WE UNDERSTAND, AND THEN ACT.
WE ENCOURAGE AND EMPOWER
CHILDREN, FAMILIES, SCHOOLS, AND COMMUNITIES.
WE ADVOCATE FOR POLICY CHANGES.
THIS IS COMMUNITY ENGAGEMENT.
THIS IS SOCIA LLY RESPONSIBLE PRACTICE . . .

TRANSFORMING IN JUSTICE
TRANSFORMING ALL COMMUNITIES INTO JUST, HEALTHY, THRIVING ENVIRONMENTS MEANS ADDRESSING SOCIAL CONDITIONS THAT FOSTER COMMUNITY STRENGTHS.
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Gemeinschaftsgefühl
(geh-MINE-shafts-geh-foohl)

1. (literally) “community engagement” or “social interest,” this Adlerian term is used to describe one’s connectedness and interest in the well-being of others that enhances or pre-conditions psychological health

2. The revolutionary notion that Alfred Adler proposed in turn-of-the-century Vienna that drives the ground-breaking and far-reaching curricula and commitment to community engagement at the Adler School
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OF THE WORLD’S URBAN DWELLERS, 1 OUT OF 3 LIVES IN SLUM CONDITIONS. THE WORLD PRODUCES ENOUGH FOOD TO FEED EVERYONE. YET 1 IN 7 PEOPLE GO HUNGRY. 30% OR MORE OF HOMELESS PEOPLE IN CANADA AND THE U.S. HAVE MENTAL ILLNESS. BETWEEN 2009 AND 2012, AMERICAN STATES CUT $4.35 BILLION IN PUBLIC MENTAL-HEALTH SPENDING FROM THEIR BUDGETS. BY 2031, A PROJECTED 48% OF CANADIAN ADULTS WILL LACK THE LITERACY SKILLS REQUIRED TO COPE IN MODERN SOCIETY. LGBT YOUTH ARE 2 TO 3 TIMES MORE LIKELY TO ATTEMPT SUICIDE.
FROM THE PRESIDENT

WE CAN TRANSFORM THIS WORLD.

THE POOR, THE HUNGRY, THE HOMELESS.
The illiterate. The forgotten, the pushed-aside, the thrown-away. Over the last six decades, many systemically ingrained disadvantages for marginalized populations have improved—and others have increased exponentially. Policies that are poorly considered, decisions that are all-too-well considered for those they advantage, and inattention to the social determinants that significantly impact human well-being are often the drivers.

As socially responsible practitioners across multiple disciplines, our concern is changing the conditions that marginalize entire communities and their well-being. Across 2012-2013, we have celebrated 60 years since Rudolf Dreikurs, Harold Mosak, and Bernard Shulman came together to establish our foundation. In 1952, they established the Institute of Adlerian Psychology, today renamed the Adler School, to train practitioners who apply Alfred Adler’s ideas about well-being to ensure healthy community life.

Like our School’s founders, our faculty, student, and alumni practitioners are passionate about challenging traditional approaches. We accept responsibility and accountability as change agents for health and well-being. Our vision is to transform social injustices into health equities and social justice for all populations. Our focus is less about what’s wrong with people—and more about what can happen in communities of people—about what is possible.

In this Gemeinschaftsgefühl, published during our 60th anniversary year, faculty and alumni address issues such as population well-being, mental health and primary care, trauma-informed care in communities, and equality in recognition of relationships and marriages. What they have to say expresses the optimism and pragmatism that are hallmarks of Adlerian thinking and practice—emphasizing encouragement and the human capacity for strength, creativity, and positive change. They express how advancing social justice across a range of disciplines can transform health and well-being for all our communities.

The Adler School, across our 60-year history, is itself about transformation. Transforming our thinking, our disciplines, and our practice into myriad and multidimensional and fractal kinds of work, especially targeted to those most in need. At our School-wide retreat this spring, I shared a challenge that I extend to you today. There is great need for change in this world. Consider what personal, professional, practice, and community transformations inspire you—and how you can contribute to that transformation in social justice.

Raymond E. Crossman, Ph.D.
President
Adler School of Professional Psychology
Throughout our 60 years, our School faculty and the practitioners they train have applied this approach to an ever-growing scope of social conditions and determinants of mental health. Population well-being and happiness. Collaborative systems for medical and mental health care. Clinical training with global context. Trauma-informed care and education, for individuals and communities struggling with violence. Policies that support the well-being of all children, families, schools, and communities.

This—and much more—is the work of our faculty and practitioners. This practice transforms social conditions and, ultimately, health outcomes—advancing social justice for all communities.
ALFRED ADLER PROPOSED that humans strive for significance and belonging: We want to belong and connect in the community. As Jane Griffith and Robert Powers describe in their 2007 Lexicon of Adlerian Psychology, Gemeinschaftsgefühl is society’s ultimate goal, to have awareness that we all belong in the community, and know our responsibility in shaping the community.

This is the foundation of Adlerian theory. As good theory must, it explains human phenomena, predicts future outcomes, provides solutions to problems, and can be tested.

Adlerian theory explains human phenomena based on philosophical tenets of holism, phenomenology, and teleology. This means Adlerians understand people by:

- Seeing them in their socio-cultural context as well as acknowledging the interconnectedness of the mind and body (holism);
- Comprehending their subjective perspective (phenomenology);
- Ascertaining their motivations, and their short-term, long-term, conscious and non-conscious goals (teleology).

Through his theory, Alfred Adler made many predictions. For example, in his 1932 article “The structure of neurosis,” he predicted that children who experienced an overburdening childhood situation such as an abusive or neglectful home would struggle. The questions to be asked in this situation include: How do we understand a boy failing at home and at school? How is he responding to the lack of emotional or material resources, such as lack of love and/or food? How does this affect his brain development? How are the caregivers functioning? How is the family connected in their culture or in the community? Do the caregivers have resources? Is the family in a food desert? Is the school overcrowded? Are the teachers overwhelmed? What is the school’s discipline policy? Is the neighborhood safe? What motivates this child? What is his perspective?

With answers to such questions, we can understand, and then act. We can intervene by encouraging and empowering the child, the family, the school, and the community. Adler in Vienna argued for reform in schools and parenting to combat the high rate of adolescent suicide. This is community engagement and socially responsible practice.

