Image: Weight Provide the Oregon Psychological Association

2nd Quarter 2016

Volume 35, Number 2

What's Inside

The Bookshelf: Autism Spectrum Disorders3

Intersectionality, Cultural Humility, and Silence4

You Cannot Be Everything to Everyone......6

Creating a Generation of Oregon Psychologists Invested in Leadership:
Reflections from the 2016 State Leadership Conference
OPA Announces 2016-2017
Board of Directors
White Collar Mental Health9
OPA 2016 Award Honorees 11
OBPE 2015 Year-End Stats14
Welcome New and Returning OPA Members19
Conference Highlights 20
OPA Continuing Education Workshops22
OPA Public Education (PEC) Committee in Action24
OPA Classifieds25

OPA President's Column Musing on the Setting and Rising Sun

Wendy Bourg, PhD, OPA President



The setting sun and music at the close As the last taste of sweets, is sweetest last Writ in remembrance more than things long past.

-William Shakespeare

As I reflect on the past year it is with a smile both happy and wry. Happy because I am proud of what OPA has done and is doing on your behalf. Our Board of Directors has been a strong team this year and I am proud both of what has been accomplished and the manner in which it has been done. I write this column after several days of smiling while watching our members recognize that we finally have a voice on behalf of our clients with the Oregon Insurance Division. It is beautiful to observe our members leaping into action on behalf of their clients.

I know that even more work is continuing behind the scenes to increase our voice and our clients' voices as OPA tirelessly advocates for true parity and for recognition that mental health care IS health care. Mental health care IS primary care. Mental health care IS specialty care. Mental health care goes to the core of ensuring WELLNESS of the entire being who presents to our health care system. OPA will continue advocating until this is recognized through positions at all levels of the system and in terms of payment mechanisms that reimburse consistently and appropriately when people are using our services to meet their very real needs. I specifically honor the incredible work done this year by our lobbyists, our Legislative and Political Advocacy committees and our Professional Affairs Committee to achieve wins in the areas of reimbursement and voicing for our clients.

We began this year in a crisis with the leaking of the Hoffman Report. While APA is mired in this controversy, OPA is involved, attentive, and concerned. Yet we have remained STEADY as an organization. Steady in pursuing seats at the table throughout our state during the healthcare transformation to advocate for our clients. Steady in our efforts to produce reimbursement mechanisms that work for psychologists at all levels of the healthcare system. Steady in pursuing safe and accessible care to diverse populations in our state. Steady in protecting the meaning of our licensure by ensuring that anyone licensed as a psychologist in Oregon has been personally supervised and mentored so they

OPA Helpful Contacts

The following is contact information for resources commonly used by OPA members.

OPA Office

Sandra Fisher, CAE - Executive Director 147 SE 102nd Portland, OR 97216 503.253.9155 or 800.541.9798 Fax: 503.253.9172 Email: info@opa.org Website: www.opa.org

OPA Lobbyist

Lara Smith - Lobbyist Smith Government Relations PO Box 86425 Portland, Oregon 97286 503.477.7230 Email: lsmith@smithgovernmentrelations.com

Oregon Board of Psychologist Examiners (OBPE)

3218 Pringle Rd. SE, #130 Salem, OR 97302 503.378.4154 Website: www.obpe.state.or.us

OPA's Legal Counsel*

Paul Cooney, JD Cooney, Cooney and Madigan, LLC 12725 SW 66th Ave., #205 Portland, OR 97223 503.607.2711 Email: pcooney@cooneyllc.com

*Through OPA's relationship with Cooney, Cooney and Madigan, LLC as general counsel for OPA, members are entitled to one free 30-minute consultation per year, per member. If further consultation or work is needed and you wish to proceed with their services, you will receive their services at discounted rates. When calling, please identify yourself as an OPA member.

President's Message, continued from page 1

offer appropriate care. Steady in our efforts to give you and your clients a voice in how care is offered. And steady in placing people in APA leadership with the hopes that APA will weather this crisis and emerge stronger, more transparent, and more effective as an organization. I am specifically proud of our Diversity Committee for partnering with Basic Rights Oregon to protect vulnerable individuals from inappropriate care. I am particularly proud of our ongoing cooperation with the Oregon Board of Psychologist Examiners to protect the meaning of our license and to ensure compassion and fairness in their disciplinary function.

I am proud of the Community filled with connection and collaboration that OPA offers psychologists in Oregon. I am specifically proud of the work our Public Education Committee did to support those traumatized by the Umpgua Community College shooting. I am proud of how we offer support to you, our members, through free Ethics consultation, Diversity consultation, Legal consultation and Colleague Assistance. Our Public Education Committee offers resources to the public on Facebook and Twitter, and many of our committees offer resources directly to you through postings on our web page.

I am especially proud of the support we offer students and early career psychologists through opportunities to show off their work (such as our conference poster session) and resources to set up different forms of practice (such as a conference presentation and resources on our website posted by Professional Affairs Committee). It has not always been this way. When I joined OPA, I used to hear "psychologists eat their young." I am pleased to have been part of a yearslong cultural shift at OPA through a succession of leaders. I am now confident that we support, nurture, and guide our young. We have student and early career leaders on our board and we have placed these individuals in national leadership positions as well.

In sum, I am impressed and grateful for the volunteers on OPA's Board of Directors who freely give of their time to advocate for ALL psychologists in Oregon. I am proud of the members who are standing by us in difficult times, supporting our work on your behalf and voicing your concerns to us so that we can meet the needs of you and your clients. As challenges face us, we lean into the wind and keep walking on your behalf. We are grateful that you keep walking alongside of us.

And why is my smile wry? Because at the beginning of this year my dreams were big and the year seemed long. The year is nearly done, having passed in the blink of an eye. I realize we walked the path of my dreams and yet my part was but one stone. Thank you to the Board of Directors and to the members for sharing this year with me.

The path continues and it is with pride and hopeful anticipation that I pass the baton to Dr. Shahana Koslofsky, to whom I will be offering my eager support in the year to come.

Even the seasons form a great circle in their changing, and always come back again to where they were. The life of a man is a circle from childhood to childhood, and so it is in everything where power moves.

