

**Jennifer Klatsky
Counselor
Counseling and Advising
Sabbatical Leave Proposal**

Proposal Summary

I propose to spend the spring 2008 semester, January to August, becoming renewed and reinvigorated to continue providing counseling services for students at Parkland College. My primary intent is to use this time to increase my clinical knowledge and abilities. My responsibilities at Parkland demand that I balance providing academic, career and personal counseling, with crisis intervention as needed. A variety of counseling center surveys and articles have documented a nationwide increase in the number of college students with severe psychological problems in recent years, and the issues which Parkland students bring to my office reflects this trend. I would like to spend this semester reading the latest professional journals and books, and attending a variety of workshops and conferences directly related to these mental health issues.

Alternate Plan

If I must complete exactly half of my 215 day contract prior to leaving, I'd prefer to work through January, then have the remainder of the spring and summer 2008 on leave, and return to the office for the fall semester in August 2008.

Signature of Department Chair

Date

Donna Tanner-Hawld

November 8, 2006

Signature of Applicant

Date

Jennifer Klatsky

November 8, 2006

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Responsibilities at Parkland

I provide academic, career and personal counseling for students. Other departmental responsibilities include coordinating community mental health events such as annual Depression and Anxiety Screening Days and Sexual Assault Awareness Month activities on campus. I also keep our departmental website updated, supervise our student workers and coordinate our CCS class visit retention project each semester. I liaison with Parkland's Health Professions and Natural Sciences departments and sit on Advisory Boards for Veterinary Technology and Surgical Technology. I am the primary departmental liaison to The University of Illinois at Chicago, and am one of several contact individuals for Illinois State University and University of Illinois, Urbana-Champaign. Last year, I supervised a clinical intern from EIU who was completing her Masters degree in Counseling, and I would welcome the opportunity to do this again.

My current service to Parkland College includes membership on the Marketing Committee, Faculty Subcommittee for Professional Development Concerns, Global Studies Committee, and Ally Advisory Committee. I am currently a PCA Senator representing Counselors and Librarians. I coordinate and informally chair monthly Ally Team meetings. I provide Counseling workshops for CETL, CAS, TRIO and individual classes when requested by faculty. I have also served as an EEO officer. In recent years, I have assisted Hilary Valentine in revising and updating the catalog and course schedule.

I represent Parkland College in our community on the Champaign-Urbana Mental Health Public Education Committee, the Family Service Counseling Program Advisory Committee and the Sexual Assault Awareness Month Committee.

Eligibility for Sabbatical

I have been employed full time at Parkland College since 1994, and this is my first application for a sabbatical leave.

Rationale and Justification for Proposal

I would directly benefit from obtaining current knowledge of the latest understanding of the serious mental health problems affecting many of our students. A number of recent counseling center surveys and articles report increases across the United States and Canada in students coming to counseling centers who are already on psychiatric medication and experiencing severe problems. With a primarily traditional age student population, there are always some life transition issues that students bring into counseling, such as separation from family, learning to juggle school with other responsibilities, self esteem & self-identity issues. In the community college, our students are of all ages, so problems which occur across the lifespan relating to grief & loss, stress management, and relationship issues are all common.

There have also always been some more serious issues that students bring into our offices, such as eating disorders, sexual assault, domestic violence, substance abuse, and recovery from childhood trauma, such as physical and sexual abuse.

What has really changed over my years at Parkland College is the volume of much more serious mental health issues. Students are coming to college with clinical depression, chronic anxiety disorders such as PTSD and panic disorders, they disclose that they self-harm (cut or burn themselves), and experience symptoms such as constant worrying. These students are dealing with long-term psychological problems. In part because the current medications are better, many more individuals in our community are able to be students, but their problems come to school with them and we often see them struggling with coping. Parkland counselors have had a huge increase in two areas in recent years. These are the numbers of students like these whom we see and the severity of the difficulties which they bring to us. The statistics nationwide reflect this and the indication is that it will continue to increase. Many of our students don't have health insurance and we are their only resource. Community agencies are often backed up with wait lists, and we provide what we can for our students in the interim.

We offer free, confidential, brief counseling. With students who have long-term issues, our role can be to give them the extra support they need to stay in school and be successful here. Knowing what to do with them requires experience and specific therapeutic skills. It takes training to keep those skills fresh and in concert with the latest understanding of best treatment practices.

