



SPRING/SUMMER 2026

newsletter



OFFICIAL NEWSLETTER OF THE WCSU COUNSELOR EDUCATION PROGRAM

What is CACREP?

The Council for Accreditation of Counseling and Related Educational Programs (CACREP) is a national organization that sets rigorous standards for graduate-level counselor education programs. Its mission is to ensure students receive a high-quality education that prepares them for the counseling profession.



What Does CACREP Accreditation Mean for Students?

- **High quality preparation**
 - CACREP standards ensure that coursework, fieldwork experiences (practicum, and internship) are aligned with professional expectations and ethical practice in the counseling field.
- **Easier licensing and credentialing**
 - Many state licensing boards and national certification organizations recognize CACREP-accredited degrees. Graduates often face fewer obstacles and less paperwork when applying for licensure or certification.
- **Career flexibility and mobility**
 - CACREP accreditation can make it easier to pursue licensure or employment in different states, an important advantage in an increasingly mobile profession.
- **Employer confidence**
 - Employers value CACREP-accredited programs because they know graduates have received consistent, rigorous training.
- **Professional identity**
 - Clients and communities benefit from counselors who have been educated in programs that meet nationally accepted professional standards.



Spring Events:

- **3/27: Connecticut Counseling Association (CCA) Conference Courtyard By Marriott - Hartford/Cromwell**
- **4/9: Counselor Corner guest speaker Glenn Millings via Zoom**
- **4/10 - 4/12: NYMHCA Annual Conference, Albany, NY - Charting the Course: Envisioning the Future of Mental Health Services**
- **4/25: Counselor Education End-of-Year Celebration! Student Center, Midtown Campus at 1 PM**
- **5/12: CECE Exam at 5PM**
- **5/19: 2026 Graduate Commencement Ceremony, Ives Concert Hall, Midtown Campus at 5 PM**
- **5/21: Connecticut School Counselor Association (CSCA) Annual Conference Trinity College, Hartford, CT - AI: Always Innovating 7:30AM - 3:30PM**
- **11/11 - 11/13: NYSSSCA Annual Conference, Turning Stone Casino, Verona, NY**



Counselor's Corner Faculty Feature: Professor Darragh - School Counseling - Part Two by Sarah Hernandez



In the eleven years that you have worked as a school counselor, have you seen any shifts in the profession?

I will refer you to a book called “The Anxious Generation,” that addresses cell phone use and the effect on the mental health of Generation Z students. I think school districts are doing a really good job with the cell phone policy in the State of Connecticut. I haven't seen a cell phone all year. In pre-COVID years, students were on their cell phones at lunch, in the hallway, and it was a rough period; a lot of my day would be spent addressing things that happened in the cafeteria while students were on their phone in snapchats or conversations. This would result in a lot of crisis counseling instead of school counseling activities. With the strict policies in place now, though, it's not really a problem in schools, which I am very grateful for, as now I can do some really good work with kids, whether it's teaching in classrooms or group health meetings, and my daily routines. Another change has been the increase in counselor-to-student ratios. Lastly, as Danbury's population has shifted in recent years, my job has become more varied. I work with families who are recent immigrants, rich, poor, and middle class, with all their unique needs. It's all very interesting and I love it.



When a clinical mental health counselor meets with their client for the first time, the presenting problem is known, whereas a school counselor has no such advance notice of students' needs. What is that like?

Since I get to travel with my kids for three years as they progress from 6th to 8th grade, I build that relationship and trust from the beginning. I'm constantly making connections with them—in classes, learning their names; I memorize all 375 of my kids' names. I talk to their families, and I take notes. When a kid comes in, I can talk about the fact that I know their brother or other family members. I also make myself familiar with their files, so I understand their background and emotional needs or problems. But, we always need to be in the moment.

What are your biggest challenges?

Danbury is the last to receive state funding, which translates to less services and buildings that are old. The tendency of parents to want to protect kids from difficulty, sadness, or failures can also be challenging from a counseling perspective. Another challenge is the pressure to want to save every single kid, to see every person graduate every single year; it's important to learn to let go of what is out of my control, and that can be difficult. I remind myself that I see my students only 7 hours in each day and just 180 days out of each year.

Is there anything that you have experienced in your work that has been unexpected or surprising?

Every day can be surprising and unique. Kids will show up at your door with suicide ideation or tell me that they are hurting themselves. My biggest fear is that I will miss a kid. Sometimes there will be several students at the end of the day that I didn't get to see because of other demands in my schedule, and even though I checked to make sure none are emergencies, there's always the chance that I will get an e-mail at night that is an emergency, one that will require immediate action.



Love, Passion and Legacy– Victoria’s (SC, Year 3) Reflection on Preparing to Present at the 2025 CSCA Conference!