-Black Elk

The Bookshelf: Autism Spectrum Disorders

Shoshana D. Kerewsky, PsyD, HS-BCP, Editor, The Oregon Psychologist

Psychologists frequently request book

recommendations on a variety of topics. Below you'll find a list of books on Autism Spectrum Disorders. This is by no means an exhaustive list; rather, it's a selection of books on the topic that I have found interesting and enjoyable to read. This list includes memoirs by people with ASD and their family members.

As with any media, review it yourself before making recommendations to a client or student.

Memoirs by parents

Collins, P. (2004). Not even wrong: A father's journey into the long history of autism. New York: Bloomsbury. Part memoir, part history, by the author of *Banvard's Folly: Thirteen Tales of People Who Didn't Change the World*. Especially interesting for psychologists and others engaged in ASD testing as he describes his initial disbelief and resentment related to his son's evaluation.

Mont, D. (2001). *A different kind of boy: A father's memoir on raising a gifted child with autism*. London: Jessica Kingsley. A very sweet memoir by the father of a son with ASD.

Park, C. C. (2001). *Exiting nirvana: A daughter's life with autism*. Boston: Back Bay. A memoir by the mother of a very talented artist with ASD.

Memoirs by people with ASD

Nazeer, K. (2006). *Send in the idiots: Stories from the other side of autism*. London: Bloomsbury. Nazeer, a political speechwriter, visits students from his childhood special needs classroom.

Prince-Hughes, D. (2004). *Songs of the gorilla nation: My journey through autism*. New York: Harmony. Diagnosed in adulthood, Prince-Hughes is an advocate for gorillas and a former Ms. Seattle Leather Woman.

Tammet, D. (2007). *Born on a blue day: Inside the extraordinary mind of an autistic savant. New York: Simon & Schuster*. Tammett is a mathematical and language savant who, among other accomplishments, learned conversational Icelandic in a week.

Williams, D. (1992). *Nobody nowhere: The extraordinary autobiography of an autistic*. New York: Crown. An early memoir in this genre. Williams's followup memoir is *Somebody Somewhere: Free from the World of Autism*.

Collateral accounts (narratives by two family members)

Cutler, E. (2004). *A thorn in my pocket: Temple Grandin's mother tells the family story*. Arlington, TX: Future Horizons. Temple Grandin's mother provides another perspective on her early life. Read with Grandin, *Emergence: Labeled Autistic, Thinking in Pictures: My Life with Autism,* or one of her many other books. Oliver Sacks has profiled and referenced Grandin in his work, notably in *An Anthropologist on Mars: Seven Paradoxical Tales*.

Robison, J. E. (2008). *Look me in the eye: My life with Asperger's*. New York: Three Rivers. Robison's memoir may be paired with brother Augusten Burroughs's *A Wolf at the Table: A Memoir of My Father,* which focuses on family dynamics at about the same time in the siblings' lives.

You will find many related books by entering these titles on Goodreads, Library Thing, Powell's, Amazon, or other online book review and sales sites.

What's on your bookshelf? You're welcome to submit your own annotated list with APA-style references for main entries to kerewskyopa@gmail.com.

ACCEPTANCE & COMMITMENT THERAPY

TRAINING IN PORTLAND

Who Am I to I Here Now: How Relational Frame Theory Can Help Your Clients Develop a More Flexible Sense of Self

Oct. 14 & 15, 2016 – Two day training for all levels with Matthieu Villatte, Ph.D.

Acceptance and Commitment Therapy: An Experiential and Practical Introduction Nov. 11 & 12, 2016 – Two day introductory training with Jason Luoma, PhD and Jenna LeJeune, Ph.D.

PORTLAND PSYCH CTHERAPY clinic research training

portlandpsychotherapyclinic.com/workshops 503-281-4852

Intersectionality, Cultural Humility, and Silence

Jessica L. Binkley, PsyD, OPA Diversity Committee

Lately I have been noticing an increase in patients bringing comments into session about racial injustices and power imbalances. Some of them discuss their reactions to Donald Trump's presidential campaign or increased visibility of the murders of young Black men and women. Others are courageous enough to bring up microaggressions impacting our clinical work. In these interactions. I have been reflecting on how to engage in culturally humble practice while also prioritizing the clinical relationship. In particular, I have found myself thinking not only about how to respond to patients, but also what messages my silences may send.

Tervalon and Murray-García (1998) define cultural humility as a lifelong learning process requiring a) ongoing self-reflection and awareness of the clinician's cultural identities; values, and beliefs; b) addressing power imbalances in patient care and communication; and c) a commitment to developing and maintaining mutual respect with patients and their communities. These authors also highlight the importance of eliciting and valuing patient perspectives, advocating with (rather than for) patients and their communities, and the importance of clinicians' humility to "say that they [clinicians] do not know when they truly do not know" (p. 119).

An important component of my personal process in strengthening cultural humility, as well as standing in solidarity with marginalized communities, has been exploring my own intersecting identities. Kimberlé Crenshaw, a Black legal scholar and professor, introduced *intersectionality* in the late 1980s as a means to critically examine the interaction of various power structures in the lives of women of color. Rather than considering the impact of power imbalances on single identity categories (e.g., race, class, gender) in isolation, intersectionality is a framework to examine how both

privileged and oppressed identities combine and mutually influence the other (e.g., exclusion and invisibility of poor women of color from feminist movements). For example, I was assigned female at birth and come from a mixed ethnic background (White, Native American), and due to my skin color and chosen presentation am afforded White and cisgender privilege. The additional intersections of class and educational privilege allow me to be received positively by dominant culture peers and more easily navigate complex systems (e.g., healthcare, academia, workplace).

As Tervalon and Murray-García (1998) suggest, examining and owning what I do not know-as well as how these topics may impact patient care—comes with letting go of a certain amount of (false) security. As a White person, I am rarely challenged to let go of, or even examine, my racial privilege. Additionally, cisgender privilege allows me more flexibility in my emotional responses; for example, I am less likely than a cisgender male to be gender-policed if I cry or express sadness. Unfortunately, this same privilege can at times result in performances of White fragility. which Robin DiAngelo defines as a lack of racial stamina, in which even small amounts of racial stress are overwhelming and lead to defensive responses (DiAngelo, 2011).

In this respect, I recently had the opportunity to attend a play at the Portland Artists Repertory Theater called, "We are proud to present a presentation about the Herero of Namibia, formerly known as Southwest Africa, from the German Sudwestafrika, between the years 1884-1915" by Jackie Sibblies Drury. Drury's play depicts the interactions and process of a small group of actors as they attempt to create a performance about the genocide of the Herero people by German colonists. The play was provocative, horrifying, and deeply moving.

