

## Whats New(s) at Watercourse?

March, 2019 eNewsletter



Trying to survive the last of our winter cold? For indoor family fun, please see "it's always autumn" (it counts for winter too)

Click here

Join The Team

# We're Hiring!

Watercourse Counseling Center is looking to hire clinic staff to work with community referrals in our office at 3548 Bryant Avenue South. Clients come from diverse cultural backgrounds with a range of mental health concerns. Caseload could include adults, families, couples, or work with children.

The position would start as a part-time position but could grow into full-time work or be combined with a PT school-based position.

Watercourse will also be looking to hire a school-based clinician for the 2019-2020 school year. Clinicians interested in this opportunity should have experience with children and families and be interested in a fast-paced but collaborative environment. We prefer to hire someone with fluency in Spanish or Somali for this position but welcome applicants with experience with communities of color.

Please submit a resume and cover letter if you are interested in either position to

jobs@watercoursecounseling.com or contact Martha Olsen or Pat Rogers at 612-822-8227 for further information.

## **Monthly Features From Our Schools!**



Whittier International Elementary is one of our school-based program at Watercourse Counseling Center. We have partnered with Whittier for over 15 years, working hand-in-hand with administrators, social workers, teachers and staff to support students and our clients.

As changes are inevitable, we experienced some new shifts here. This past summer we said good-bye to our longstanding therapist, Lynn Overvoorde, as she moved on to new opportunities. She was a foundational rock to our program and influenced numerous staff and graduate interns with her clinical social work knowledge, expertise and relationship-building skills.

All was not lost, as Julie Koch provided some much needed continuity with her sixth year at Whittier. In December 2018 we added Anna James, a licensed marriage and family therapist, to our team. She offers significant expertise with a systemic and behavioral lens, providing the balance we were looking for as we move forward.

Rounding our staff out is Sarah Swanson, an MSW clinical intern from Augsburg College. Sarah is an easy going and motivated graduate student who is committed to learning school-based therapy work.

Our Whittier clinic is grateful for its large dedicated space that offers clients the environment that works for their needs, whether it is a space to do movement, a room designed for child-centered play therapy, or a less stimulating space to provide focused work without distractions. This year we are focused on improving our relationships with teachers and seeking ways we can provide extra support through group work and psycho-educational presentations. Our goal is to listen to the needs of Whittier and support an environment where everyone works together.







## **REPLACE SCHOOL - Meet our Andersen Staff!**



Julie Jong Koch, MSW, LICSW School & Office-Based Therapist

Julie is a licensed independent clinical social worker and psychotherapist at Watercourse Counseling Center in Minneapolis. She works in a school-based setting (K-5, High school) and also sees all ages in an outpatient setting. In her school-based work, she uses a relationship-focused and child-centered play therapy approach with added elements of TF-CBT, EMDR, expressive arts,

and other modalities as desired. She focuses primarily on developmental trauma, anxiety, and helping kids find ways to find calm in their minds and bodies when their outside world feels hard to navigate.

In her adult and adolescent work, she specializes in working with transracial adoptees, BIPOC (Black, Indigenous, People of Color), queer & trans individuals, as well as others who have experienced individual or community trauma or marginalization. She integrates her professional training and therapeutic skills with her lived experience as a queer-identified Korean adoptee.

Julie uses a relational and narrative approach, along with other modalities such as EMDR, DBT/CBT elements, NET, and others when appropriate. She believes that mental health & healing is connected to one's personal and social ecosystem, attachment history, somatic awareness, internal core beliefs, and identity integration.

Julie received her MSW from the University of Minnesota-Twin Cities where she was a Child Welfare Scholar, and also completed the Permanency and Adoption Competency Certificate through the U of MN's Center for Advanced Studies in Child Welfare. She is also fully trained in EMDR (Eye Movement Desensitization & Reprocessing), TF-CBT (Trauma Focused-Cognitive Behavioral Therapy), NET (Narrative Exposure Therapy), and Practicewise's MAP protocol.

Julie works individually with children (6+) & adolescents, as well as adults.



Anna James School-based Therapist

Anna James is a Licensed Marriage and Family Therapist in the state of Minnesota, with 10 years of experience providing educational, mental health, and living-skills supports to children and young adults. She received her Bachelor's degree in Child Psychology from the University of Minnesota,

and her Master's degree in Marriage and Family Therapy from Saint Mary's University of Minnesota.