We can advocate for policy changes. According to Harold Mosak, Rudolf Dreikurs fought his fellow psychiatrists to establish licensure for clinical psychologists in Illinois, filling the void of treatment providers. This is social justice.

The interweaving of Adler’s theories into other theories testifies to its relevance and to the evidence it can be tested. Well-known theorists Horney, Maslow, Jung, and Rogers have endorsed Adler’s ideas along with contemporary theories, such as cognitive, constructivist, evolutionary, and solution focus, as well as positive psychologies.

Applying Adlerian theory to explain human phenomena, predict future outcomes, provide solutions to problems, and ensure it is tested is important in our action and practice. However, Adlerians need to do more. Aware of our role and our responsibility in shaping community, we need to continue to engage with the community and in scholarly research in ways that demonstrate the significance of Adler’s theory for the next 60 years and beyond.
Christopher Holliday, Ph.D., M.P.H., is Director of the Center for the Social Determinants of Mental Health at the Adler School Institute on Social Exclusion. It has been established as a national center of excellence for the generation and dissemination of knowledge on how social conditions influence public mental health, particularly that of the most marginalized and disadvantaged.

ESSAY

TRANSFORMING GLOBAL THINKING:
MEASURING HAPPINESS AND POPULATION WELL-BEING

You know the feeling you get when you are in a community where there is a sense of security, a sense of connectedness or belonging, that all is well? Psychologists, social scientists, economists, anthropologists, and others have coined various terms to describe that sense: thriving, well-being, and most recently, happiness.

How do you measure happiness? Can you enhance it in communities where it exists? Can you create it in communities where it doesn’t currently exist?

Researchers have examined varied ways to answer these questions. Over the last 60 years in the United States, the most common way to measure well-being has been through an economic indicator: Gross National Product (GNP). Yet, in 1968, U.S. presidential candidate Robert F. Kennedy summarized very well the inadequacy of economic growth as a measure of national well-being:

“...GNP does not allow for the health of our children, the quality of their education, or the joy of their play. It does not include the beauty of our poetry or the strength of our marriages, the intelligence of our public debate or the integrity of our public officials. It measures everything, in short, except that which makes life worthwhile.”

Since then, interest in finding new measures has only grown. We have developed useful measures for health and education, in addition to indicators for economic progress. But there still exist no definitive indicators of the more complex and rich concept of national well-being or happiness.

Efforts to develop well-being and happiness indicators at the national level are being undertaken in countries like Burma, Australia, and the United Kingdom. Researchers in community psychology, sociology, and political science have developed useful ways to measure well-being such as social cohesion, sense of community, and citizen participation—useful, but self-reported and therefore less reliable. There are more objective well-being indicators such as education, life expectancy, and median earnings, but they fail to reflect the aspects of life that Kennedy spoke about. They fail to get at the heart of well-being and happiness.

The field of “positive psychology,” pioneered by Martin Seligman at the University of Pennsylvania, provides a fertile ground for developing measures of population well-being or happiness. In his 2000 article “Positive Psychology: An Introduction,” Seligman notes that traditional psychology is largely concerned with diagnosing mental illness and treating disorders such as depression and anxiety. Positive psychology, on the other hand, focuses on optimal functioning: what’s right with us, what enables us to live fulfilling, happy lives.

Alfred Adler’s focus on empowering discouraged individuals to resolve problems by recognizing their strengths and assets, rather than focusing on their weaknesses, aligns beautifully with positive psychology’s focus on strengths that foster healthy communities, such as justice, responsibility, civility, purpose, and tolerance. In fact,
Adler’s 1933 paper on striving and social interest outlines many of the tenets being popularized in the recent movement, giving him distinction as the “Grandfather of Positive Psychology.”

Now we need to turn our attention to the social structures, such as laws, public policies, institutional behaviors, and cultural values, that impact social determinants and create the conditions required to foster those strengths in communities. This will be an important area of work for the Center for the Social Determinants of Mental Health: to shed light on how to create social conditions that foster the development of the strengths that make communities healthy, thriving, and “happy” places to live, work, and play. To foster the development of those things that Kennedy said “make life worthwhile.”

TRANSFORMING POPULATIONS: IMPROVING QUALITY OF LIFE FOR ALL

BRITISH COLUMBIA (BC) is a wealthy province, yet many of our residents are underserved—particularly in terms of access to mental health services. At the city level, here in Vancouver, we have considerable social inequity. Our Downtown Eastside (DTES) is known for its poverty, drug abuse, sex trade, and single occupancy “hotels” where many people subsist. The DTES is also a vibrant community, where residents seek quality of life and struggle against gentrifying forces that want to move in and “clean things up.” Vancouver is a very wealthy city where housing can be exorbitantly expensive—decent single-family homes cannot be bought for less than $1 million, and rental housing is in extremely short supply. Daily, our city newspaper details stories about people “sponsoring” elementary schools’ food programs, aimed at providing breakfast for youngsters.

This city has heart and is interested in change, but needs change agents who are trained, prepared, and able to work on a range of levels to treat, research, and advise city residents about some best practices that will improve quality of life for all. Quality of life must also be addressed at the provincial and national levels. For example, at present, only medical healthcare is covered by BC’s universal healthcare system. This belies what we know about the interconnections between physical and mental health. Many visits to general practitioners are actually for mental health concerns. Psychologists, including myself, are searching for better options.

Collaborative care strategies where healthcare professionals are housed in the same buildings and funded provincially are one option. Adding psychologists to our provincial healthcare plan is an alternative that would provide psychologist services to those who need them. True universal healthcare that provides for the physical and mental health of our residents is an important next step toward making our society more equitable and improving quality of life for all.

I have had the privilege of working with underserved and oppressed peoples in Canada and the United States. Though too many people are oppressed by the “-isms” of our society, there are many with the power—and will—to make change a reality. They can be challenged to invest some of their own power and resources, including money, time, and status, to enable others, as well as future generations, to succeed.

Residents of this province can anticipate a positive ripple effect into our communities with the entry of our first Psy.D. graduates from the Adler School in Vancouver. The program will emphasize Alfred Adler’s social justice focus, and will provide training that is uniquely suited to address the challenges faced by many communities in BC today and throughout Canada.

