

University of Wisconsin–Stout Marriage and Family Therapy Program Courier



An Update From the Program Director

Heather Hessel, PhD, LMFT; UW-Stout MFT Program Director (she/her)

It's hard to believe that as I sit here and write my *Courier* article we are already coming up on mid-April, 2022. This year has been so full of new, exciting, and yes, daunting, challenges—and it has flown by at the speed of light. We have been busy, to say the least. And by “we,” I certainly mean our Clinical Director, Candice Maier, and myself, but also our adjunct faculty who

have so ably and generously shared their time and expertise with our students: Brian Crim, Alyssa Maples, Kimmerly Newsom, Patrick Parker, and Coltan Schoenike. We couldn't function without them, and they help us bring our best selves to the work.

Here are some updates on the key projects we have been working on this year:

- **COAMFTE Accreditation.** This accreditation renewal year will culminate in our two-day virtual site visit with a roster of COAMFTE site visitors. They will be meeting with groups of recent graduates, current students, university administrators, supervisors, faculty, and Candice and me, as Program Director and Clinical Director. Dale Hawley graciously agreed to help us as a consultant; as an experienced COAMFTE site visitor himself, we believe we are in good hands. A lot of time and energy has gone into this process and we are hopeful that these efforts will yield positive results.
- **New core faculty.** The MFT program was the only program on campus to receive approval to hire two new faculty members this year, whom we will share with the Human Development & Family Studies (HDFS) program. We were thrilled to receive this approval, as we see it as representative of the university's commitment to our program. The search committee for these positions has been busy at work and excited about our candidates. We are optimistic that we will welcome two new faculty as core members of the MFT program in Fall 2022. If we are successful, you will be meeting them in the Fall 2022 issue of the *Courier*.
- **Welcoming Cohort 2022–2024.** This will be the second year that I've been involved in the admissions process. What a rewarding experience! It's difficult to make selections among so many talented candidates, but we are excited about welcoming a motivated group of new students this coming fall. This year we made a special effort to recruit applicants through hosting online and on-campus information sessions, attending local career events, and reaching out to undergraduate programs to build connections with folk who share the passion of relational therapy. We are also finding opportunities to recruit students from marginalized communities and those with a passion for working with underserved populations, both of which are important initiatives we intend to build on next year.

- Clinical Services Center upgrades. We continue to make upgrades to the Clinical Services Center to improve our infrastructure. Modifications introduced earlier this year include building in additional security measures and installing air filters and other accommodations to support students and client during the COVID-19 pandemic. We are currently requesting additional funding for upgrades to the audiovisual system used for recording sessions.

Next year will bring new opportunities and challenges as well: Onboarding new faculty, follow-up to the accreditation renewal process, curriculum review due to our transition to the COAMFTE v12.5 standards, recruitment of new students, and much more. We welcome your feedback and input as we continue to navigate this transition period. Thank you for your support and “stay tuned”!



One Year and Counting

Candice Maier, PhD, LMFT; UW-Stout MFT Clinic Director
(she/her)

It’s hard to believe I am coming up on one year as Clinical Director of the MFT program at Stout. Stepping into such big shoes has given me a great opportunity and I am looking forward to many more years. I have learned a ton in the last year and am grateful to the connections I have made and sustained, and the wisdom I continue to gain from those around me.

This year, we are going through reaccreditation, which has taken a considerable amount of time on behalf of Heather and myself. In reaching out to our incredible alumni from the last time the Stout MFT program was reaccredited, I had the joy of connecting with some amazing Stout alumni who are doing wonderful things for their clients and communities. It brings me great joy to reaffirm the relationships with students established since my time here in 2016. Michael White use to say, “the most powerful therapeutic process is to contribute to rich story development.” I think this is an apt description for how I want to appear with people in general and contribute to the positive aspects of their narratives as developing therapists. When I think back to my own mentors and supervisors, those that pushed and challenged me yet also honed in on my strengths were the ones who had the biggest impact.