It can be extremely challenging to obtain ongoing professional training for personal counseling. It is almost impossible to keep up with the latest in how to treat these kinds of issues without attending expensive hands-on workshops and conferences. It is also difficult to find the time to read the most recent books and journals when our days are filled with direct student service. Our professional development funding allows for individual conference and workshop attendance on a bi-yearly basis, and I always use this resource to attend training to further develop my clinical skills. It has been quite a while since I was in graduate school, and I embrace the lifelong learner model. I would obtain significant stimulation and enjoyment from the opportunity to immerse myself in this study for a semester.

One example of a conference I attended a few years ago which helps me to work with our students was the Illinois Counseling Association annual meeting. The first session I attended covered an in depth overview of the latest in psychological medications. These change extremely rapidly and there is constantly ongoing research and development for new medications. It was very helpful to learn how these work biologically and what students are referring to when they tell me the names of the medications they've tried or are currently taking.

The second session I attended was "The effect of traumatic stress on the brain." We learned the latest in neurobiological research concerning what happens when someone witnesses or is the victim of trauma such as an accident, war events, or assault. Then we learned specifically what we can offer these individuals in treatment. Focusing on deep breathing & other relaxation techniques is primary as it is the only way to assist someone in regaining control over their involuntary anxiety responses such as racing heart and difficulty breathing. Only after these techniques are mastered, do you advance

to the traditional counseling process of talking and verbally exploring. I've used this knowledge in my office ever since.

A third session I attended focused on working with individuals who have chronic physical and/or mental illness. This also covered hands-on tools as well as theory on how to work with the chronically ill. Once again, I brought back to my work practical techniques as well as increased knowledge to be a better counselor for our students.

Another excellent workshop I attended several years ago was entitled "How to grieve and mourn in a 'get over it' world." I came back to work with strategies and concrete exercises to work with individuals suffering from grief and loss. Since this is part of everyone's lifespan, these are issues that come into my office on a frequent basis.

I hold degrees in Counseling Psychology and in Health Education, and I have long used a wellness perspective in my counseling work. I would thrive on also using this break from my normal routine to devote more time to exploring the latest knowledge on mind/body interaction and new techniques for stress management, such as yoga, to supplement the counseling tools I already possess. This type of work directly reflects what is currently recommended for management of both anxiety and depressive disorders.

I also teach the kinds of techniques I learn in these trainings outside my office. I provide workshops for individual academic classes as well as through the Center for Excellence in Teaching and Learning, TRiO, & the Center for Academic Success. I've taught a large number of stress management workshops, and I've also been asked to address such topics as recovery from sexual assault, balancing school with the rest of your life, assertiveness skills, and how assist students in distress.

I would also benefit from this significant break from my current daily routine. I have employed as a full-time counselor at Parkland College for 12 years, and my 8:00 to 5:00 (with the occasional evening) for 215 days a year is an extremely demanding schedule. The volume of work in my office has steadily increased over this time period as our student population has grown, and the work itself has become more difficult, due to the nature of the problems which students bring in. This combination makes counseling a more emotionally challenging and potentially draining profession for its practitioners.

I have always felt grateful to have work which I love, which is continually changing and challenging, in a professional environment which has allowed me to grow. As is evident from my list of current professional duties at Parkland, I have always been an individual who possesses an abundance of energy, embraces new challenges and is happiest juggling a myriad of duties. I believe that a professional "time out" for clinical study and academic pursuit of further counseling knowledge will allow me to focus my energies inward for a while and refuel my stores. I expect to then be able to return to my work at Parkland with renewed enthusiasm and refreshed counseling abilities.

Specific Activities Planned for the Sabbatical

Should I be awarded a Sabbatical Leave for the spring semester of 2008, I propose to spend my time reading such professional publications as Psychotherapy Networker, Counseling Today (Journal of the American Counseling Association), Journal of Multicultural Counseling and Development and Journal of College Counseling. I would also like to read a variety of current books, such as those in the attached sample reading list. I would like to particularly focus in depth on such clinical issues as anxiety, depression, and recovery from trauma, as these are among those most frequently presented to me by students at work, and on the general areas of clinical supervision and wellness.

I would also like to attend trainings in person, as this is how I best learn and this is the most practical way to obtain clinical skills. I'm particularly interested in looking at "solution focused" approaches and "brief counseling" models for treatment, as these are best suited to work in our setting. Although I cannot declare which specific seminars and workshops will be available during the spring 2008 semester, as these are typically advertised less than a year in advance, I can give examples of trainings which are available for this year and state that these are the types of events I would like to attend. Most of these are one or two day workshops within Illinois, either in the Chicago area or downstate.