Our graduates will certainly learn excellent clinical skills, be able to digest and utilize research, and be ready to provide the range of direct clinical intervention, supervision, consultation, and teaching abilities expected of clinical psychologists. They will also learn to consider systemic barriers to success and well-being for individuals; and the importance of context, with regard to key oppressive agents such as racism, “able-ism,” and poverty. They will learn and research ways to advocate for and effect needed changes. Our graduates will work in a range of traditional clinical settings—in hospitals, prisons, schools, and First Nations reserves.

They will also serve as change agents for a better society. I am honored to contribute to their learning and to witness that process unfold.
1 IN 5 PEOPLE IN CANADA EXPERIENCES A MENTAL HEALTH PROBLEM OR ILLNESS, AT TOTAL COST TO THE ECONOMY OF MORE THAN $50 BILLION.
Gastric distress, fatigue, heart palpitations, high blood pressure, and other problems naturally ensue. Once again, primary care and behavioral medicine psychologists can help address these issues.

By integrating into the healthcare system to reduce patients’ anxiety and promote behavioral change, primary care and behavioral medicine psychologists can facilitate improved health worldwide. The power of psychological interventions surprised me when I first worked in healthcare settings. For example, in my own practice and in the literature at large, I found that chronic pain patients’ pain levels are reduced, on average, by about 50% through psychological intervention. Similarly, I found the magnitude of the need for psychological services staggering. Estimates indicate that up to 75% of primary care patients have unaddressed psychosocial complaints.

In my view, primary care psychology and behavioral medicine are integral facets of social justice and the Adler School’s mission. Primary care psychology is inherently team-oriented and collaborative; in conjunction with behavioral medicine, it reduces the need for unnecessary medical procedures, which benefits individuals as well as society as a whole. We address issues such as healthcare disparities, and how to reduce them, as part of the curriculum, confluent with the work of the Adler School’s Institute on Social Exclusion and its Center for the Social Determinants of Mental Health. Through behavioral medicine and primary care psychology, prospective practitioners have the opportunity to develop meaningful careers in a growing area of need and social benefit.
As society changes due to globalization, people are changing. It is critical that students are prepared and committed to understanding that trend. Within the field of psychology, in this era of globalization, it is imperative that future practitioners gain experience in addressing challenges that are transnational and rooted within cross-cultural conflict. However, within traditional clinical psychology training programs, the opportunities for students to meet these growing global challenges are rare.

Recognizing this, we have created global immersion experiences at the Adler School to help students gain a deeper understanding of how human rights and globalization issues here in the United States and abroad impact well-being. The goal is for students to learn strategies to address these issues at the macro-, meso- and micro-levels. In this coursework, students are exposed to peace psychology and forgiveness psychology principles, along with learning the effectiveness of more macro-level techniques. They gain understanding of how interventions such as truth and reconciliation commissions address human rights abuses, and create peace-building techniques to heal people who have experienced historical trauma.

In working with and accompanying colleagues and students on these course experiences, I have seen that through the opportunity to be immersed in another culture, and to understand the issues of that culture, students are better able and prepared to understand aspects of our own culture and society that before went unnoticed. Social exclusion and social inequities, for example, become intolerable to students following their human rights and international immersion course experience. I have seen students respond to their changed understanding of human rights issues by wanting to be advocates for change, and by rethinking their purposes in the field of psychology.

Students walk away living the meaning of “ubuntu,” an African concept that means “I am because you are.” As they engage with international and local communities, they understand that their liberation is tied to that of others.

This summer, one of our courses here at the Adler School will take 10 students to Rabat, Morocco. Over the course of the class, we will tackle how the intersectionality of women’s, ethnic/racial, and LGBT issues, as well as religion, impact mental health in the United States and Morocco. We will examine strategies to address those issues—to create structural change.
ON A MONDAY IN MARCH, not long after noon, a father and his baby girl were inside a car in Chicago’s Woodlawn neighborhood. Shots rang out, leaving the 6-month-old baby, Jonylah, mortally wounded. Her father, Jonathan, the target of the shooting, was struck by multiple bullets and fought to survive. The crime devastated many, particularly in Woodlawn, who could not erase from their minds the image of smiling, perfect baby Jonylah. Her death intensified rage over the death in the streets that some had begun to overlook.

The next Saturday, I had the good fortune to be invited by members of the Woodlawn Public Safety Alliance to meet with a group of childhood gatekeepers that included teachers, recreation managers, program workers, and concerned adults at the Dulles School of Excellence. I was asked to speak with them about childhood trauma. Our meeting took place in a well-used community center in the Parkway Gardens housing development, near the site where Jonylah and Jonathan were shot. Other Parkway Gardens residents joined us, and my presentation began.

In February, I had attended a master trainer program for “Community Resilience Coaches” to educate people about the Adverse Childhood Experiences (ACEs) Study, a body of ongoing collaborative research between the Centers for Disease Control and Prevention, and Kaiser Permanente. This study is groundbreaking in that it provides massive evidence showing how common childhood stressors can dramatically change health outcomes and the life expectancies of those who experience them.

Through ACEs, stressors measured include physical, sexual, and emotional abuse; physical and emotional neglect; and common hallmarks of household dysfunction such as homes where people served time in jail or prison; abused substances; lost a parent due to divorce, abandonment, or death; or witnessed domestic violence, for example.

Analysis of longitudinal data suggests that individuals with six or more such adverse experiences, or ACEs, die on average 20 years sooner than those with no ACEs. Brain research corroborates these findings, and shows that individuals with more trauma in their backgrounds adjust to these struggles neurologically. However, adjusting to survive in constantly stressful environments leads to problems such as inabilities to concentrate, correctly gauge danger, or accurately perceive social interactions; difficulty controlling anger; impulsivity; and over-reliance on physically harmful coping mechanisms, such as over-consuming food, smoking, using drugs and alcohol, or engaging in indiscriminate sexual relations, excessive exercise, or other excessive behaviors.

The data is stark. With four ACEs, your likelihood of becoming an injection-drug user is 400 times greater than if you had none. Your likelihood of being raped as an adult is exponentially greater with each ACE you have endured. More than 50% of women with four or more ACEs experience chronic depression. One of every five children with four or more ACEs will attempt suicide.

Sixty-seven percent of people have at least one ACE. If you have one, you have an 87% chance of having more than one. Women are twice as likely as men to have an ACE score of greater than five.

After sharing this information in Woodlawn, I received questions. A man who runs recreational programming asked, “So if a child has a lot of ACEs, is that a reason to give them no consequences when they act out?” I reassured him that his job is to keep the whole community safe.