Anna provides therapeutic services and mental health consultation at Whittier International

Elementary School through Watercourse's school-based therapy program.

Anna believes that positive relationships are instrumental in addressing individual and community development. Her therapeutic practice focuses on encouraging healthy relationships between family members, friends, and school staff. She provides an eclectic approach to mental health care, tailoring interventions based on attachment, behaviorism, and play to individual client's needs and learning styles.



Sarah Swanson, Practicum Student

Sarah acquired her BSSW at University of North Dakota and her LSW in 2017. She is currently pursuing her MSW at Augsburg University and will graduate in 2019. While completing her field placement as an undergrad at an elementary school in North Minneapolis, Sarah found an interest in working with school age kids, specifically in an urban environment. Sarah comes to students and families using a strength based approach and utilizes a culturally competent lens as she works with clients from a diverse background. She has a strong passion in working with LGBTQ+ kids and families and working with children who experience anxiety, depression and adjustment issues. Sarah is a mother of two and enjoys exploring the north shore with her family. She is active in dog rescues and is a foster home for dogs of all shapes, sizes and ages. She loves her city of Minneapolis and the diversity it brings on a daily basis.

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## How to Cope With Seasonal Affective Disorder

## **Overview**

Seasonal Affective Disorder (SAD) is a type of depression that comes and goes with the seasons, typically starting in the late fall and early winter and going away during the spring and summer. Depressive episodes linked to the summer can occur, but are much less common than winter episodes of SAD.

## Signs and Symptoms

Seasonal Affective Disorder (SAD) is not considered as a separate disorder. It is a type of depression displaying a recurring seasonal pattern. To be diagnosed with SAD, people must meet full criteria for major depression coinciding with specific seasons (appearing in the winter or summer months) for at least 2 years. Seasonal depressions must be much more frequent than any non-seasonal depressions.

#### Symptoms of Major Depression

- Feeling depressed most of the day, nearly every day
- Feeling hopeless or worthless
- Having low energy
- · Losing interest in activities you once enjoyed
- · Having problems with sleep
- Experiencing changes in your appetite or weight
- · Feeling sluggish or agitated
- Having difficulty concentrating
- · Having frequent thoughts of death or suicide.

#### Symptoms of the Winter Pattern of SAD include:

- Having low energy
- Hypersomnia
- Overeating
- · Weight gain
- Craving for carbohydrates
- Social withdrawal (feel like "hibernating")

Symptoms of the less frequently occurring summer seasonal affective disorder include:

- Poor appetite with associated weight loss
- Insomnia
- Agitation
- Restlessness
- Anxiety
- · Episodes of violent behavior

## **Risk Factors**

Save and ExitAttributes that may increase your risk of SAD include:

- Being female. SAD is diagnosed four times more often in women than men.
- Living far from the equator. SAD is more frequent in people who live far north or south of the equator. For example, 1 percent of those who live in Florida and 9 percent of those who live in New England or Alaska suffer from SAD.
- **Family history.** People with a family history of other types of depression are more likely to develop SAD than people who do not have a family history of depression.
- Having depression or bipolar disorder. The symptoms of depression may worsen with the seasons if you have one of these conditions (but SAD is diagnosed only if seasonal depressions are the most common).
- Younger Age. Younger adults have a higher risk of SAD than older adults. SAD has been reported even in children and teens.

The causes of SAD are unknown, but research has found some biological clues:

- People with SAD may have trouble regulating one of the key neurotransmitters involved in mood, serotonin. One study found that people with SAD have 5 percent more serotonin transporter protein in winter months than summer months. Higher serotonin transporter protein leaves less serotonin available at the synapse because the function of the transporter is to recycle neurotransmitter back into the pre-synaptic neuron.
- People with SAD may overproduce the hormone melatonin. Darkness increases production of
  melatonin, which regulates sleep. As winter days become shorter, melatonin production increases,
  leaving people with SAD to feel sleepier and more lethargic, often with delayed circadian rhythms.
- People with SAD also may produce less Vitamin D. Vitamin D is believed to play a role in serotonin activity. Vitamin D insufficiency may be associated with clinically significant depression symptoms.

## Treatments and Therapies

There are four major types of treatment for SAD:

- Medication
- Light therapy
- Psychotherapy
- Vitamin D

These may be used alone or in combination.