Coming up with a poster project to present at the CSCA conference can seem very daunting to many, at least that’s what it felt like to me last year. I didn’t feel like I had much to talk about considering I was a second-year student, and nothing spoke to me during my practicum. I felt a lot of pressure at the time to create something that other professionals could find impressive, and it was amid this internal battle that I realized I was looking at it backwards. The graduate posters are not meant for the graduates to impress other professionals, but for us to showcase the projects and experiences that brought out our passion for counseling. My poster last year wasn’t even related to students, or an experience I had at my practicum! I presented on my group counseling proposal project in Dr. Gutheil’s group counseling class, which was deeply personal to me and inspired by an experience that I had gone through earlier that year.

Was my project completely different from everyone else’s?

Absolutely– not a single similarity, maybe some if you squinted really hard.



Did I have data to showcase?

Yes– from related research, but nothing from the group itself since it was a proposal.

Was it perfect?

Depends on the perspective you’re looking from– I’m positive that there would have been many flaws if I had run the group (not to mention it was quite the sensitive topic). But, this project lit up my school counseling soul in a way that no other topic could – and that’s what made it perfect.

So, if you’re ever on the fence about presenting or choosing a topic, I encourage you to remember that presenting is about you. Everyone wants to see what you’re passionate about, what speaks to you, what legacy you want to leave in the counseling world. People want to see the vision you will be bringing into the world and how your passions will enrich our field.

Taking my own advice, this year I will be presenting on an initiative I took a chance with at my internship site, Berlin High School. My counseling philosophy is centered around the belief that us counselors are the light and cornerstone of our school communities. Studio 2:15 is an initiative that brings students and staff together to strengthen our community by creating fun events where everyone has the space to engage outside of the classroom.

If you come to this year’s CSCA Conference (which you all should), you’ll find me in the lunch hall with a poster and a concept that aren’t perfect, but light up my heart and the smiles of my school community. You will see the love, the passion, and the legacy I plan to leave on the counseling world.





Student Spotlight: Marcus & Dan (CMHC, Year 3) Presenting at CCA Conference in Fall 2025



Q: What inspired you to choose the topic of accessibility in counseling for immigrant populations?

Dan: We created this poster for our advanced group class, where we could choose any topic for our project. We were drawn to the idea of exploring accessibility for immigrants in group therapy because of the diversity we see at our internship, where we work with kids and their parents. We realized that in our future careers, we'll likely work with diverse populations including immigrants or those with English as a second language, so we wanted to learn more about how to support them.

Marcus: For me, it was also about highlighting underrepresented groups in therapy. There's a lot of stigma around seeking therapy within immigrant communities. Therapy is often seen as a very Western concept, so we wanted to spread awareness about the resources available to immigrant populations and help break down that stigma.

Q: What advice would you give to someone creating a poster for a conference?

Marcus: Pick a topic you're passionate about, something that really hits home for you. For us, this topic was personal because of our own family backgrounds. Knowing how important it is to so many people inspired us to do our best, and that personal connection helped guide the direction of our poster.

Dan: I agree that it's helpful to choose a topic that connects to your real-life experiences or your current internship work. People want to hear how your research applies to the real world. Sharing anecdotes or examples from your own experiences can make your presentation more relatable and impactful.

Marcus: And that's why real stories matter. Numbers and statistics are important, but it's the lived experiences that bring humanity to the topic and make it resonate with people.

Q: What was it like presenting your poster at the CCA conference?

Dan: It was less daunting than we expected. We weren't standing in front of a big audience giving a lecture. Instead, we were stationed by our poster and people could walk around the room and stop by to ask questions. Some people stayed for longer conversations, while others just asked a quick question or two. It was a very engaging and casual environment.

Marcus: It really was a great experience. Even though we're not licensed counselors yet, everyone was welcoming and genuinely interested in our topic. There was a good mix of students and professionals, and we learned a lot from the conversations we had.

Thank you, Dan and Marcus, for sharing your insights and experiences. We wish you continued success in your internship and future counseling careers, and we look forward to seeing your impact on the field of mental health.



Access to CBT Group Therapy for Immigrants

Introduction

- Current research reveals that there is a significant disparity between U.S. citizens and immigrant health care access compared to immigrants.
- It is essential to understand the cultural, financial, and linguistic barriers that contribute to the lack of mental health services sought for by immigrants.
- Through analysis of recent research studies on utilizing Cognitive Behavioral Therapy (CBT) with immigrant populations, we look to explain how mental health professionals can increase immigrant participation in therapy.

Limitations

- Language barrier:** Lack of fluency in English can hinder access to mental health services for immigrants and their families.
- Cost:** Many immigrants, especially those with lower socioeconomic status, may struggle to afford mental health services.
- Cultural stigma:** Mental health issues are often stigmatized in many cultures, leading to reluctance to seek help.
- Health insurance:** Many immigrants, particularly those with temporary visas, may not have access to health insurance, limiting their ability to pay for mental health services.

How Do We Help Immigrants Seek Services?

Address the Barriers

- Language:** Offer services in multiple languages or use professional interpreters.
- Cost:** Provide sliding scale fees or free services for low-income individuals.
- Cultural:** Hire bilingual and bicultural staff, and offer culturally sensitive care.
- Insurance:** Assist with navigating insurance systems and enrollment.
- Stigma:** Conduct community outreach and education to reduce stigma.