I gave this example: During open gym, one child teases another by saying, “Your daddy is locked up.” The teased child throws the basketball he is holding, hitting the child who teased him squarely in the head. Two children are hurt. The child who threw the ball needs to be separated due to his dangerous behavior, and discuss how to react in a more positive way. The child who was teasing him needs to be checked to make sure she or he is physically okay. If so, the two need a space to have a real conversation about their responsibility to each other. They are both...
INDIVIDUALS WHO HAVE EXPERIENCED FOUR OR MORE ADVERSE CHILD EXPERIENCES ARE AT 4 TO 12 TIMES GREATER RISK FOR ALCOHOLISM, DRUG ABUSE, DEPRESSION, AND ATTEMPTED SUICIDE.

responsible for creating a safe community, both physically and emotionally. Zero tolerance policies are popular, and often respond to even modest violent incidents by immediately kicking out those who behave violently. They do not, however, build problem-resolution skills, and they marginalize those who may be acting out due to untreated trauma. Learning about ACEs allows us to understand methods and techniques to build resilience, and avoid re-traumatizing those already harmed by stress or violence. Accountability is important, but we are not teaching accountability to uphold a strong community by sending kids out into the street to risk physical encounter.

After this discussion, one participant said, “It’s time to get it right, now.” After Jonylah’s killing, the Woodlawn community could fold in on itself. It can believe in how it’s portrayed in the news: dangerous, uncaring, out of control. But on this day, this group of caring, concerned residents and childhood gatekeepers did something else: They looked at themselves honestly. They took stock of all the children they had lost, and how these losses affect surviving family and community members. They took the time to learn about how loss and other traumatic childhood events affect them. They made a pact to their families and communities, to proceed with love and to say: It’s time to get it right.
FEATURE: TRANSFORMING IN JUSTICE

ESSAY

TRANSFORMING YOUTH: COLLABORATING TO CHANGE ATTITUDES ABOUT VIOLENCE

Gail Roy, M.A., ATR-BC, LCPC, is on the Core Faculty of the Adler School M.A. in Counseling Psychology, Art Therapy program. Board-certified and registered as an art therapist, and an Illinois licensed clinical professional counselor, she has more than 20 years of experience as an art therapist and educator in a range of clinical and educational settings, with special interest in child art therapy.

THE SUMMER BEFORE I joined the Adler School faculty, I became engaged in volunteering for the School’s new grant-funded pilot program in Chicago’s Englewood community, where I was born and raised. Englewood is severely challenged by poverty; crime; violence; and limited quality housing, public services, and education and employment opportunities. The new pilot program was developed to change youth attitudes about gun violence through education and therapeutic art-making. I quickly discovered that the Adler School was serious about its mission while collaborating on the program with community partners, Art Therapy staff and students, and Dr. Lynn Todman, Executive Director of the School’s Institute on Social Exclusion.

Today, our gun violence prevention program in Englewood has grown, and is well-known as a successful intervention with adolescent males there. I have been privileged to see the immediate rewards of using art as a means of social action within a disadvantaged community, as well as encourage our students to continue the work of our School namesake Dr. Alfred Adler—recognized as the first community psychologist—in Englewood.

We have presented our community art therapy work at numerous conferences. Much has since been written on this ongoing, much-needed program at a time when our city seeks help in addressing gun violence. Through art therapy, the unique use of images to express hidden emotions is highly effective with adolescent males—most of whom, in this case, have experienced trauma either directly or as a result of living in a violent community. Participants have worked on images, poems, journals, and group directives that include a mural and construction of a small model neighborhood.

Once, the youth received cameras to document things in Englewood they wanted to change. They collaborated on a letter to the city that succeeded in getting more trash containers and more regular trash pick-up. An Illinois state senator, Sen. Mattie Hunter, was impressed with the investment these adolescents made in their community. She agreed to seek funding to extend this program from a summer program to one that continues throughout the school year.

On a personal note, 13 years ago, I thought my career as an art therapist might end. I was diagnosed with end-stage renal failure due to polycystic kidney and liver disease. However, that May, I was successfully transplanted with my eldest son’s kidney. This May represents 13 years of care I have been able to provide as a therapist, thanks to Mark’s precious gift. We recommend that our clients use art-making to deal with personal struggles, but this also applies to the art therapist. My recent sculpture “House of Cards” represents the ongoing frustration that all patients can feel while dealing with their illnesses, and the disparity of care and insurance coverage.

Our Art Therapy program is the largest in the United States, and has an excellent reputation in both the academic and professional communities. Before coming to the Adler School, I was initially hesitant to leave my position as an art therapist in a south suburban special education school. Today, I have realized the global rewards of training future art therapists to do this important work.

IN CHICAGO, THE SOCIAL COSTS OF GUN VIOLENCE HAVE BEEN ESTIMATED AT APPROXIMATELY $2.5 BILLION EACH YEAR.

The social costs of gun violence have been estimated at approximately $2.5 billion each year.
TRANSFORMING COMMUNITY SERVICE: ALIGNING EDUCATION WITH SUSTAINABLE IMPACT

THE LAST FEW YEARS have generated quite a bit of conversation in higher education about community engagement. Among recent reports of note are Campus Compact’s two white papers on the subject, and the Association of American Colleges and Universities’ report “A Crucible Moment: College Learning & Democracy’s Future.” There is high focus on undergraduate campuses, where outstanding work and progress is taking place. Yet as a graduate school—specifically a professional school of psychology that trains socially responsible practitioners—we have a unique view of not just our role but our responsibility to advance community engagement.

We were founded 60 years ago on Alfred Adler’s concept of social interest that our health resides in community life. Social interest should be viewed as an individual’s personal interest in furthering the welfare of others, he taught. Collaborating and cooperating with one another as individuals and communities can progress to benefit society as a whole.

At an institutional level, this concept of social interest guides:

• Key strategies of our strategic plan: for expanding and aligning education and community engagement with social responsibility, and advancing excellence in education and community engagement.
• How our curricula and training redefine mental health professionals’ roles and responsibilities, to prepare students to engage communities and advance social justice throughout their academic and professional careers.
• How we prepare socially responsible practitioners who go beyond providing services to understand and advocate for community health.