Throughout the experience, I sat with a sense of disgust and fear as I watched the group of actors harass, torture, and degrade one of the main characters, a Black man. At one point, he repeats, "I have been Black all my life." This line has stuck with me.

I have been White all my life, and there are many things I do not know, and will never know. For instance, because of my White privilege, I am unlikely to experience racial profiling or violence at the hands of police or community members. I have never been followed in stores or told by friends or coworkers that I got a job only because of Affirmative Action policies. I will not be criticized as "too sensitive" or seen as a threat if I speak truth to power by asserting that Black Lives Matter, that racism is real, and that I am also accountable for the ongoing Otherizing of Black bodies. I am at low risk of healthcare disparities or receiving subpar medical or mental health care. Because of the invisible nature of many of my marginalized identities, I have the additional privilege of choosing to remain silent should I experience (fleeting) discomfort at bringing up microaggressions, learning about social injustices. or being challenged by friends or colleagues of color.

I believe that part of cultural humility as a White person working in our field involves being responsible for self-reflection and examination of how power imbalances (including those I reinforce through silence or by engaging in White fragility) shape my personal and professional experiences. I am hopeful that as psychologists, we can challenge each other to strengthen our culturally humble practices, rather than to retreat into silence or (false) security which privileged aspects of our identities may allow. As Audre Lorde (1977) said, "Your silence will not protect you." No matter what intersecting identities we hold as

Continued on page 7

Worried About Spotty Malpractice Coverage?

We've got you covered.

Trust Sponsored Professional Liability Insurance* for psychologists is spot on — with essential coverages that protect you whenever and wherever you provide psychology services, plus a host of features you may not find in other malpractice policies.

We focus on Psychologists.

At The Trust, you're not just another insurance policy among so many professional classes. Our malpractice coverage and supporting programs are designed by psychologists and insurance experts to focus on the profession of psychology — especially as it explores and adapts to new and dynamic service delivery models.

Features you may not find in other policies:

- Insurance premium discounts including CE, early career, part time, group, and more
- Broad affordable occurrence & claims-made coverage rated A++ by A.M. Best
- Unlimited confidential consultations with independent risk management experts
- No sublimit for defense of sexual misconduct allegations and a free extended reporting period or "tail" to insureds upon retirement
- Case review process for adverse claim decision by insurance carrier
- Through TrustPARMA,** reduced registration fees for continuing education workshops and webinars

www.trustinsurance.com · 1-800-477-1200

Insurance provided by ACE American Insurance Company, Philadelphia, PA and its U.S.-based Chubb underwriting company affiliates. Program administered by Trust Risk Management Services, Inc. The product information above is a summary only. The insurance policy actually issued contains the terms and conditions of the contract. All products may not be available in all states. Chubb is the marketing name used to refer to subsidiaries of Chubb Limited providing insurance and related services. For a list of these subsidiaries, please visit new.chubb.com. Chubb Limited, the parent company of Chubb, is listed on the New York Stock Exchange (NYSE: CB) and is a component of the S&P 500 index.

** The Trust Practice and Risk Management Association (TrustPARMA) is a national nonprofit membership organization, established by The American Insurance Trust (The Trust) to support psychology, mental health, and allied health professions by promoting education, risk management, and practice management. For more information visit trustinsurance.com.

You Cannot Be Everything to Everyone

Casey Stewart, PsyD, ABPP, OPA Ethics Committee

The OPA Ethics Committee (EC) frequently receives requests for consultation involving situations that psychologists feel ill-equipped to manage on their own. Often these scenarios are not unusual, uncommon, or even particularly complex. But by the time we receive a call the psychologist has usually spent significant time fretting about it. And this has made him/her feel even less competent to manage the scenario.

After a preliminary assessment by the EC member, the next step in our consultation process is to find the committee member best suited to assist the caller. Importantly, this response may provide insight into the core issue underlying the caller's dilemma: The caller does not possess the requisite education, knowledge, and skill to address the particular issue he/she faces. This seems like such an obvious first step. It is a fundamental ethical standard that psychologists provide services to populations and in areas only within the boundaries of their competence (American Psychological Association, 2010). Yet much time has usually lapsed before the dilemma is viewed from this lens. Often the caller has not asked, "Am I really the one best suited to solve this problem?" And if they have not already been paralyzed for days, they have invested substantial resources generating ideas on how to solve the problem.



Wednesday-Friday, July 27-29 • 16.5 CEUs 42nd Annual Northwest Institute of Addiction Studies Conference

Saturday, August 6 • 7 CEUs Feedback Informed Treatment in Clinical Settings

Friday, August 12 • 6 CEUs Introduction to Art Therapy Interventions

Saturday, September 10 • 8 CEUs The Enneagram: Exploring a Tool for Clinical Practice

Saturday, September 10 • 3 CEUs Shaping Clay: Making Contact Through Sensory Work in Counseling and Therapy

Friday-Saturday, September 23-24 • 15 CEUs Applied Suicide Intervention Skills Training (ASIST)

Saturday, October 15 • 7 CEUs

Intercultural Communication: Critical Understandings for Effectiveness

Lewis & Clark Graduate School of Education and Counseling

More at go.lclark.edu/graduate/counselors/workshops

We believe that the reason we receive these calls relates to a combination of factors not unique to our profession and involving problematic assumptions. The first assumption is that a psychologist can be a generalist in practice; that is, a professional can be a jack of all trades, or an expert across specialties (e.g., interventionist and examiner, individual and group counselor, child and family therapist as well as traumatologist). Given the known short half-life of knowledge in the various specialty areas of professional psychology (Neimeyer, Taylor, & Rozensky, 2012), much is required in the way of ongoing and specific kinds of education and training to remain competent in a single area of practice. There are 14 specialty boards recognized by ABPP and 15 specialties and 5 proficiencies recognized by APA. Indeed, psychologists are prohibited from practicing in some areas (e.g., organizational consulting) without special authorization by their respective credentialing state.