In April, I will be attending the International Family Therapy Association (IFTA) World Congress in San Juan, Puerto Rico to present a two-year project I have been working on with a couple of colleagues at different institutions. If it weren’t for UW-Stout and Dale Hawley, my association with one of them wouldn’t have occurred. I look forward to connecting with clinicians and various helping professionals from across the country and world. It has been two years since IFTA—like many conferences—has taken place. I had the privilege of attending this conference before and made some lasting connections with others. I look forward to what this conference brings. Speaking of global connections, it seems that our world is in a constant state of pain and suffering. With the continued racial injustices and killing of Black men in Minneapolis and around the nation—to the devastating Russian invasion of Ukraine and

destruction to its families and infrastructure, we feel the weight of the world and our communities on our shoulders. There is a saying—“world pain is bad—but numbness to world pain would be worse.” We all have ways of grieving and channeling our inner and world pain. One of the channels that connects us all is our decision to become therapists and help people.

In lieu of class during my absence for the conference, I had the pleasure and honor of connecting with 2010 Stout MFT alum, Megan Holm, about her work with NARM (NeuroAffective Relational Model), to record an engaging interview for students to view and ask questions about. Megan completed training for NARM in 2019 and has been a certified NARM trainer since then. For those who aren't aware, NARM is a somatic model for addressing attachment, relational and development trauma by working with attachment patterns that cause life-long psychobiological symptoms and interpersonal difficulties. As I listened to Megan, what stood out to me was her deep interest in the central tenets of NARM as well as family systems theory and how she paired these both personally and professionally in her life. The self-of-the-therapist comes to mind and how this work is (and should be) ingrained into all MFT/CFT programs. It is both inspiring and energizing for me to witness the amazing things that alumni such as Megan are doing—both for themselves and their communities. I appreciate Terri Karis's recommendation to reach out to Megan and hope that our paths cross again.

Currently, I am writing this article on the last day of spring break where I've spent the week with my partner and cat. I realize how much I miss being at home and engaging in the local Minneapolis/St. Paul area. Over the past few weeks, I've attended two musical concerts. Attending these events reminded me of how things like live music can be so invigorating and can connect people across culture and generations. Recently, I had a conversation with one of the first-year students, Dave, about a concert we happened to both attend a few weeks prior. Excited by this common association, we immediately began talking about a statement that the lead singer made about hardships and life and encouraged people to go to therapy. The singer mentioned how therapy “saved his life” which led into a song about “being okay with *not* being okay.” I thought to myself how powerful a medium like music and pop culture really are with people today—and not just youth, but all individuals (perhaps the former rather than the latter for some). I decided to share the song in my Contemporary Couples and Family class that day and asked students to reflect on it. Having this conversation and interaction gave me a sense of connection with others in the classroom, even though I had no idea if others in the class knew the band, song—or even liked it. Listening to the song helped me to have a deeper understating of the importance of nonverbal language. Although the lyrics were what I was most resonating

Alumni: An opportunity to “give back”

Remember back to when you were ready to walk across the stage and accept your diploma? Cohort 2020-2022 is preparing to take that same walk next month! At the moment, the university does not loan commencement regalia to students, which can be a financial hardship and also a barrier to participation. **Do you happen to have a commencement gown or hood sitting around that you would be willing to donate to the program?** We would love to build our collection of gowns and hoods that we can then loan to students each year, as needed.

Please email Rachel Mickelson at mickelsonr8797@my.uwstout.edu or hesselh@uwstout.edu to arrange a donation. And thanks for considering this option!

with originally, hearing the sound and melody evoked a powerful sense within my nervous system and got me thinking about Porges's polyvagal theory and its holistic approach to our work. As beginning therapists, we want to "get it right" and believe that it is up to us to restructure families and open up blocked communication patterns, etc. However, more times than not, it is the authentic connection that the therapist has with their client(s) that helps the journey toward healing. With this, I am reminded by the powerful lyrics sang by Alison Krauss, "you say it best, when you say nothing at all."

Back to the original title of this post—one year and counting! I am honored to be part of this program. As we grow in faculty and students, I am still having fun. It is a joint venture we are all participating in—students, faculty, staff, alumni and maybe even people no longer here. In quoting one of Dale Hawley's lines, "I am glad to be a part of it and I hope you are too."