And, it guides how we define and approach community service. We are a school of 1,199 students. Last year, our students spent more than 650,000 hours in service to improve health in communities, through our partnerships with more than 700 agencies near our campuses in Chicago and Vancouver.

Because our students are master’s and doctoral candidates training as practitioners who can address sustainable community health, their service hours go beyond simply volunteering. Instead, their time and training address the needs of underserved populations through:

• A Community Service Practicum (CSP). Every first-year degree-seeking student devotes 200 hours over six months to working with a social service or healthcare agency to develop education or awareness initiatives, research, programs, community organizing, grant writing, or advocacy work focused on sustainable change.

• Adler Community Health Services (ACHS). Through ACHS, student clinicians-in-training and staff psychologists provide psychological services—including more than 16,000 consultations, programs, and assessments a year—to underserved populations at sites such as residential rehabilitation centers for formerly incarcerated adults; transition centers for incarcerated adults; a primary-care medical clinic serving the homeless and people with HIV; and high-needs high schools and an elementary school, serving students, teachers, and community residents.
FEATURE: TRANSFORMING IN JUSTICE

- Clinical practicum, through which every doctoral student spends three to four years providing a range of supervised clinical services in the community.
- Master’s counseling practicums and internships, through which each master’s student likewise provides supervised clinical and counseling services for up to one year at his or her site.

Social interest also guides the work of our Institutes and Centers, which engage students, faculty, staff, and communities in advancing social justice through a myriad of community-based outreach, education, publication, and research activities. It is our curricular foundation: All of our degree programs train students in methods of providing services to impact social policies, address community issues, and solve social problems. A number of courses specifically immerse students in community-based learning environments. Most degree programs also require students to complete our Parent Education course, leading a community parenting group under faculty supervision.

Our health resides in community life. That truism is why we define community service as more than providing service. We address inequities and injustices in work with communities to ensure and sustain health.

ESSAY

TRANSFORMING SOCIETY: ADVOCATING MARRIAGE EQUALITY FOR ALL

Kevin Osten, Psy.D., is Director of the Adler School LGBTQ Mental Health and Inclusion Center, and is a licensed clinical psychologist with extensive experience in LGBTQ issues, severe mental illness, and chemical/behavioral addictions. He previously was Clinical Coordinator of Adult Outpatient Services at Chicago Lakeshore Hospital, and psychologist for the Valeo Program, an intensive outpatient program addressing mental health and addiction for LGBTQ people.

MARRIAGE EQUALITY greatly impacts mental health—locally, nationally, and globally. Over the past 60 years, we have seen great advances in the fight for marriage equality. However, there still is much social change needed before gender and sexual minorities have the same rights and opportunities as the heterosexual community.

In the United States, since 1996, the federal Defense of Marriage Act (DOMA) has restricted federal marriage benefits. It requires interstate marriage recognition only of opposite-sex marriages. Today, a proposed Respect for Marriage Act (RMA) would repeal DOMA and restore the rights of all lawfully married couples—including same-sex couples—to receive the benefits of marriage under federal law.

Under the bill, same-sex couples would have certainty that federal benefits and protections would be afforded a valid marriage celebrated in a state where such marriages are legal, even if the couple moves or travels to another state. However, the Respect for Marriage Act would not compel states that do not recognize same-sex marriage licenses to do so, or to adopt marriage equality legislation themselves. RMA is expected to be introduced into the 113th Congress. Its passage is uncertain, and may rely on the outcome of the U.S. Supreme Court’s decisions this summer on DOMA and California’s Proposition 8.

Should the U.S. Supreme Court find that DOMA is unconstitutional, marriage between same-sex couples will be treated and recognized as a protected legal standing under federal law. Same-sex couples would be entitled to the more than 1,100 benefits and obligations that opposite-sex couples currently receive everywhere in the United States.

However, as with RMA, the repeal of DOMA would not compel any state to recognize the same-sex marriage licenses of other states. Federal marriage benefits would still be unavailable for those same-sex couples living in states that do not have marriage equality laws. Only same-sex couples living in the few states with marriage equality laws would receive those federal marriage benefits.

DOMA impacts me very personally. My civil union partner served 21 years in the U.S. military. Under DOMA, he was restricted from including me in the purchase of our house through his federal Veterans’ Affairs home ownership benefits. Because the federal government, through DOMA, does not recognize our relationship, I have no existence. My income could not be included as consideration for our loan qualification. I could not sign my name on any of the loan or title documents.

This was our first home purchase together. The closing was a joyful and yet painful experience for both of us. I felt marginalized and sad watching the closing, not being able to participate. Those feelings remain tangible three years later. We still live in uncertainty about the fate of me and our home if he would die. Would the federal government kick me out of our home? Would the bank...
FULL FEDERAL AND STATE MARRIAGE EQUALITY IN THE UNITED STATES WOULD ENTITLE SAME-SEX COUPLES TO THE MORE THAN 1,100 BENEFITS AND OBLIGATIONS CURRENTLY GRANTED TO OPPOSITE-SEX COUPLES.

recognize our relationship and allow me to take over the loan? Would I need to reapply for a separate mortgage? No one can provide us a clear answer on these questions.

This single piece of legislation creates uncertainty that is always at the back of our minds, creating stress, worry, and fear. It takes diligence on our part to prepare the best we can for a worst-case scenario, and yet co-create a joyful life together.

This experience, and other marginalizing experiences that I and my clients past and present have faced, empowers my work to improve the lives of gender and sexual minorities through the mission of the LGBTQ Mental Health and Inclusion Center.

The Center does this by helping to create a new generation of practitioners who will not only treat the mood and behavioral disturbances created or sustained by these exclusionary forces, but also be able to educate and intervene to produce social change that results in sustainable inclusion for gender and sexual minorities.
Practitioners worldwide who have graduated from the Adler School—part of our 60 years of leading social interest since our founding in 1952

We are grateful to be able to implement our Psy.D. program in Vancouver. We see great changes on the horizon for mental health awareness and services here in Canada."