The second myth is that psychologists are something other than people—superhuman. Psychologists are vulnerable, biased, and fallible (Ebbe, 2014; Gorovitz & Macintyre, 1975)—because they are human. And although this belief is scary to others in their safe worldview, it is a reality. It is a humbling reality that our insecurities individually and collectively can obscure. Consider the psychologist in practice for 20 years who has earned a reputation for being the foremost authority in the practice of forensic psychology within his/her state. He/she is considered the expert. He/she is presumed to be able to address competently any issue that arises in the forensic arena. We need to be able to trust his/her professional judgment. The safety of our community rests on his/her competence. And our belief that he/she is perfect is our peace of mind. But this one person cannot know all things and competently address all scenarios. He/she can have life experiences that result in blind spots, develop personal issues or face life situations that make him/her more or less competent at any given time, and simply make mistakes. Once this is accepted, another aspect of competence is added to his/her practice of psychology-self-reflection/ awareness. This process can lead to the identification of our own limitations. It can help identify when we are "off our game" and when we may be moving into a sport that we do not regularly play (e.g., Michael Jordan's foray into baseball).

We must unburden ourselves from the delusion that practitioners are infallible little gods. The surgeon can fail to wash his/her hands and create infection, a pilot can crash a plane, and a psychologist can be stumped by a complex or unfamiliar human dilemma.

In the spirit of doing no harm, consider this your professional permission slip to be human. You cannot be all things to all people. It is self-deception to believe that one can be competent across all areas of practice or cannot be

Continued on page 7

You Cannot Be Everything, continued from page 6

stumped by a scenario within one's regular area of practice. It is also a mistake to believe that competence is a static state. However, these errors in thinking are very human traps. The following are straightforward steps to monitor your competence (this includes knowing when you are out of your scope of practice or being aware of the day/s or weeks you should stay home):

- Create a summary paragraph of your education, training, and experience. This should be a single paragraph that represents both the limited scope of your expertise but also the extent of your specialty knowledge and skill.
- Stay connected (Novotney, 2016). The changing landscape of professional psychology (e.g., laws, practice standards) represents a challenge to competent practice. Belonging to professional groups helps psychologists remain informed and provides opportunities for support (e.g., Ethics Committee, legal counsel, Colleague Assistance Program). Recent research has shown that psychologists belonging to their state psychological association are less likely to be disciplined by a state board (Knapp & VandeCreek, 2012).
 - Have an up-to-date list of all the continuing education in which you have engaged. This should illustrate your ongoing efforts to remain abreast of the rapidly evolving information required to practice competently in one of the many distinctive areas of professional psychology.
 - Engage in self-assessment. Exploration often results in discovery. The APA houses many documents and tools that were engineered to help psychologists develop. These tools help identify our areas of strength and weakness with regard to knowledge, skills, and abilities.

- Participate in peer-review. Join an existing group or start your own annual meeting with a few people who engage in a similar area of professional practice. If your area is particularly competitive, reach out to people in other states who have a reputation for doing good work. These people represent your professional panel of judges. You could also think of them as a jury of your peers. Avail yourself of their kind scrutiny of your work.
- Seek consultation. Rest assured that the Ethics Committee gets calls from people who our community of psychologists considers the foremost authorities in a given area. Neither you nor I are better than them. And they are better for seeking a sounding board. Importantly, we get calls where psychologists presume that they are required to solve a problem. Sometimes we simply need permission and guidance to exercise diligence in handing the case to someone else.

Psychologists are human. They are imperfect. They do not know all of the answers to all of the problems of humanity. They cannot be everything to everyone. But also because we are human, we try. We try to be the best we can be. We do everything we can to help others. We are better at this sometimes than at other times because the process of being human is dynamic, not static. Sometimes we are simply not equipped to handle a particular issue. However, there are things that we can do as professionals that make us more adept at identifying when we are out of scope or off beat. We cannot do that if we reject our humanness. Please call us sooner rather than later. Listen to your instincts when you are uncertain about a case. Do not try and do everything on your own. While well-meaning, it may ultimately be harmful. Rely on your professional community to help you do good work.

References

American Psychological Association. (2010). *Ethical principles of psychologists and code of conduct*. Washington, DC: Author. Retrieved from http://www.apa.org/code/index. aspx

Ebbe, C. (2014). A communitarian approach to maintenance of professional competence. *The California Psychologist, 47,* 32.

Gorovitz, S. & Macintyre, A. (1975). Toward a theory of medical fallibility. *Hastings Center Report, 5,* 13-23.

Knapp, S., & VandeCreek, L. (2012). Disciplinary actions by a state board of psychology: Do gender and association membership matter? In G. J. Neimeyer & J. M. Taylor (Eds.). *Continuing professional development and lifelong learning: Issues, impacts and outcomes* (pp. 155–158). Hauppauge, NY: NOVA Science Publishers.

Neimeyer, G. J., Taylor, J. M., & Rozensky, R. H. (2012). The diminishing durability of knowledge in professional psychology: A Delphi poll of specialties and proficiencies. *Professional Psychology: Research and Practice, 43*, 364-371.

Novotney, A. (2016). Five ways to avoid malpractice. *Monitor on Psychology*, *47*, 56.

Intersectiononality, continued from page 4

psychologists, our silences will not protect us, either.

References

DiAngelo, R. (2011). White fragility. *International Journal of Critical Pedagogy*, *3*(3), 54-70.

Lorde, A. (1977, December). *The transformation of silence into language and action*. Paper presented at the Modern Language Association's Lesbian and Literature Panel, Chicago, IL.

Tervalon, M., & Murray-García, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. *Journal of Health Care for the Poor and Underserved*, 9(2), 117-125.

Creating a Generation of Oregon Psychologists Invested in Leadership: Reflections from the 2016 State Leadership Conference

Roseann Fish Getchell, doctoral student, George Fox University

Recently, I experienced the thrill of "hitting the hill" and advocating for Oregon psychologists, graduate students, patients, and community members amidst the hustle and bustle of our nation's Capitol. It was Legislative Advocacy Day, the finale to end my time attending the American Psychological Association State Leadership Conference in Washington, DC. I had just spent the last four days engaging in training with leaders in diversity, early career issues, social reform, legislation reform, and much more as I participated in passionate conversations with psychologists and graduate students from throughout the nation who share a single vision—advocacy.