1. Illinois Counseling Association Professional Development Institute: Working with Trauma. Some of the session titles this year are "PTSD & Veterans/ Spirituality", "Understanding and Treating Traumatic Stress", "The Continuum of Care in Crisis Intervention", "Counseling Abused and Traumatized Clients: Critical Issues in Practice, Supervision, and Self-Care".

2. "Treating Anxiety, Panic & Worry"
3. "Issues of Diversity in Clinical Supervision"
4. "Cognitive-Behavioral Approaches to Treating PTSD"
5. "Survivors of Suicide: aftermath of a tragic loss"
6. "Is it Borderline? Bi-Polar or Relationship Addiction?"
7. "Anxiety in Kids – Anxiety in Adults"

Sharing the Results of the Sabbatical

Upon return to work, I intend to make oral presentations to share the results of my sabbatical leave to Parkland's Board of Trustees and to Parkland College Association. I also intend to write a report to be filed in the Library. The oral and written reports will include my original goals for the sabbatical and what I actually do accomplish with the leave.

Request for Additional Expenses

I am requesting funding for conference attendance. I would like to be able to attend several partial-day or one day local workshops which often cost \$100 - \$200 and at least one longer training such as the Illinois Counseling Association's annual conference, which would cost at least \$500-\$600 with registration and hotel fees. \$750 to \$1000 would allow me to attend a variety of trainings.

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Sample Reading List

Mastering the Art of Solution-Focused Counseling. Jeffrey T. Gutterman. American Counseling Association. 2006

Handbook of Solution-Focused Brief Therapy. Scott D. Miller, Mark Hubble, Barry L. Duncan, Jossey-Bass Psychology. 1996

Multicultural Issues in Counseling: New Approaches to Diversity, Third Edition, edited by Courtland C. Lee, American Association for Counseling and Development. 2005

Supervision Strategies for the First Practicum, Third Edition, Susan Alistetter Neufeldt. American Counseling Association; 2nd edition. 1999

Helping People Cope With Tragedy and Grief: Information, Resources, & Linkages, Garry Walz & Chris Kirkman, eds. CAPS Publishers, 2002

Crisis Intervention: Promoting Resilience & Resolution in Troubled Times. Lennis Ehterling, Jack Presbury & J. Edison McKee. Prentice Hall, 2004

Brief and Extended Interventions in Sexual Abuse, Robert Rencken. American Counseling Association. 2002

Counseling for Wellness, edited by Jane E. Myers & Thomas J. Sweeney. American Counseling Association, 2005

Suicide Across the Life Span, edited by David Capuzzi. Counseling Association of America. 2004

Surviving Manic Depression – A Manual on Bipolar Illness for Patients, Families and Providers, E. Fuller Torrey and Michael B. Knable. Basic Books. Perseus Books Group. 2002

The Noonday Demon – An Atlas of Depression, Andrew Solomon. Simon & Schuster. 2002

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Sabbatical Leave Final Report

Summary:

My primary intent for the sabbatical I was granted in Spring, 2008 was to spend the time updating and increasing my clinical knowledge and skills. My overall goal was to return to work not only refreshed and renewed, but also as a counselor better prepared to offer best current professional practices to our students. I am pleased to report that I believe I did achieve these goals. I'd like to take this opportunity to thank Parkland College and the Board of Trustees once more for giving me this wonderful opportunity!

I was hired as a counselor at Parkland College in the spring of 1994 and have been providing academic, career and personal counseling for students here since then from 8:00 am to 5:00 pm daily, 215 days a year. I love the variety in my job and the one to one interaction I have with students. As a life-long learner, having work which demands that I always keep on top of constantly changing programs, graduation requirements, transfer regulations, and so on is a welcome challenge. The nature of the work has changed over the years I've been at Parkland, and has actually become more difficult on a regular basis. The portion that has shifted the most is in the personal counseling area. Our student body has grown substantially over the years. What has also significantly increased is the number of students with more serious mental health issues who attend college. This is a nation-wide trend: counseling centers across the United States and Canada report increases in students who are already on psychiatric medication and experiencing severe emotional problems. Students have always brought life transition issues in to Counseling, such as those related to self esteem and identity, grief and loss, stress management and relationships. Other issues which have constantly appeared in our offices are those concerning sexual assault, domestic violence, substance abuse, and recovery from childhood trauma. What has really

changed is the volume of long-term issues such as clinical depression and chronic anxiety disorders such as PTSD (post traumatic stress disorder) and panic disorder. Students disclose symptoms such as self-harming (they cut or burn themselves), experiencing constant worry, or living daily with the low energy and lack of pleasure or interest in daily life that accompanies chronic depression. Fortunately, the current medications available are much better, so more individuals are able to be students, but the difficulties they experience come to college with them. Community agencies are often backed up and many of our students don't have health insurance, so we're their only resource. We've had a huge increase in the last years in both the number of students like these whom we see and in the severity of the difficulties which they bring to us.