The Lonesome Therapist

Dale Hawley, PhD, LMFT; Former UW-Stout MFT Program Director (he/him)

After I moved to St. Paul a few years ago I joined a private group practice. For years I met with clients in a home office (actually, an office space attached to my garage), but I didn't have such a luxury when we moved so I subcontracted with a small therapy practice. It has been great for me (and I hope for them as well). I maintain a small practice which allows me to keep a toe in the therapy world while continuing to enjoy the benefits of retirement.

Private practice has always seemed like the holy grail of marriage and family therapy practice. I remember when we interviewed people about coming into the program, I would usually ask "What do you hope to be doing 5–10 years down the line after you have graduated?" Probably two-thirds of the responses (if not more) involved some variation of private practice. And why not? One of the great things about this profession is the ability to control your own schedule and chart your own course professionally. That interview never felt like the right time to tell people that being in private practice means running a small business with the accompanying tasks of marketing, dealing with cash flows, managing property, and a host of other details (those in private practice can relate). But even with those additional details, I have observed over the years that, eventually, most graduates matriculate toward some version of private practice.

This is a new experience for me in many ways. For most of my career, my work centered around training students who were learning the craft of therapy. I worked with a few clients on the side, but it was never my primary professional focus. Now, I have expanded my practice (although it is still small) and my primary professional identity has shifted from educator to therapist. It has been a good transition and I have noticed a couple of things in the process.

First, being a therapist is lonely work. This seems a bit ironic, given that we are in the people business. Yes, we interact with people all day long, but there is a difference between clients and colleagues. During my time at Stout, I benefited from being able to interact with colleagues like

Terri, Bruce, Anne, Karen, and Candice. A lot of our conversations focused on program issues or how students were doing but they also veered off into our lives outside of work. Most of my time at Stout was spent working alone in my office or interacting with students in the clinic but interactions with my colleagues were always a highlight, especially since they are all delightful people (something that cannot always be said about colleagues). There is something important about being able to connect with colleagues as real people, not just work mates. This may become increasingly important with the trend toward online work. If we only connect online, will we be able to develop relationships with the people we work with and not just with their roles as they pertain to what I am doing?

I have discovered the amount of time I see colleagues in a therapy office is pretty small. I have had days when I have been doing therapy next door to a colleague for several hours and I never see them because our breaks do not align. The other day, three of us found ourselves in the office lobby because we were all in between clients. It was short—all of five minutes—but a nice opportunity to catch up with each other as human beings. There is something vital about human connection with the people we work with, and it is often in short supply among therapists.

This discovery has led to a second one—the importance of consultation. Once a month the members of this practice gather for a group consult. Like supervision, most of this time is spent discussing our cases and drawing on our collective resources and experience. As someone who has worked in a supervisory capacity for years, I have rarely had the opportunity to talk about my own work and have found these monthly meetings refreshing. I often come away with a new idea that takes my work with a client in a different direction. But they have also had the added benefit of helping build human connections. Somewhere in this interaction, we end up talking about our families and bouts with COVID and politics and whatever else that takes us from the realm of therapists to real people. This is probably as important as the professional consultation we each receive. At the end of the day, therapy is more than models and techniques and strategizing about cases. It is about the interacting with another human. Most of the time that happens with our clients, but I believe we will be better therapists if sometimes it happens with our colleagues as well.



I Wanted a Clever Title About Impostor Syndrome and High Expectations but Nothing Felt Good Enough

Coltan J. Schoenike, MS, MFT-IT; UW-Stout Teaching Specialist; UW-Stout Alum '20 (they/them)

Hey everyone, how are y'all doing? Did you answer with "fine," "good," "okay," or the tried-and-true "livin' the dream" which we all know is Midwestern speak for "I'm dying inside but don't want to burden you with my troubles?" It's all right if you did answer with one of those responses. If you genuinely are doing 110% okay or good, I'm happy for you! However, I do know that there's a lot of us who are pulling out the "good" or "okay" time and time again when we're not.

If we take a moment and acknowledge the realities of what the world looks like right now for us as faculty, students, practitioners, and supervisors, it's completely valid to not be doing okay

right now. We've just hit the two-year marker of being in a global pandemic, there is continued political division and turmoil both domestically and internationally, and plenty of other developments introduce themselves day after day. For our field specifically, we find ourselves facing these realities twice as we experience them while simultaneously working to meet the expectation of holding space for our clients who are also living these moments. I don't think I have a single colleague who hasn't uttered the word "burnout" as a possible concern if not a full-fledged current reality in the past several months.