As I stood with clinical psychologists from across Oregon, I felt a sense of power, ownership, and support while we walked to meet several Oregon legislators who wanted to hear about the state of mental health in our state. While speaking to representatives and their staff, it was an amazing—and nerve-racking—experience to share the stories of my patients who struggled to access quality mental health care. So many times as a student, I have found myself becoming frustrated and discouraged when I have met with patients who experienced a mental health crisis but who were forced to wait for care in emergency departments, friend's homes, or on the streets. When I

PORTLAND | EMOTION FOCUSED THERAPY™ COUPLES THERAPY TRAINING

EFT provides research based, powerful, clear-cut models for working with individuals and couples

- Develop a solid conceptual foundation and practical skills for effective, focused work with couples
- Incorporate 35 years of EFT research on emotional change processes into your therapy practice
- Integrate tasks from the individual therapy EFT model to address common impasses in EFT for couples

40 CE HOURS AVAILABLE

TRAINING INCLUDES READINGS, VIDEOS, SKILL BUILDING EXERCISES AND ROLE PLAYS NEXT TRAINING GROUP STARTS OCTOBER 2016

BOWARDS PSYCHOTHERAPY

Charles Edwards рн.р. Jamie Levin-Edwards рsy.р. edwardspsychotherapy.com • 503.222.0557 was standing amidst other students and psychologists who cared about people who were suffering and who were advocating for them, it filled me with a sense of hope.

This sense of optimism stemmed from so many individual experiences I had with other people attending the State Leadership Conference. One specific experience took place on the plane ride back to Portland, as I had the pleasure of sitting next to an early career psychologist working in rural Oregon. Although both of us were exhausted from the whirlwind of the conference, we were able to have an honest and encouraging conversation regarding professional development, work/life balance, and opportunities to engage in meaningful change within the community. I was honored to connect with a current psychologist who is so passionate about providing quality care to her community.

I am incredibly grateful for the level of encouragement and support I received from a number of Oregon psychologists. It has been extremely meaningful for me to connect with mentors as I find my professional voice as a graduate student, and continues to fuel my passion to become an active and engaged clinical psychologist in our Oregon community.

OPA Announces 2016-2017 Board of Directors

The following OPA members were elected to serve as the new officers for the 2016-2017 Board of Directors and will take office on July 1st:

Ryan Dix, PsyD—President–Elect Natalie Kollross, PsyD—Treasurer Freda Bax, PsyD—Secretary

The following OPA members were elected as directors for the 2016-2017 board:

Carilyn Ellis, PsyD

Spencer Griffith, PsyD

Remaining Board members (with the title that will go into effect on July 1, 2016) will include: Shahana Koslofsky, PhD, President; Wendy Bourg, PhD, Past President; Cliff Johannsen, PhD, APA Council Representative; Natalie Kollross, PsyD, Diversity Committee Chair; Lisa Schimmel PhD, Ethics Committee Chair; Robin Henderson, PsyD, Legislative Committee Chair; Juliette Cutts, PsyD, Director; Alan Ledford, PhD, Director; Ryan Dix, PsyD, OBPE Liaison; Ben Paynter, MA, Student Representative; Bill McConochie, PhD, Lane County Chapter Rep; Connie Umphred, PhD, Eastern Oregon Chapter Rep and Kim Swanson, PhD, Central Oregon Rep.

White Collar Mental Health

Nathan W. Engle, PsyD

One day, I decided to date a lawyer. I thought that his degree indicated that he would understand my graduate school experience and would be able to sympathize with my stress personally and professionally. I quickly learned that having a Juris Doctor did not indicate sophisticated empathy, but instead, excellence in logic.

As our relationship progressed over several years, I hoped he would respond to my graduate school-related stress with therapeutic gazes that communicated, "I am here for you." Instead, I received logical arguments expounding the reasons for not feeling sadness or "processing my emotions." We replayed this unworkable interaction several times before we realized how our career choices had drastically impacted how we each approached relationships and emotional needs.

I spent many hours over the course of a couple years researching how various vocations tend to manage stress. My research into mental health professions yielded many quality articles and in-depth discussions that addressed work-life balance issues. In stark contrast, my research of the psychological health of "white collar" professionals, such as attorneys, mostly yielded a few blog posts describing the lack of self-care training in law schools.

I was astounded. I asked my partner if he had received self-care training in graduate school or supportive resources for managing vocational stress. He asked in return, "What's 'self-care'? Law school isn't about you; it's about the law. You just do whatever you need to do in order to come out ahead. Alcohol, drugs, all-nighters—whatever helps you win." He briefly described how he strategically "got through" law school and then started listing examples of more intense strategies his graduate school constituents or current associates use to manage stress.

This caused me profound sadness and frustrating confusion. He works so diligently and is committed to the application of a complex skill set, yet has received minimal support for managing professional stress. A powerful group of people who are crucial to the structure of our country sustain their careers with a constricted state of psychological health. Social prominence does not inherently cultivate a sense of well-being. Are other "white collar careers" also at risk to live their lives in psychological shackles? Yes.

Lawyers and judges are known for navigating an immensely stressful world of law while arguing about some of the most inflamed issues of life, including matters which determine the balance of a person's freedom, the structure of a family, and how to balance competing and incompatible views on issues such as corporate, environmental or civil law. The stress that is induced by their jobs and exacerbated by their professional culture powerfully infiltrates every part of their lives. Substance abuse, divorce, and caustic professional competition are among a host of real issues that are pervasive problems in an entire sector of the professional workforce. My partner defended the point that introducing "self-care practices" may possibly blunt one's professional competitive edge or make it difficult to view problems from a strictly logical standpoint. This is ironic and tragic indeed. How do we support the psychological health of our society if we continue to rely on ensnared lifestyles for the societal benefits? Maybe the answer is beyond my philosophical insight. Or, maybe the answer will come from a terrifyingly straightforward question: Which will benefit me more—the improvement of the lawyer's well-being or the continuation of how the practice of law currently works? As a society, which do we care more about—the well-being of thousands of professionals or the outcome of their hard work?

I deeply care for the psychological health of my partner but I am powerless to rescue him from the inevitable life stress that similarly plagues me. Perhaps the primary issue in advocating for the psychological well-being of attorneys and other professionals is not one based on rescue or protection but rather on validation and partnership. I am not suggesting that everyone who works in a suit and tie should become romantically involved with a therapist. However, it is clear that there are numerous unmet mental health needs in white collar professions, and a drastic strategy to address such needs may be warranted.

Salem health is currently seeking a talented psychologist to join our team!