This is what led me to choose what to do with my sabbatical leave. Parkland offers free, confidential, brief counseling. With students who have long-term issues, the counselor's role can be to give them the extra support they need to stay in school and to be successful here. Knowing what to do with these students requires experience and specific therapeutic skills. I decided to use my leave to seek training to keep my own skills fresh and in agreement with the latest understanding of current treatment practices. My overall goal was to update and increase my clinical knowledge. I hoped to return to work not only refreshed and renewed but also as a counselor better prepared to offer best professional practices to our students. I am pleased to report that I believe I did achieve these goals.

I've always learned best from hands-on teaching, so I attended the maximum number of professional workshops I could fit into my budget. I made a lot of long one-day trips to Peoria, Bloomington and Springfield, and attended a total of nine excellent conferences. The topics covered a great range of issues, among them how to work with individuals who are impulsive and self-harm, suicidal, anxious, depressed, or traumatized. Several conferences addressed counseling theories and therapeutic methods which can be used across a variety of counseling issues. One workshop focused on teaching practitioners how to prevent our own burning out. This is such a common syndrome in the field that it has earned its own title - "compassion fatigue."

I tried out two alternative study methods during this time. I completed one course completely online and another which was delivered via online

teleconference. I did reconfirm that I still learn best through the in-person, hands-on trainings, but it was interesting to try both of these. Students often ask me what I think about online study, and I now have my own personal experience to draw upon when we discuss if this is a good fit for them.

The majority of my time was spent reading, which I found both stimulating and relaxing. I caught up on literally three years of professional journals. I was actually able to read all of the supporting articles and materials supplied by the conferences I attended. It was absolutely luxurious to do this within a few days after attending the workshops, when I was most receptive to understanding and retaining the information taught. I also completed a large stack of books, covering theoretical, practical, and inspirational aspects of counseling.

I was both relieved and pleased to learn that the latest brain-based research supports many of the practices I've been using for years in my counseling work, particularly in the areas of treatment for anxiety and depression. These are probably the two most common issues students present. I have a degree in public health as well as one in counseling psychology, and my long interest in health education and mind-body interaction is where much of the current research and professional practice is now focused.

In retrospect, I realize that I had a preconception that since I am now twenty-plus years out of graduate school, I'd find myself somewhat out of date and learning mostly new techniques during this leave. It was very reassuring to find that this wasn't the case.

As well as using my updated knowledge in my work with students, I have been sharing what I learned with my counseling colleagues. This has happened informally, as we consult with each other about individual cases, and also in a bit more structured way. I'm working with one counselor to teach her my newly enhanced repertoire of deep breathing skills by taking her through them as if she were a student.

The sabbatical leave allowed me to significantly expand my professional knowledge base and increase my clinical skills repertoire. I also definitely became both refreshed and rejuvenated. I returned to work this fall with my energy stores replenished and my enjoyment of my profession and my job reinvigorated.

Conferences attended for Sabbatical:**Dialectical Behavioral Therapy: A Skills Based Approach to Treating Impulsive, Borderline and Suicidal Clients**

This training provided a basic introduction to DBT theory. It included defining Borderline Personality Disorder, understanding the biosocial model of emotion regulation, learning how to incorporate DBT skills into patient treatment plans and goals, and exploring ways to maintain motivation and energy for working with challenging clients.

New Approaches in Understanding, Assessing & Treating Persons Who Self-Harm & Self-Mutilate: The Biological, Psychological and Social Aspects of Treatment and Recovery

This seminar offered an increased awareness of self-mutilation and ways to effectively enter into a therapeutic relationship with the self-injurious client. The latest research was discussed, along with practical clinical strategies.

Stalking: Latest Strategies in Response and Prevention

This training addressed the crime of stalking, including stalking behaviors, prevalence, and lethality. Discussion focused on the impact of stalking on victims and ways service providers can effectively work with stalking victims. The strong links between stalking and both sexual assault and domestic violence were addressed, and special consideration was given to stalking issues related to college campuses.

Compassion Fatigue: Prevention & Resiliency

This seminar combined well-researched evidenced-based material with powerful experiential exercises. It focused on how to increase effectiveness as a professional helper and improve professional resiliency without suffering the negative effects (burn-out, primary and secondary traumatization, stress, and general psychiatric distress) that can emerge from this work.