Larry Axelrod, Ph.D., Vancouver Campus Dean, in announcing the School’s new Doctor of Clinical Psychology (Psy.D.) program in Vancouver, western Canada’s first such program

Elena Quintana, Ph.D., executive director of the Adler School Institute on Public Safety and Social Justice, was among the national figures and experts featured in the hour-long documentary After Newtown: Guns in America that premiered in February on PBS. Watch the documentary, and find more from Adler School faculty featured in the Vancouver Sun, WGN-TV Chicago, The Chronicle of Higher Education, and other media.
National Public Radio (NPR) journalist Maria Hinojosa (pictured above with Adler School President Raymond E. Crossman, Ph.D.) addressed the graduates and received an honorary doctorate for her contributions to social justice, at the Chicago Campus’ 2012 Commencement. In Vancouver, social justice activist Vikki Reynolds, Ph.D., RCC, gave the Commencement address. Enjoy photos from Commencement, the 2012 Elina Manghi Memorial Lecture, our 60th Anniversary Colloquium and more.

flickr.com/adlerschool

The Adler School welcomes four new members to its Board of Trustees:

Renee Citera, Vice President of American Law Media;
Doug Harris, Chief Executive Officer of The Kaleidoscope Group;
Grace Hou, M.P.A., President of the Woods Fund of Chicago; and
Joy MacPhail, a former Canadian politician in British Columbia, and a current partner in Shavick Entertainment.

adler.edu/board

“We're excited about the work of @TheAdlerSchool. My mind is spinning w/ the ideas + connections being made here.”


storify.com/theadlerschool

adler.edu

Your curriculum supports the mission. Your focus on advocacy, and your effort to integrate work on health disparities, is critical.”

Cynthia Belar, Ph.D., Executive Director of the Education Directorate of the American Psychological Association, at “Sixty Years of Social Interest: The Adler School’s Legacy and Responsibility Moving Forward,” the Adler School’s 60th Anniversary Colloquium, October 26. Read more and watch the video.

adler.edu/colloquium
CHANGING POLICY ON ARREST RECORDS AND HIRING TO IMPROVE COMMUNITY HEALTH

THE ADLER SCHOOL OF PROFESSIONAL PSYCHOLOGY INSTITUTE ON SOCIAL EXCLUSION (ISE) HAS UNVEILED THE RESULTS OF ITS MENTAL HEALTH IMPACT ASSESSMENT (MHIA), A FIRST-OF-ITS-KIND STUDY IN THE UNITED STATES THAT ASSESSES HOW PUBLIC POLICIES MAY AFFECT THE MENTAL HEALTH AND WELL-BEING OF INDIVIDUALS AND COMMUNITIES.

THE RESULTS OF THE 18-MONTH STUDY confirmed the ISE team’s prediction that updates to the U.S. Equal Employment Opportunity Commission (EEOC) Policy Guidance on the use of arrest records in the hiring process can help increase the employability of residents in Chicago’s underserved Englewood neighborhood.

“Increased employability can help improve the collective mental health and well-being of Englewood residents. Specifically, it can increase the likelihood that people suffer less depression and psychological distress, and feel a greater sense of connection with their community,” said Lynn Todman, Ph.D., the MHIA study’s principal investigator. She is also ISE Executive Director and Vice President for Leadership in Social Justice at the Adler School.

Englewood residents helped select the ISE’s focus on employment policy because jobs are hard to find in their community. The unemployment rate exceeds 20 percent in some areas of Englewood, which lies in the Chicago Police District with the city’s sixth highest arrest rate in recent data.
APPROXIMATELY 14% OF THE GENERAL U.S. POPULATION, ACCOUNTED FOR 28% OF ALL ARRESTS.
This project made me realize that we never looked at the big picture and examined how policies affect the mental health of our communities.”

Anthony Lowery, Director of Policy and Advocacy, Safer Foundation

MHIA research included analyses of data collected through community surveys, focus groups with residents, and interviews with local employers and police officers to examine how the EEOC’s proposed guidance revision would affect the lives and health of Englewood residents.

“Our research found that many arrests in Englewood do not result in convictions—and many arrest records found in background checks mislead employers into thinking an applicant has broken the law,” said Mark Driscoll, Ph.D., ISE Clinical Psychology Postdoctoral Research Associate.

“The problem is that many employers knowingly or unknowingly do not distinguish between ‘arrests’ and ‘convictions’ in making employment decisions. Especially in a neighborhood like Englewood, this can significantly affect social determinants of health such as employment, income, neighborhood conditions, and social exclusion that in turn affect mental health and well-being.”

The MHIA found that updates to the EEOC Policy Guidance could improve individual and community mental health by helping to increase employability of Englewood residents and increase income levels, as well as decrease the crime rate and decrease social exclusion and self-exclusion.

Environmental, economic, and physical health impacts are often considered when shaping public policy. However, mental health—an essential element of healthy communities—is rarely considered. The goal of the MHIA is to ensure that mental health effects are also factored into policy decisions.

“When Lynn Todman brought this to my attention, it was revolutionary,” says Anthony Lowery, Director of Policy and Advocacy at Safer Foundation, who served as a project advisor and supports the efforts of people with criminal records to become employed. “It made me realize that we never looked at the big picture and examined how policies affect the mental health of our communities.”

The MHIA differs from other types of policy assessments because it’s designed to authentically engage communities in a prospective evaluation of policies that stand to affect their health and well-being. It is intended to create more lasting change, including structural reforms, as residents are given tools and training to monitor and enforce policy changes, and to educate fellow residents.

A national leader in the development of the MHIA, the Adler School partnered with community groups, public health agencies, national advocacy organizations, and Englewood residents.

Resident involvement was, and continues to be, crucial toward the MHIA’s broader goal of effecting lasting change, said

What is the impact upon the mental health of a community when employers use arrest records in making employment decisions about members of that community?
The ISE is doing the right thing in incorporating mental health and pushing it into how we view public health in a really important way... in regard to equity, community involvement, and mental health incorporation.”

Kim Gilhuly, Project Director, Human Impact Partners

Tiffany McDowell, Ph.D., ISE Program Manager and Research Associate. Residents helped create research questions, encouraged friends and neighbors to participate, and provided suggestions for policy recommendations during town hall-style meetings. “As our partners, they were trained as ‘citizen-scientists’ to conduct interviews with fellow residents,” McDowell said. “They continue working with us, and continue to follow up with neighbors to make sure they are aware of policy changes, and with local business owners to ensure they follow the updated EEOC Policy Guidance that was the focus of our MHIA."