Apply now

SALEM HEALTH An OHSU Partner



JOIN OUR FAMILY OF PHYSICIANS

Northwest Permanente, P.C. is currently seeking **BC/BE ADULT PSYCHIATRISTS** to staff our facilities throughout the **PORTLAND METRO AREA**, **SALEM**, **OREGON AND VANCOUVER**, **WASHINGTON**. The positions include direct clinical work with outpatients and require compatibility with physicians in the primary care setting.

EXPERIENCE & REQUIREMENTS:

Medication consultation

☑ Evidence based psychiatric treatments required

Crisis intervention

Sychiatric consultation

The Department of Mental Health has a multidisciplinary staff of over 130 mental health professionals in medical offices throughout Oregon and Southwest Washington. We presently offer adult and child adolescent outpatient treatment, intensive outpatient therapy, group therapies as well as providing a 24-hour hospital-based crisis program. A full range of outpatient mental health services are provided by the department for covered conditions.

WE OFFER EXCELLENT BENEFITS:

- \$25,000 sign-on bonus*
- \$125,000 Loan Assistance Program*
- Competitive Compensation

- Medical & dental coverage
- Retirement benefits
- Vacation & educational leave

*Inquire for details

APPLY TODAY! CONTACT OUR RECRUITER LAURA RUSSELL (503) 928-6413

Interested candidates may also apply online at kpphysiciancareers.com/psych

EEO/Employer/Vet/Disabled. We maintain a drug-free workplace and perform pre-employment substance abuse testing.

OPA 2016 Award Honorees

Every year OPA recognizes outstanding individuals and organizations through its award ceremonies at the Annual Conference. Below are this year's recipients. Please see photos on pages 20-21.

Outstanding Service Award

This award honors a special group within our community that has made strides to help teach our community about the importance of psychology and mental health. The award was established to acknowledge the contributions of a person or group in Oregon, who has by its actions, theory or research promoted or contributed to the emotional and psychological well-being of others through the positive use of psychological principles.

This year OPA honored Basic Rights of Oregon.

Basic Rights Oregon works to ensure that all lesbian, gay, bisexual and transgender Oregonians experience equality by building a broad and inclusive politically powerful movement, shifting public opinion, and achieving policy victories.

Basic Rights Oregon has a long history of advocating for marginalized communities in Oregon, especially LGBTQ communities. In early 2015 they approached the OPA asking for our support to press for legislation that would put a stop to harmful practices of attempts to change sexual orientation or gender identity of LGBTQ individuals. The OPA Board was fully supportive of their efforts and a Board representative offered testimony at the legislative hearings. Though we were able to offer a clinical perspective and research data to make a case for outlawing conversion or reparative therapy practices, it was really the compelling and wholehearted stories of those individuals who have survived these practices that seemed to have the greatest impact.

This legislation that BRO sponsored/proposed sends a clear and unequivocal message to licensed mental health providers that any attempts to engage a client, regardless of their desire or consent, in efforts to change their sexual orientation or attempts to align their gender identity with their sex assigned at birth, should be considered unethical and in fact harmful.

This legislation serves to protect the general public, as well as educate the general public about what they can and should expect from a mental health provider in relation to their sexual orientation or gender identity.

Oregon was just the third state in the country to pass such legislation and it is because of the efforts of Basic Rights Oregon that the state of Oregon can be proud of our evolving record on LGBTQ rights and protections.

OPA was pleased to honor Basic Rights of Oregon and their representatives with this years' Service Award. Accepting the award at the OPA Conference were Jeana Frazzini, Co-Director of Basic Rights Oregon, and her guests Rep. Rob Nosse, who carried the bill, and Paul Southwick, who courageously shared his personal story.

Diversity Award

The Diversity Committee honored Gar deBardelaben, PhD (posthumously) with its Diversity Award. The committee highlighted his many contributions promoting issues of diversity, both directly and indirectly, within the field of psychology. These contributions were not always recognized and, as OPA discovered, many of them remain unrecognized, which is why OPA feels it is so important to highlight them through this award. While he should have been honored in life, the OPA Diversity Committee and its members hope we can respectfully honor his memory now as he paved the way for psychologists of color in many ways.

Dr. deBardelaben was the first African-American licensed-clinical psychologist in Oregon and remained the only one for some time. He was the first African-American president of OPA. He was a founder of a multi-ethnic, international consulting firm. Throughout his professional career he focused in issues of diversity and inclusion. He was a leader in his personal and professional communities serving on the Oregon State Commission on Black Affairs and as a board member for the African-American Mental-Health Commission. These are just some of his many accolades. On a personal note, all who had the pleasure of knowing him cannot say enough about his kindness, dedication, and humility. He was truly a pioneer within

Continued on page 12

Hazelden

MENTAL HEALTH DIRECTOR HAZELDEN SPRINGBROOK - NEWBERG, OREGON

Hazelden Betty Ford Foundation is recruiting for Director of Mental Health Services at Hazelden Springbrook in Newberg, Oregon. We are looking for an experienced psychologist with excellent leadership skills to direct our mental health department.

Hazelden Springbrook delivers a multidisciplinary team approach to treating people with substance use disorders. We provide medical detoxification, residential, intensive day treatment, and outpatient levels of care for patients.

We offer specialty clinical programming for patients with co-occurring mental health disorders as well as specialty tracks for health care professionals, patients who are dealing with trauma issues, and for patients who identify as members of the LGBTQ community.

The mental health department is comprised of psychiatrists, psychiatric nurse practitioners, psychologists, and masters level clinicians. We also provide training opportunities for residents and students. Mental health services include assessments, group and individual therapy, specialty assessments, and case consultation.

Required Qualifications

- Doctorate degree in psychology or related field
- Eligible for Oregon licensure
- 3 years of experience in the field of mental health and substance use treatment
- Minimum of 4 years supervisory experience

If interested, you can view the position and apply online at <u>hazeldenbettyford.org/careers.</u>

Please contact Shari Melton at <u>smelton@hazeldenbettyford.org</u> if you have questions about the position or the application process. Please feel free to share this announcement with your interested colleagues.

the field of psychology in Oregon, and was a leader by example. Gar's wife Marian deBardelaben accepted the award at the OPA Conference on Gar's behalf.