Mindfulness: The Practice of Compassionate Presence

This seminar provided practical strategies for the implementation of mindfulness techniques to help clients manage anger, depression, and anxiety and calm other overwhelming emotional states. It also addressed how to use effective mindfulness techniques to enhance clinical skills in order to increase focus, clarity and effectiveness in the therapeutic relationship.

When Words Heal: The Power of Writing

This experiential workshop focused on how to incorporate writing as a way to heal from loss, serious illness, or other life difficulties. It included key research on writing and healing, discussion on the transformative power of words, and had the participants write in response exercises and prompts.

The DSM-IV-TR for Clinicians: Accurate Diagnosis & Effective Treatment Planning

This seminar reviewed the latest version of the Diagnostic and Statistical Manual of Mental Disorders with an emphasis on how to formulate and implement effective treatment plans through accurate and thorough diagnosis. It focused on changes in the DSM-IV-TR and on how to prioritize symptoms, particularly in individuals who have more than one diagnosis.

Sensorimotor Psychotherapy: Tools for Therapeutic Transformation

This workshop explored the model of Sensorimotor Psychotherapy, which is a comprehensive approach to treatment of trauma that works with the whole organization of the central nervous system, particularly body awareness, as a means of deepening traditional cognitive and emotional interventions. It taught the modulation method and specific tools of the sensorimotor approach.

The 2008 Biennial Conference for Women – Now is the Moment

This conference was designed to encourage, inform and inspire women with a variety of exciting speakers and smaller breakout sessions. I had the privilege of hearing the following excellent speakers on the day I attended. The Keynote was Sheila Crump Johnson, Zonya Foco addressed “Eating on the Run”, Barbara Glanz spoke on “Balancing Acts – Guiltfree Ways to Blend Your Work and Your Life”, and Anna Quindlen provided the closing session on the topic “Living Today for Today.”

Other Professional Development Study:

Psychotherapy Networker Home Study Course: The 10 Best-Ever Anxiety Treatment Techniques

This course provided a package of highly effective clinical tools to help clients get control of their anxiety.

Psychotherapy Networker Online Study Course: The Frontiers of Trauma Treatment

This course focused on learning how to mobilize powerful somatic resources in trauma work with clients.

Reading List:Artful Therapy

Judith Aron Rubin, John Wiley & Sons, Inc., Hoboken. 2005

The Body Mind Soul Solution: Healing Emotional Pain Through Exercise

Bob Livingstone, Pegasus Books, New York. 2007

Counseling for Wellness: Theory, Research, and Practice

Jane Myers & Thomas Sweeney, Editors, American Counseling Association, Alexandria, Virginia. 2005

Counseling International Students – Clients from Around the World

Nancy Arthur, Kluwer Academic/ Plenum Publishers, New York. 2004

Cultivating Lasting Happiness: A 7-Step Guide to Mindfulness

Terry Fralich, PESI, Eau Claire, Wisconsin. 2007

Kyra

Carol Gilligan, Random House, New York. 2008

Letters to a Young Therapist. Stories of Hope and Healing

Mary Pipher, Basic Books, New York. 2003

The Mozart Effect

Don Campbell, Avon Books, New York. 2007

Motivational Interviewing in the Treatment of Psychological Problems

Hal Arkowitz, Henny Westra, William Miller, Stephen Rollnick, Editors, Guilford Press, New York. 2008

The Psychotherapy Networker. Issues from 2005-2008.

The PTSD Workbook: Simple Effective Techniques for Overcoming Traumatic Stress Symptoms. Mary Beth Williams & Soili Poijula, New Harbinger Publications, Oakland, CA. 2002

Secrets, Lies, Betrayals. The Body/ Mind Connection

Maggie Scarf, Random House, New York. 2004

Self Mutilation – Opposing Viewpoints

Mary E. Williams, Editor, Greenhaven Ross (Thompson Gale), Farmington Hills. 2008

Tales from a Traveling Couch

Robert U. Akeret, W. W. Norton & Co., New York. 1995

Thirteen Reasons Why

Jay Asher, Razorbill, Penguin Group, New York. 2007

Traumatic Stress. The Effects of Overwhelming Experience on Mind, Body, and Society, Bessel van der Kolk, Alexander McFarlane, and Lars Weisareth, Editors. Guilford Press, New York. 2007

Writing as a Way of Healing: How Telling Our Stories Transforms Our Lives

Louise DeSalvo, Beacon Press, Boston. 1999