#### Medication

Selective Serotonin Reuptake Inhibitors (SSRIs) are used to treat SAD. The FDA has also approved the use of bupropion, another type of antidepressant, for treating SAD.

As with other medications, there are side effects to SSRIs. Talk to your doctor about the possible risks of using this medication for your condition. You may need to try several different antidepressant medications before finding the one that improves your symptoms without causing problematic side effects. For basic

information about SSRIs and other mental health medications, visit NIMH's Medications webpage. Check the FDA's website for the latest information on warnings, patient medication guides, or newly approved medications.

#### **Light Therapy**

Light therapy has been a mainstay of treatment for SAD since the 1980s. The idea behind light therapy is to replace the diminished sunshine of the fall and winter months using daily exposure to bright, artificial light. Symptoms of SAD may be relieved by sitting in front of a light box first thing in the morning, on a daily basis from the early fall until spring. Most typically, light boxes filter out the ultraviolet rays and require 20-60 minutes of exposure to 10,000 lux of cool-white fluorescent light, an amount that is about 20 times greater than ordinary indoor lighting.

#### Psychotherapy

Cognitive behavioral therapy (CBT) is type of psychotherapy that is effective for SAD. Traditional cognitive behavioral therapy has been adapted for use with SAD (CBT-SAD). CBT-SAD relies on basic techniques of CBT such as identifying negative thoughts and replacing them with more positive thoughts along with a technique called behavioral activation. Behavioral activation seeks to help the person identify activities that are engaging and pleasurable, whether indoors or outdoors, to improve coping with winter.

#### Vitamin D

At present, vitamin D supplementation by itself is not regarded as an effective SAD treatment. The reason behind its use is that low blood levels of vitamin D were found in people with SAD. The low levels are usually due to insufficient dietary intake or insufficient exposure to sunshine. However, the evidence for its use has been mixed. While some studies suggest vitamin D supplementation may be as effective as light therapy, others found vitamin D had no effect.

## Learn More

Free Booklets and Brochures

You can download or order free copies of the following booklets and brochures in English or en Español:

- Depression: What You Need to Know: This booklet contains information on depression (depressive disorder or clinical depression), including signs and symptoms, treatment and support options, and a listing of additional resources.
- **Depression:** This brochure describes the two most common types of depression: major depression, and persistent depressive disorder. It lists symptoms, treatment options, and how the condition may look different in women, men, seniors, and children.
- **Depression and College Students:** This booklet describes what depression is, how it affects college students, and treatment options.
- **Teen Depression:** This flier for teens describes depression and how it differs from regular sadness. It also describes symptoms, causes, and treatments, with information on getting help and coping.

provided by National Institute Mental Health

## Volunteer for our Board!



Watercourse Counseling Center is looking for board members who have a strong interest in community mental health and who would support this mission at our agency. We provide services for a diverse base of clients in Minneapolis through both our school-based mental health program and our community clinic. Our board meets monthly with a time commitment for board activities of about 4 hours/month. We have a strong interest in recruiting new board members with backgrounds in finance, communications/marketing, fund development, HR, and Social Justice/Community Engagement and/or new board members interested in representing communities that are undeserved in the mental health delivery system. Please send resume and letter of interest to Martha Olsen (martha@watercoursecounseling.org).

#### **Click for Board Description**

## Ways to Connect with us!

- ~ Follow us on Facebook! We share resources, events and stories we hope you find useful!
- ~Watch our web-site for additional content watercoursecounselingcenter.org
- ~ Purchase something from our Play Therapy Wish List here!
- ~ Sign up for **Amazon Smile**! No extra cost to you and you can still support us!
- ~ Volunteer with a group to make arts & craft packs to be used in our therapy offices. Find a group of friends/family, and **contact us** to express interest!
- ~ Power our mission through a **financial contribution**, and help us finish out the

#### 2018-2019 school year strong!

~ **Community garden opportunity:** Watercourse Counseling Center has multiple gardens on our property (three rain gardens, and garden and planter space for additional vegetable and annual plantings).

We started the gardens in collaboration with the Southwest Senior Center but since that program closed would be interested in continuing this community garden tradition with others in our neighborhood.

Please contact Martha Olsen, 612 767-8654 if you are interested in helping with the garden and contributing to the beauty and health of our neighborhood.





## Follow us on social media!









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