Kim Gilhuly, project director of Human Impact Partners, which conducts health-based analyses and addresses policies that lead to health inequities, consulted with the MHIA team. She said: “The ISE is doing the right thing in incorporating mental health and pushing it into how we view public health in a really important way... in regard to equity, community involvement, and mental health incorporation.”

The MHIA report “U.S. Equal Employment Opportunity Commission Policy Guidance: A Mental Health Impact Assessment” can be found at adler.edu/MHIA.

In addition to the faculty, staff, and students of the Adler School Institute on Social Exclusion, the MHIA Steering Committee included representatives from:

- Adler School Institute on Public Safety and Social Justice
- Chicago Department of Public Health
- Englewood Community Health Clinic
- Illinois Department of Employment Security Re-Entry Employment Services Program
- Illinois Department of Public Health
- Imagine Englewood IF
- Northern Illinois University Public Health Program
- Safer Foundation
- Sargent Shriver National Center on Poverty Law
- Teamwork Englewood
- University of Illinois at Chicago School of Public Health
- U.S. Centers for Disease Control and Prevention
- External project consultants including Human Impact Partners, Millennia Consulting, Varga and Associates, Stewart Communications, and faculty from the University of California—Berkeley Schools of Public Health and Urban Planning

The MHIA Advisory Committee met quarterly and included representatives of:

- Chicago Department of Public Health
- Neighborhood Housing Services of Chicago, Inc.
- Public Health Agency of Canada
- Robert Wood Johnson/Pew Charitable Trusts Health Impact Project
- Teamwork Englewood
- University of Pittsburgh School of Medicine

The Institute on Social Exclusion recognizes:

- The residents and leaders of Chicago’s Englewood community
- State and local legislators whose support helped ensure the success of the project

Leading financial support for the MHIA was generously provided by:

- Robert Wood Johnson Foundation
- W.K. Kellogg Foundation
- Pierce Family Foundation
Support Future Leaders through ASAA's New Scholarship Fund

THE ADLER SCHOOL ALUMNI ASSOCIATION (ASAA) invites fellow alumni and friends of the Adler School to support the training of the next generation of socially responsible practitioners—through the ASAA Future Leaders Scholarship Fund.

Established this April, the new scholarship fund will provide for scholarships to current Adler School students in Chicago and Vancouver to attend and participate in workshops, seminars, conferences, and other professional development opportunities.

Learn more and support the Future Leaders Scholarship Fund: adler.edu/giving
Join us for the 2013 Elina Manghi Memorial Lecture and Scholarship Reception

Sr. Francisca Nzeke (left) and M. Graciela Franzwa were honored as inaugural recipients of the Elina Manghi Child and Adolescent Psychology Diversity Scholarship at the 2012 Manghi Memorial Lecture and Reception.

ALUMNI AND FRIENDS are invited to join us for the 2013 Elina Manghi Memorial Child and Adolescent Psychology Lecture and Scholarship Reception, featuring guest lecturer Mary Fristad, Ph.D., ABPP. Professor of Psychiatry at Ohio State University. Her presentation on “Psychoeducational Psychotherapy: A Starting Point Model for Child/Family Therapy” takes place at the Chicago Campus on October 3.

Fristad is a professor of psychiatry, psychology, and human nutrition at Ohio State University, and director of research and psychological services in the OSU Division of Child and Adolescent Psychiatry. The author of more than 150 articles and book chapters, she has also published a treatment manual and accompanying workbooks, and has co-written two books for professionals. She is president of the executive board for the Society of Clinical Child and Adolescent Psychology (APA Division 53), and has been principal or co-principal investigator on more than two dozen federal, state, and local grants focused on assessment and treatment of mood disorders in children.

A reception will follow the lecture, with Fristad and the Adler School recipients of the 2013 Elina Manghi Child and Adolescent Psychology Diversity Scholarship. The scholarship in Dr. Manghi’s name is designated for students entering the Child and Adolescent Psychology track within the Doctor of Psychology in Clinical Psychology (Psy.D.) program at the Adler School.

The Elina Manghi Memorial was established in 2012 to honor the memory of Elina Manghi, Ph.D., a cherished Adler School professor and a consummate child and adolescent psychologist.

HOMECOMING AND ALUMNI REUNION 2013

Mark your calendar now and plan to attend Homecoming and Alumni Reunion 2013:

October 19: Chicago Campus Homecoming
October 25: Vancouver Campus Alumni Reunion
Details will be announced this summer at adler.edu/events.

Adler School Alumni: 6 Ways to Benefit Others and Yourself

1. Meet your new Adler School Alumni Association (ASAA) leadership board. The newest members include Vice President Jason Reatherford, M.A. ’11 (M.A. in Counseling and Organizational Psychology); and recording secretaries Adrienne Wright (student representative, M.A. in Counseling Psychology, Specialization in Forensic Psychology) and Julie Skokna (student representative, M.A. in Counseling Psychology).

2. Join an Alumni Association Committee, developing opportunities for professional development, events, social networking, awards, and scholarships.

3. Serve as an Alumni Ambassador: attend Student Interview Days, accompany prospective students on tours and information sessions, and answer questions about the benefits of an Adler School education.

4. Connect with fellow alumni and receive the latest School news on LinkedIn, Facebook, and Twitter. Link to these Adler School social media sites on the Adler School web site.

5. Attend an upcoming event such as the “Preparing for the EPPP” Workshop, the Adler School Golf Classic, and Homecoming to celebrate with new and fellow alumni.

6. Support the work of the Adler School through annual gifts, multi-year pledges, planned gifts, and other giving opportunities.
TEAL MAEDEL, M.A. ’97

has worked for 28 years with the Correctional Service of Canada (CSC) and the Royal Canadian Mounted Police (RCMP). She has worked in community development as a parole officer, and for the past 13 years as a forensic psychologist specializing in critical incident stress and trauma.
I WORK AS A PSYCHOLOGIST for the Correctional Service of Canada at Vancouver Parole. I provide therapy for offenders on conditional release who have committed violent or sex crimes. My role includes providing individual and group therapy, clinical risk assessment reports for the Parole Board of Canada, crisis intervention, anger management, and critical stress management.

In parole offices, we supervise men and women who have served part of their sentences in prison and are released to complete their remaining sentences under supervision. The idea is to assist in the safe transition of offenders from incarceration, and to pro-socially integrate them into the community. The Canadian corrections system is world-renowned for its focus on safe community integration through effective, empirically based programs to reduce risk. Therapy and treatment can be much more effective in the community than in a prison environment, where it is more difficult to internalize and practice skills.