One thing I discuss with my clients frequently is the concept of "permission." I think this concept is helpful for myself as a therapist too, and I think it can benefit all of us. As therapists, we can find ourselves feeling the pressure and expectation to be this epitome of composure and professionalism for the sake of our clients. While I respect that intent (although my experiential tendencies do encourage letting that wall down just a little when it can benefit our clients), it's important to remember that each and every session we have comes to an end and so can that composure. Give yourself the permission to loosen your collar and know you can stop holding all of these things, even if just for a moment. Burnout is the opposite of the phrase "a watched pot never boils," and only arrives faster if we try to maintain all of that composure and pretend that it isn't coming.

I also know that a lot of this is easier said than done, and I have a tendency to be the first one thinking that as I start to acknowledge things as not okay or let myself rest, it all becomes damning evidence of my ability as a practitioner. "I can't handle it." "I'm not strong enough." "Can I really hold all of this and be there for my clients?" Those are just a few examples. I get it. The reason we are in this field is because we care about our clients and their wellbeing so much, and it comes with the territory that the double-edged sword manifests as doubting whether we hit that bar of quality care that our clients need and deserve. As therapists, we are phenomenal at giving our clients praise, validation, affirmation, and positive reinforcement—which we conveniently forget how to do when it comes time to give it to ourselves.

We often forget how powerful and amazing we are. In addition to simply surviving during all of these monumental ordeals of our times, you're also continuing to do so while supporting others as well. We are also a field of so many wonderful, kind, and empathetic people, so it's important to note that you make so many lives better simply by existing and going about your day, let alone when you put deliberate and intentional effort into it with the work you do. I heard a fellow therapist describe us and our field as "healers" a few weeks ago, and that stuck with me. While it makes obvious sense, it just hadn't hit me in that way before and I hadn't made that explicit connection. Anthropologist Margaret Mead noted that the ability and intent to heal was the earliest sign of civilization, and we often forget that as healers in our own right, we are an important foundation and support structure for our society.

So I ask you this: how are you going to hype yourself up in the coming days, weeks, and months? Remind yourself that you are good enough, and that you are doing enough. Let yourself acknowledge that these are difficult times and for them to feel difficult would only be natural and not indicative of inherent flaw or shortcoming on your part. You are amazing. You are kind. You are good.

In addition, what will you do to protect yourself from burnout and let yourself rest every now and then? Another thing I tell clients is that “diamonds form under pressure, but dough needs rest to rise.” Many of us are wonderful busybodies with accomplishment pouring out of our ears who struggle with the notion of being “unproductive.” I also partly blame living under capitalism for this complicated relationship with productivity, but that’s for another conversation. Rest and self-care is an investment that allows us to meaningfully show up for the important things when we want to and need to. In acknowledging that investment, rest can be productive and a meaningful step toward our wants and goals. Also, you deserve it, which is a thought I hope crossed your mind as well. Your worth is not measured by your productivity.

In summary, you got this and I believe in you! Thank you for all you do.



Change

Heidi Accola, UW-Stout MFT Student (she/her)

Change. People come to me because they want change. They want to change someone else, change themselves, change the past, change the future, change how they feel. They come to therapy because something needs to change.

As a new therapist and graduate student in Marriage and Family Therapy at UW Stout, *change* is also the topic of my Capstone. Our cohort (and others before us) has been challenged with taking two years of graduate school learning and a lifetime of living and constructing a *theory of change*.

What is change? Science teaches us about entropy, the predictable deterioration of a system over time. But there’s also a condition called *negentropy*, in which an open system can allow in energy that reverses entropy and systems become more highly organized over time. Is change simply an expression of organization of energy over time?

What is change? We can look through history, the stories available to us by those privileged enough to be the writers and attempt to understand humanity through space and time. We can quiet ourselves and tune into the voices of those before us, telling their stories of triumph and loss, love, heartache, war, famine, discovery, creativity. We can study the tapestry of their woven voices and stories and attempt to understand how they and we have changed throughout time, and if we have changed throughout time.