Labby Award

The Labby Award is the association's most prestigious award. It represents an OPA member who has shown outstanding contributions to the development of the advancement of psychology in Oregon. OPA selected Teri Strong, PhD as the 2016 Labby Award recipient. She exemplifies the merits the award calls for through her years of service and contributions to the development and advancement of psychology.

Dr. Strong has more than 25 years' experience in clinical, educational and managerial positions. She holds a doctorate in Counseling Psychology from the University of Oregon, a Master's degree from the University of Missouri-Columbia, and a Bachelor's Degree in Psychology from Simpson College in her home state, of Iowa.

In her work life, in 2014 she launched an innovative private practice in Eugene called Strong Integrated Behavioral Health, LLC, with the mission of partnering with clients and their team of treatment providers to promote optimal health and wellbeing through compassionate, coordinated care. To that end, she leads a team of experienced psychologists and psychologist residents, who provide integrated psychological services onsite in primary and specialty care medical clinics in her community. The team also provides a wide range of psychological services in their outpatient clinic.

Prior to this, she served as the Director of Behavioral Health for Cascade Health Solutions, a private non-profit healthcare organization in Eugene for 12 years, and, before that, had a solo psychological practice and worked part-time at a multidisciplinary chronic pain clinic for 7 years in Eugene.

She has extensive experience providing training, leadership and organizational development in a variety of professional settings. She has served on the graduate faculties of both Oregon State University and the University of Oregon, teaching courses in social justice and diversity and clinical supervision, as well as a wide variety of clinical courses.

Teri has always taken an active role in working to advocate for the best possible mental health services for Oregonians through activities such as serving on the Primary Care/ Behavioral Health workgroup for the Lane County Coordinated Care Organization, Trillium, to design the model to provide integrated primary care and behavioral health services for the Medicaid population. She was also appointed to serve on the

Continued on page 13

ONE GOAL, MANY VOICES: – Inclusive Treatment Practices –

USIVE TREAtment Practices — Clackamas, Oregon

42nd Annual Northwest Institute of Addictions Studies Conference

JOIN US for 2.5 days of presentations, workshops, and panel discussions

PLENARY PRESENTATIONS

Motivational Interviewing Treatment Integrity - Denise Ernst, Ph.D. Oregon Legislative Session: 2016 Overview and What's to Come in 2017 - Jonathan Eames

Opioid Treatment in Oregon: Perspectives from the Oregon Health Authority - John McIlveen, Ph.D., LMHC

BREAKOUT SESSION TOPICS

Clinical Ethics, Law and Risk Management • Counter Intuitive Victim Behavior • Co-occurring Disorders • Latino Populations • LGBTQI Addiction Treatment • Mindfulness Based Stress Reduction • Motivational Interviewing • Severe and Persistent Mental Illness (SPMI) • Sexual Health in Recovery • Trauma and Survivor Substance Abuse • Treatment Modalities • Opioid Treatment, and more.

Details & Registration

Includes lunch, morning and afternoon refreshments, and Friday morning breakfast.

Wednesday-Friday

Monarch Hotel & Conference Center

July 27-29, 2016

16.5 CEU/PDUs available for full conference participation.

Full Conference \$250 by 7/1, \$275 after

Single Day \$110 by 7/1, \$125 after

Agency Discount (3 or more registering) \$225 by 7/1, \$235 after

Questions? Contact the Center for Community Engagement at 503-768-6040 or cce@lclark.edu



Presentation descriptions, presenter bios, discounted hotel rate information, online registration, available at go.lclark.edu/graduate/conference/NWIAS

2016 Awards, continued from page 12

Governors Work Group on Medicare-Medicaid Integration of Services on Health Care Reform in Oregon. During her OPA presidency year in 2006, she was appointed to the administrative rule writing committee for Oregon's Mental Health Parity legislation, and advocated successfully for a broad definition of mental disorders to be covered by the legislation

She has served in several leadership positions within the American Psychological Association including two terms representing Oregon on the APA-Council, and she currently serves as an elected Member-at-Large on the APA Council's Leadership Team. She has also served on the APA Committee on Rural Health. She has represented Oregon at numerous APA State Leadership Conferences and was a featured speaker this year, where she presented on "Innovative Practice Models." This presentation was also featured in the current issue of the APA magazine *The Monitor*.

She is a past president of OPA and has served OPA in numerous roles over the years. She has volunteered her time on the OPA Board for 15 years, beginning as the representative for the Lane County Psychologists' Association. She has held positions such as treasurer on the Board, Legislative Committee chair and member, member of the Health Care Reform Task Force, Continuing Education Committee member, and as a member of the Professional Affairs Committee. In 2002-2003 she chaired the committee that redesigned the OPA conference in its current format, as a two-day conference that rotates each year between Eugene and Portland. And her work for OPA just keeps on going as she is currently serving on the OPA/ OBPE Cultural Competency Planning workgroup.

She also contributes her skills to her local community in Lane County where she is a charter member of the Pain Society of Oregon, and a past president of the Lane County Psychologists' Association. She was recognized by LCPA as Psychologist of the Year in 2000 and received their lifetime achievement award in 2012, for outstanding contributions to the profession.

Legislator of the Year Award

OPA presents the Legislator of the Year Award to legislators who have given outstanding contributions to the advancement of psychological and mental health issues. This year's recipient was Senator Sara Gelser (District 8—Corvallis, Albany, Philomath, Millersburg, Tangent, and unincorporated parts of Linn and Benton County) for her efforts as a champion of mental health issues for Oregonians.

Sara Gelser has served in the Oregon Legislature since 2005. After serving in the Oregon House for nine years, she was elected to the Oregon State Senate in 2015. She is Chair of the Senate Human Services and Early Childhood Committee and Co-Chair of the Oregon Women's Health and Wellness Alliance. She also serves on the Senate Education Committee, the Senate Workforce Committee, and the Senate Judiciary Committee. She served as Chair of the House Education Committee for six years, and also spent nine years serving on the House Revenue Committee.

Senator Gelser's recent priorities include extending Oregon's Clean Fuels program, increasing opportunities for career and vocational training in schools and colleges, empowering people with disabilities to build assets through the ABLE Act, protecting workplace rights for domestic workers, strengthening protections against campus rape, stemming Oregon's youth suicide epidemic, and boosting access and opportunity for underserved students who struggle in Oregon's public school system.

