

Helping the Youth of DeKalb County

Written by Brittany P. Male LCSW, CADC, Editor

YSB

Each quarter, I have the opportunity to highlight a community agency or organization in the area. This quarter, I spoke with Raya Newman LCSW, the clinical director of the DeKalb County Youth Service Bureau (YSB), regarding the services they provide to the youth and families of DeKalb County. I enjoyed her enthusiasm, regarding her role at YSB and having the opportunity to be part of the YSB team. Raya specifically identified that as a DeKalb County resident herself, she sees the needs of the community she serves and is grateful to have the opportunity to help. DeKalb County Youth Service Bureau has been serving youth, 8-18 year olds, for the last 45 years, and before it became a separate agency, it served under a City of DeKalb Department since 1969. When I talked with Raya, she highlighted that they are very proud of the work that they do with the local school districts including: Huntly, Sycamore, Sandwich, and Dekalb. Antoinette Schrader serves as the Director of these School Based Services as well as a Youth and Family Therapist. These school based services provided by YSB, include both individual and group therapy to students during the school day. Raya shared that YSB enjoys having the opportunity to see youth in their environment, in order to best identify what they need to succeed. The additional services YSB provides to youth and their families are provided on a sliding fee scale based on client's income and ability to pay. Raya also highlighted a grant provided to YSB that provides free services to victims of "community violence". The additional services they provide include: general youth and family counseling, girl empowerment counseling, voluTEEN, parenting classes, a suspension program, runaway/lockout crisis intervention, anger management counseling, drug and alcohol early intervention programs, Juvenile Diversion and Early Risk Assessment programs, as well as a Therapeutic Art-Making group. If you're interested in learning more about Dekalb County Youth Service Bureau (YSB) they can be contacted by phone at (815) 748-2010 or found online at <http://dcysb.com/>.



LivingRite News Bulletin: Services at A Glance

General Services for Children, Adolescents, and Adults:

LivingRite offers treatment for a variety of problems including, but not limited to: Major Depressive Disorder, Anxiety Disorders, Bipolar Disorder, Career/Work-Related Difficulties, Medical Illness, Chronic Pain, Stress Management & Healthy Living, Parenting Skills Training, Sexual Dysfunction, Anger Management, ADHD, Grief/Loss, and Autism Spectrum Disorders. We also offer Marriage and Family Therapy.

We are proud to be represented by therapists with extensive diversity and sensitivity trainings, and interest in working with diverse populations.



Specialty Teams:

Anxiety and Obsessive Compulsive Disorder Team: provides individuals the opportunity to obtain specialized, individualized treatment for Panic Disorder, Generalized Anxiety Disorder, Social Phobia, Specific Phobias, and OCD. Team Specialists have extensive training, supervision, and experience in providing Cognitive Behavioral Therapy and Exposure-Based interventions for these disorders.

Eating Disorders Team: Team Specialists have extensive experience in providing specialized treatment of Eating Disorders in children, adolescents, and adults. Treatment interventions include, but are not limited to, Cognitive Behavioral Therapy, Dialectical Behavioral Therapy, Acceptance and Commitment Therapy, Exposure-Based Interventions, Family Therapy, and Group therapy.

PTSD and Trauma Recovery Team: provides individuals with gold-standard evidence-based treatments for PTSD and trauma-related disorders. Team Specialists have extensive training, supervision, and experience in providing PTSD treatment including Prolonged Exposure Therapy (PE), Cognitive Processing Therapy (CPT), and Eye Movement Desensitization and Reprocessing (EMDR).

Women's Mental Health Team: dedicated to providing excellent care for women suffering from a variety of health and mental health related problems. These might include infertility concerns, perinatal mood and anxiety disorders, chronic pain conditions, and domestic violence. Team Specialists have had training specific to women's health and mental health concerns.

Couples and Family Team: provides evidence-based treatments include Gottman Method Couples Therapy, Emotion-Focused Couples Therapy, Attachment-Based Therapy, Structural Family Therapy, Transgenerational Family Therapy, Play Therapy, and Family Systems Therapy to address a wide variety of issues that may impact a couple or family.

Psychiatric Services

We offer a collaborate-team approach to mental health services which now includes psychiatry. Our psychiatric physicians work with a broad range of diagnosis and ages to best serve the community.

Psychological Testing:

Common psychological testing that we offer for *children and adolescents*: Attention-Deficit/Hyperactivity Disorder (ADHD), Development Delays or Disabilities (e.g., social, emotional, achievement, intellectual), Learning Disorders (i.e., dyslexia, mathematics, writing), Autism Spectrum Disorders, and Psychodiagnostic Assessments. Common psychological testing that we offer for *adults*: Attention Deficit/Hyperactivity Disorder, IQ and Learning Disorders, Psychodiagnostic Assessments, and Chronic Pain Assessments.



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psychiatry location.

Life As a Leaf

Leaves are very interesting pieces of nature.

One small leaf is part of hundreds, thousands, millions of leaves all held together in a tree.

This tree stands its ground, held by a stable trunk and long, thick branches.

Focus your attention right now on leaves.

They all have different sizes, shapes, and they change as they grow.

Each season of life affects a leaf.

Spring allows the leaf to have new life to replace old ones.

Summer sunshine warms the leaf, bringing joy and peace.

Fall brings the last days, where vibrant colors take over until each leaf falls to the ground and dies.

As a vicious storm rolls through, most cling to their branch for support when the wind hits, but few do not make it.

Have I become this broken, frail leaf that breaks in the eye of a storm?

We see leaves daily, but it never crossed by mind how much we relate to them.

After a leaf hits the ground, it is lost.

Stepped on by feet, forgotten, taken by the wind, or thrown away.

Letting the storm win means people will eventually forget, move on or just get a new "leaf".

Those beautiful colors will be missed, but people will still enjoy the leaves that come next.

Leaves are unique just like people.

No one is the same and if one doesn't make it, the tree will never be the same.

There has to be a way to battle this storm so we do not let our precious lives go.

I'm slowly breaking off, but holding on for all the leaves who need me in my tree of life.

Submitted by Anonymous