Can change be understood through genograms, through our scribbles that attempt to take generations of lived stories and bring them onto a sheet of paper? Can it be understood through attachment theory, in which we chart the anxious, avoidant, disorganized, and secure attachments of a person’s life, of their family’s lives, of their interactions with us in the sacred therapeutic space? Or perhaps we attempt to define change through psychiatric assessments, GAD-7s and PHQ-9s.

But what kind of change is good? Do we want the numbers to only “improve,” or does our theory of change allow for suffering as the pathway to growth? Can someone “do worse” as they integrate and heal? And how do we show up as therapists for those who are suffering, seeking our help, and telling us they do not want to change? How do we sit with those at whom change was hurled, without their permission, and who struggle to adapt to the impacts of that unwanted change?

As a new therapist, I have so many questions and so few answers. I have profound gratitude and awe that I get to be in this space with my fellow travelers as they seek help to change what they cannot accept or to accept what they cannot change. From day to day, I shift between overwhelm, gratitude, delight, grief, confusion, recognition. I sit with my fellow humans, listening, feeling, intuiting, waiting. At some point, their story begins to take shape, to gain form and substance and detail. At some point, parts of their story come to life that give me clues on where we might start the journey together. Although I am not the expert on their life, I can hold their story with curiosity, empathy, and tenderness, and I can help them not be alone as they begin this awesome, terrifying, exhilarating, unknown journey of *change*.

As they change, I change. As I change, they change. We are a system, my fellow travelers and me. We are an open system, each impacting the other, bringing in new energy and ideas. I can only imagine how the changes we create in each other will ripple out through space and time. And I can take a long, deep breath of gratitude that I have the privilege of being a part of this strange, wonderful calling.



Exploring the Self Through Tabletop Gaming

Kayla Devorak, MS; UW-Stout MFT Alum '16 (she/her)

“I think I'm falling in love with you, and I owe you an apology (Devorak et al., 2022).” Lexa began to honestly face the relational harm she was responsible for in her budding relationship with Riley with these words. Lexa struggles to cope with the fact that she was developing feelings for Riley yet had still not told Riley that she was responsible for hurting her the year prior. With Lexa’s words, the long journey of relational repair could begin not just for Lexa and Riley but also for their players. Lexa and Riley exist in a TTRPG (tabletop roleplaying game) world known as Kids on Brooms. Kids on Brooms is a modern world where magic exists. This world, a magical Yale, was created by the Gamemaster (the person who controls all aspects of the game except the player characters) in collaboration with six other players. The six players each created their characters, giving them personality, fears, and motivations. Then together, the players and the game master tell a story in this world.

Throughout the 12-session arc, Lexa and Riley weren’t the only ones growing and learning about themselves and each other. Playing Lexa has allowed me (yes, I gave life to Lexa) to heal and repair some of the most traumatic relational experiences that don’t require me to engage in the verbal practice of processing the experiences. It’s been incredibly healing. My friend and

colleague, Lara, who played Riley, shared that “Playing Riley allowed me to explore and start processing traumas I’d been avoiding in therapy for years. Through playing her story out, I built confidence in myself as she found hers during the game (Taylor Kester, 2022).” Playing these characters gave us enough room to explore parts of ourselves that we have historically had a more difficult time accessing directly. Having the externalization of these characters and the safety of the play space allowed us to explore these parts and heal them in ways we never thought possible. Through Lexa and Riley, we engaged in the therapeutic and applied use of a TTRPG.