When offenders receive conditional release from prison, they return to the community to a halfway house or to reside at home. They are supervised by a parole officer, and we provide many programs including programs for substance abuse and employment skills, and programs specifically for First Nations. Our focus is to address relevant risk factors and to assist people in adapting to community living. We work as part of a team that includes psychologists, parole officers, a social worker, and a psychiatrist.

Although it doesn’t happen often, stressful incidents may occur. Examples include the death of an offender, a re-offense in the community, or a perceived or real threat to a staff member. These types of incidents may cause critical incident stress for officers. About 12 years ago, we started discussing the need to support staff, and we developed the Critical Incident Stress Management (CISM) team for Vancouver Parole. CISM has existed in other fields such as emergency response, led by the work of Jeffrey Mitchell and George Everly. In community corrections, this was a new concept; we were probably one of the first to develop a CISM program. I currently facilitate critical incident stress debriefings and defusings at Vancouver Parole. This voluntary and confidential intervention is welcomed by staff. It offers assistance in coping with traumatic or difficult incidents. Most interventions are offered in the form of defusings, and are conducted by CISM-trained peers.

Her work has included developing the Vancouver Parole Sex Offender Program, and training police on interviewing high-risk offenders, sexual deviancy, psychopathy, and behavioral progression.

She is a past president of the North American Society of Adlerian Psychology, and is a past chair and current member of the National Joint Committee of Senior Criminal Justice Officials, Pacific Region. She has taught at the Adler School in Vancouver, the British Columbia Institute of Technology, and the University of British Columbia.

In个工作日，你需要乐观和相信事情可以变得更好。阿德里安人是乐观主义者，我们相信事情可以变得不同。
We offer a defusing program to the ICE team every six months. Participation is confidential. Although their participation is voluntary, they all participate. The discussion is very structured, like a debriefing. It is not therapy. They discuss thoughts about their work, the highly specialized nature of the unit, and the most gut-wrenching part of their work. For example, it can be challenging to be a parent and work in ICE; your world view about others and safety can change. We discuss signs and symptoms, changes they have noticed in their lives, behavior, physical health, emotions, and spiritual beliefs. People tend to describe similar reactions as we talk, which is helpful in normalizing reactions. We discuss what has been helpful and, instead of lecturing, everyone shares what has assisted them. I may introduce additional relaxation and stress management techniques. We talk about the importance of a social network and connecting with others. We talk about the value of their work.

One unexpected outcome is that other police detachments wanted to create similar programs for their sex offender units. A number of detachments have utilized some of our “inoculated” ICE program psychologists as resource people.

Working in corrections is very rewarding to me. Over the years I have seen men and women turn their lives around, take responsibility for their actions, address past trauma, and change thoughts, feelings, and behaviours that led them to commit crime. I believe that we are making a contribution to public safety; people succeed through our system, and we work towards creating no more victims.

Adlerian concepts and value are relevant and meaningful in this work. Respect for individual differences is crucial. Alfred Adler spoke about how we all perceive things differently, and about the importance of social connectedness and contribution. In defusing groups, we look at the work-life task, and how this impacts other life tasks; I think about physical health, mental health, relationships, and spiritual growth. We discuss how things could be different to help develop a more satisfied life. In working with offenders, you need optimism and the view that things can be better. Adlerians are optimistic, and we believe things can be different.
Discover what’s new ONLINE

LEARN about the Adler’s School’s funding priorities, giving opportunities such as the Robert L. Powers and Jane Griffith Fund, and the benefits of support through the newly expanded “Giving” section of the Adler School web site.
adler.edu/giving

WATCH video of students and alumni discussing their Adler School faculty, Adler Community Health Services, Community Service Practicum, licensure preparation, and more.
adler.edu/video

HEAR faculty and researchers with the Institute on Social Exclusion discuss their work with Mental Health Impact Assessment, and its impact on the community and in the field.
adler.edu/MHIA

adler.edu/IPSSJ

LINK to thought leadership and news from Adler School faculty, staff, and students at “The Socially Responsible Practitioner,” our new blog launched this spring.
theadlerschool.wordpress.com

JOIN US AT THESE UPCOMING EVENTS

JUNE 13
Preparing for the EPPP: Navigating the Road to Licensure for Psychologists
Tips for alumni studying for the Examination for Professional Practice of Psychology (EPPP)
6-9 p.m., Chicago Campus

JUNE 18
Adler School Alumni and Friends Reception
A special reception following our annual Community Action Day
5:30-7:30 p.m., Vancouver Campus

JUNE 19
AACN Neuropsychology Conference Reception
Recognizing the work of the alumni of our Clinical Neuropsychology Concentration, in conjunction with the 11th Annual American Academy of Clinical Neuropsychology (AACN) Conference in Chicago
5:30-7:30 p.m., Chicago Campus

SEPTEMBER 12
Second Annual Adler School Golf Classic
Supporting scholarships in police education and public safety outreach
1 p.m., Harborside International Golf Center, Chicago

OCTOBER 19
Chicago Campus Homecoming

OCTOBER 25
Vancouver Campus Alumni Reunion

For information on attending these and more events, visit adler.edu/events.
Studies have found a link between low levels of collective efficacy and higher crime rates in communities. When people think they don’t have the power to advocate for themselves and their communities, picking up a gun may feel like the only way to get their voice heard.”

Tiffany McDowell, Ph.D.,
“Examining Environmental Factors that Exasperate Violence”

I have had the opportunity to provide psychological evaluation for federal and state courts; testify as an expert witness in civil and criminal proceedings; work in correctional and community-based settings; and professionally interact with all levels of the criminal justice system. Likewise, our students are finding employment in a wide variety of settings.”

Matthew Finn, Psy.D.,
“Forensic Psychology: The ‘Fascinating’ Interaction Between Psychology and the Law”

Focusing on stories of heroism and resilience can contribute to our feeling less angry, less anxious. In fact, helping makes us feel less helpless.”

Marla Vannucci, Ph.D.,
“One Week Later: Regaining A Sense of Control and Purpose After the Boston Tragedy”

SOUND BITES

Read more from these and other Adler School thought leaders at “The Socially Responsible Practitioner,” our new blog. theadlerschool.wordpress.com