Research on CBT and Immigrants

- Studies indicate that immigrants with co-occurring substance use and mental health diagnoses face more significant barriers to care.
- Participants who received the self-management of their illness, provided them with effective skills, and they were generally positive about their relationship with their clinician (Park et al., 2021).
- The research was conducted by Wito et al. also demonstrated the effectiveness of CBT with the majority of immigrant clients, regardless of their ethnic background, and one in the United States.
- Through increasing cultural adaptation to the CBT treatment, both clients' received increased effective treatment that had positive impacts on their mental health, specifically helping with social anxiety (Hosain et al., 2022).

Conclusion

Immigrants struggle to access mental health services for a variety of reasons, such as but not limited to the following: language barriers, migrating to unfamiliar environments, financial limitations, insurance barriers, and their own cultural norms. Cognitive Behavioral Therapy techniques such as mindfulness, skills training, and exposure therapy have been shown to positively impact immigrants in the U.S., especially when implemented through relevant cultural lenses. Such treatments done in a group setting can further increase immigrant commitment to participating in therapy and help break stigmas surrounding mental health treatment within these communities. In order for immigrants to work through these barriers and receive mental health services, we must create more pathways for immigrants to receive services, continue to increase availability of trauma mental health services, and empower immigrant communities to easily access information regarding mental health services.

References

Davidson, C. (2021). *Globalizing Counselor Psychology: Immigrant and Refugee Populations*. Journal of Health Care and Psychology, 18(1), 1-14.

Hosain, A., Feroz, S., & Khan, S. (2022). *Immigrant and Refugee Mental Health: A Review of the Literature*. Journal of Health Care and Psychology, 19(1), 1-14.

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A Taste of Our Community!



Graduation Event May
2025



Your Professors Met Our
Mascot



Fall Event 2025

Lemony Chicken-Feta Meatball Soup with Spinach

Adapted from a New York Times recipe submitted by Yasmin Fahr

- 1 lb. ground turkey or chicken
- 1/2 cup crumbled feta
- 1/4 plus 1/2 cup oats
- 1/2 small onion (red or white), diced
- 1/2 small onion (red or white), grated
- 1/3 cup fresh (less if dry) dill leaves & stems, chopped
- 1 TBS ground cumin
- 1/2 tsp. plus 1 TBS ground turmeric
- salt & pepper
- 3 TBS olive oil
- 1/2 tsp. red-pepper flakes, plus more for serving
- 4 cups chicken broth (probably more)
- 4 cups baby spinach
- 2 lemons (juice of both, grated zest of one)

Meatballs

Put into a bowl:

chicken, feta, 1/4 cup oats, grated onion, cumin, all but 2 TBS of the dill, 1/2 tsp. turmeric, 1 tsp. salt & pepper to taste.
Form into balls. Set aside.

Soup

Heat oil in wide pot on medium. Add diced onion, pinch of salt.

After a couple of minutes, add 1 TBS turmeric & red-pepper flakes.

Stir, then push onions to side of pan. Add a little more oil if dry. Add meatballs and brown, about 5 minutes.

Add lemon zest, broth, 1/2 cup oats. Be gentle to avoid breaking meatballs. Bring to low boil then reduce to simmer. Add salt.

Cook to soften oats and cook meatballs, about 4 minutes. Stir occasionally to prevent sticking.

Add spinach and lemon juice. Cook just until spinach wilts. Serve with a sprinkle of red-pepper, more dill, and extra lemon if desired.



Victoria Presenting at
CSCA Conferences '25



Dan and Marcus
Presenting at CCA
Conference Fall '25



Saturday Lab



Audra at Cool Springs Campground. NorCal at its best!

Dr. G exploring Denali State Park and hanging out with the local moose.

Sam's trifecta: Virginia Beach, the Outer Banks & Lake Carmel.

Sarah wandering Edinburgh's winding cobblestone streets!

Lia + Disney + family = the happiest combo on Earth



Adrian between Braşov's mountain charm in Romania and the iconic canals of Venice.

Amanda in Italy and France, taking in every moment of an extraordinary vacation!

Suzie's family winter in Quebec...cobblestones and sled dogs.



Tina taking in Cambodia's ocean views and the beautiful towns that make it unforgettable.

Jay enjoying the view from a balcony in Beaufort County with its quiet waterways and lowcountry sunsets.

Val visiting Punta Cana, loving the beach life from the sand to the swings!



Emily enjoying Sarasota, FL from the beach to the chill palm lined streets.

Andy vacationing between Panama's ocean beauty and the clear mountain lake of Panajachel, Guatemala.

Jenn taking in the boats off Mullet Bay Beach and the wide blue sky of Saint Martin.

Barbara appreciating Croatia's shifting skies, its coastal beauty, and the freedom of the open water.



Jess visiting Ogunquit, Maine, from the sandy beach to the rocky shoreline.

Pedro and his family surrounded by the natural charm of São Miguel, Azores.

Kellz in Cartagena, Columbia taking in the bright colors, the flags above, and the joy of being together.



Counselor's Corner Vacation Memories