The practice of applied and therapeutic TTRPG refers to using tabletop roleplaying games in ways that can help you develop skills and engage more deeply in an exploration of the self (Berkenstock Jr & Blakley, 2019). The Bodhana Group describes seven enhanced areas when using TTRPGs intentionally: education, social skills, empathy, creativity, initiative, resilience, and critical thinking (Berkenstock Jr & Blakley, 2019). A game facilitator who uses TTRPGs intentionally can use the seven areas to enhance the game in an applied manner allowing for impactful player growth. TTRPGS can build education skills by intentionally incorporating math, science, reading, and writing into the game encounters and scenarios. TTRPGS enhances social skills and empathy when players must work together to accomplish goals or when they need to interact with NPCs (non-playable characters—the characters the game master controls). Creativity is found in the game simply because playing TTRPGs is inherently creative. Initiative, resilience, and critical thinking are incorporated and enhanced when players face making decisions, coping during failure, and evaluating the best options for their characters (Berkenstock Jr & Blakley). Nordic Larp identifies roleplaying as a narrative tool individuals use to help understand their life experiences (Bowman & Hedgard Hugaas, 2021). When we roleplay in a game like *Alibi*, we are giving ourselves distance from our experiences and are instead inhabiting someone else’s experiences; Marriage & Family therapists would refer to this as externalization (Morgan, 2002). Playing a character in a TTRPG allows us to separate ourselves from our lived experiences and sometimes give those experiences to our character while still experiencing the separation. The externalization enables us to explore our life stories differently because it has become a part of our character’s life stories (Bowman & Hedgard Hugaas, 2021). This externalization allowed me and Lara to explore painful parts of our stories through Lexa and Riley.

Whether using TTRPGs to build and cultivate skills or explore the self, an essential aspect of applied TTRPG use is the end-game check-out. The check-out allows players to talk individually and as a group about what happened during play that session. During the check-out, players will answer process-focused questions regarding how the space impacted them and what that might mean for them as the player and for their characters. The debrief allows players to connect in-game experiences with their lives and make meaning out of the play (Bowman & Hedgard Hugaas, 2021). The check-outs are essential, and it was through these check-outs Lara and I realized what we were experiencing by playing Lexa and Riley. Lara and I were so impacted and inspired by playing Lexa and Riley that we have since begun developing a letter-writing two-player game about repairing harm. It’s that type of growth that has the potential to help others heal through this type of play.

For more than two years now, I have played and used TTRPGs in a therapeutic and applied manner. As a therapist, I spent a year running therapeutic TTRPGs in a group therapy setting by incorporating social skills and therapeutic goals into the TTRPG play. I have since stopped practicing as a therapist, but I still use TTRPGs intentionally both for my benefit and for the benefit of others. Instead of therapy-focused TTRPGs, I build STEM-enhanced TTRPGS. I have created a community where like-minded professionals can engage one another around the intentional use of TTRPGS called CASTT Gamers. CASTT Gamers is a Community of Applied, Spiritual, and Tabletop Gamers who use intentional tabletop practices in their work with others.

CASTT Gamers provides a space on discord for individuals to learn from one another and receive support. It gives a space for people to play games they might want to use intentionally in their work and helps them learn more about the many ways professionals use TTRPGS intentionally. CASTT Gamers also streams four shows focusing on how to use TTRPGS intentionally. Two shows, Friday Night CASTT and Gays of Our Lives, are actual play shows that concentrate on playing the games live and then discussing the impacts of the games on ourselves. Gays of Our Lives, more specifically, is an all-queer group playing queer-focused games and then discussing the effects. Both shows hope to show how to use TTRPGS intentionally and the impacts playing with intention can have on the players. The other two shows are more focused discussions of the intentional uses of TTRPGS. Tabletop Transformations is a show focused on exploring the spiritual applications of specific games, whereas Community Care: Play Your Part focuses on exploring community care practices in TTRPGs. All of the shows we produce display how the intentional use of TTRPGS can impact individual growth and relational growth amongst the participants, including the facilitator. It has been a truly amazing experience to watch CASTT Gamers' reach grow. It has been genuinely life-changing to be a large part of the CASTT Gamers community and share this approach to TTRPGS with others. As a part of this community, I have been on panels discussing the impacts of playing TTRPGS with other professionals, the effects of TTRPGS on the self, and how you can explore Queer identity using TTRPGS. Without having experienced the impacts of applied and therapeutic TTRPGs, I never would have gotten to participate in all those opportunities. I hope that we can continue to share with others the creative and unique approach to self-exploration and skill-building TTRPGs offers.

Does this sound interesting to you? Do you want to learn how to engage TTRPGs in this way? Please join our CASTT Gamers discord at <https://wlo.link/@casttgamers> or email me at kayla@geektherapy.org. If you want to see Lexa and Riley's story play out in all its gay angst, you can watch all 12 episodes plus the final in-depth debrief (where we delve deeper into how the characters impacted us) on our CASTT Gamers YouTube channel. You will also be able to find the other shows on our CASTT Gamers YouTube channel if you are interested in watching any of those. You can watch all our shows live on our Twitch channel, CASTT_Gamers. We stream every Friday night, every other Sunday, every third Thursday, and every fourth Thursday. Finally, if you're interested in all the ways gaming can be therapeutic and used in therapy, check out the Therapeutic and Applied Geek and Gaming Summit: <https://2022.taggsummit.org/>.

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The Privilege and Challenge of a Different Type of “Couples” Therapy

Brian J. Crim, MS, LMFT; Owner, Adulteen Counseling, LLC
UW-Stout MFT Alum '11 (he/him)

In 2009, after twelve years of life in the work force, I returned to academia to pursue a masters degree in Marriage and Family Therapy. By the end of 2011, my diploma and my license hung on the wall of my new office. Little did I know that ten years later I would be going through the same process all over again. Except this time, after two years (2021), I was watching my wife hang her diploma and license on the wall of her new office. We are now a “couple” doing therapy. We are not alone in this endeavor, either.

My oldest son’s in-laws are both LICSW’s (those poor kids, can you imagine all of your parents being therapists?). I had the blessing of watching and interacting with an amazing couple as they went through the program together in the cohort behind me. Today, I am teaching and will soon be supervising a student who in a few short months will be joining his spouse as an MFT. What a unique privilege and challenge it is to be a therapist alongside the same person you share the rest of life with.

The Privilege: It’s amazing to share a passion with the person you love

My wife and I have always been nerds who like to talk about very deep things that many other people could care less about. Even though we swam in different oceans for a number of years, we still enjoyed trying to understand the things that the other person was experiencing when they were away from us. Sometimes it worked and other times it didn’t. For many years my wife could not understand why I was not home after the end of my last session within the exact time it takes for me to drive home. Then she experienced the challenging clients who don’t want to stop talking just because the time is up, the endless paperwork that you don’t want to get behind on,

and the phone calls you can't find any other time to make. It was so affirming to hear, "I'm sorry for giving you a hard time. I get it now." We enjoy talking about theories and sharing about all the new things we are learning. It's great to share and process with colleagues who know and connect with your experience, but it is amazing to be able to do that with the person you long to know and be known by the most.

The Challenge: You have to work extra hard to not become enmeshed

As an individual, it was always tempting to try and sneak a little more work in when you were at home. When you both come home from the same job, that temptation is on steroids. An important thing for avoiding burnout as therapists is maintaining a proper work-life balance and focusing on self care. This doubles when you are doing "couples" therapy. Boundaries around processing things that are weighing on you, making phone calls, discussing business issues, etc need to be clearly discussed and held to. Sometimes being more understanding of what the other person is experiencing can cause you to become softer with boundaries. There comes a new danger of becoming enmeshed with each other and with therapy. If we are going to teach others about clear boundaries and healthy living, it's probably important for us to practice them ourselves.

About Our Program

Established in 1974, the University of Wisconsin–Stout's Master of Science in Marriage and Family Therapy program has a longstanding reputation for rigorous clinical training in counseling and therapy, providing students with proven methods to become successful, effective therapists for individuals, couples, and families. The program has been continuously accredited for more than 40 years by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), meaning the program is held to the highest standards of the profession. The curriculum meets the MFT educational licensing requirements of Wisconsin, Minnesota, and many other states; prepares graduates for the Association of Marriage and Family Therapy Regulatory Boards' national licensing exam; and meets the standards of the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE). For more information, please visit <https://www.uwstout.edu/programs/ms-marriage-and-family-therapy>.

MFT Program and *The Courier* Contact Information

To receive an electronic or mailed copy of *The Courier*, please contact Rachel Mickelson, Graduate Assistant, below. To learn more about UW-Stout's Marriage and Family Therapy Program, contact Heather Hessel, Program Director, below.

Heather Hessel, PhD, LMFT	hesselh@uwstout.edu	715-232-1405
Candice Maier, PhD, LMFT	maierc@uwstout.edu	715-232-4091
Rachel Mickelson, Graduate Assistant and MFT Student	mickelsonr8797@my.uwstout.edu	



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