Diversity Resources on the Web

You can find diversity information and resources on the OPA website! The OPA Diversity Committee has been working hard to make this happen. You can also learn more about the OPA Diversity Committee and our mission on this site. Check us out online!

• Go to www.opa.org and click on Committees and then Diversity Committee.

We hope the Diversity Committee's webpage is helpful to OPA members and community members in our mission to serve Oregon's diverse communities.

Comprehensive Eating Disorder Treatment 503-226-9061

Individual, Family & Group Therapy

Free Support Groups: One for Families & One for Sufferers

Consultation & Inservices

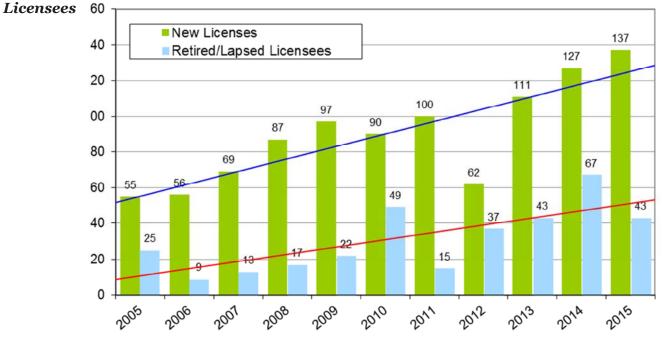
Steps to Recovery Pamphlets

A Better Way Counselina Center

State Certified Mental Health Center 818 NW 17th Avenue • Portland, Oregon 97209 • 503-226-9061 www.abwcounseling.com

OBPE 2015 Year-End Stats

Reprinted with permission from OBPE



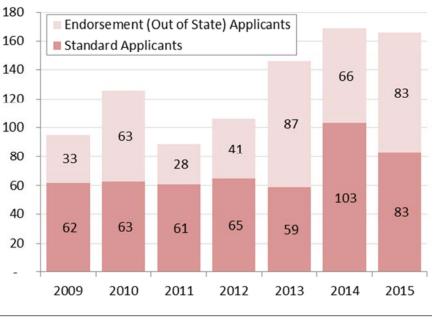
About our new licensees:

- All were licensed as psychologists (no psychologist associate licenses were issued)
- 27.7% (38) graduated from Oregon programs in 2015, compared to 32.1% (42) in 2014 and 38.7% (43) in 2013. Of these, there were:
- 20 (52.6%) from Pacific University,
- 11 (28.9%) from George Fox University, and
- 7 (18.4%) from the University of Oregon.

Applicants

166 new applications for licensure were received in 2015, compared to 169 applications in 2014, 146 applications in 2013, 106 applications in 2012, and 89 applications in 2011. 50% of the 2015 applicants applied by endorsement (they were licensed as a psychologist in another state), compared to 39% in 2014. • All new licensees represented the following age groups:

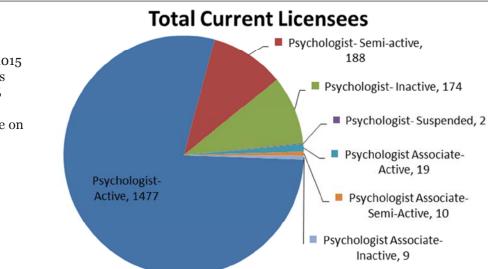
Ago		
Age	-	
Range	Count	%
25 to 34	56	40.9%
35 to 44	46	33.6%
45 to 54	11	8.0%
55 to 64	15	10.9%
65 to 74	9	6.6%



Continued on page 15

License Status

There were 1879 total licensees at 2015 year end, including 1841 psychologists and 38 psychologist associates. 10.5% of licensees are on semi-active status (part time practice, 62+) and 9.7% are on inactive status (not practicing).



Enforcement

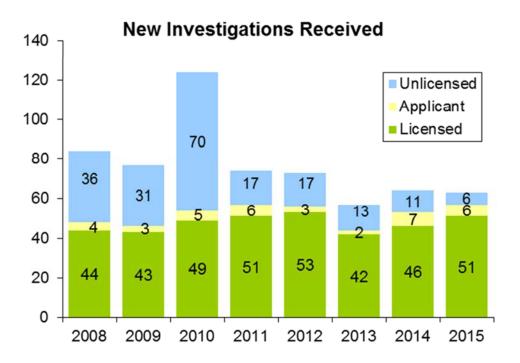
The 2015 investigation requests identified one or more of the following as the bases:

Complaint Basis	Count	%
Advertising or Marketing	1	1.1%
Avoiding Harm	13	13.7%
Billing	2	2.1%
Boundaries of Competence	3	3.2%
Breach of Confidentiality	10	10.5%
Conflict of Interest	3	3.2%
Cooperation with Other Professionals	5	5.3%
Custody Evaluation	1	1.1%
Failure to Comply with Mandatory Reporting Obligat	3	3.2%
Filing False Reports or Falsifying Records	2	2.1%
Impairment	1	1.1%
Improper Complaints	1	1.1%
Improper or Inadequate Supervision or Delegation	2	2.1%
Improper Testing	2	2.1%
Informed Consent	2	2.1%
Multiple Relationship	2	2.1%
Other Evaluation	7	7.4%
Parole Evaluation	1	1.1%
Patient Abandonment	4	4.2%
Patient Abuse	1	1.1%
Personal Problems & Conflicts	4	4.2%
	95*	

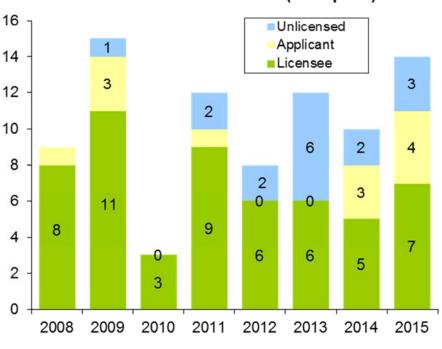
*Note that many cases contained multiple allegations.

Continued on page16

The Board opened 63 new investigations in 2015, compared to 64 investigations in 2014, 57 investigations in 2013, and 73 investigations in 2012. In 2015, the Board received 7 mandatory reports (under ORS 676.150), compared to 13 reports in 2014, 9 reports in 2013, and 10 reports in 2012.



As a result of Board investigations, 14 enforcement actions were issued in 2015, compared to 9 actions in 2014, 12 actions in 2013, and 8 actions in 2012.



Board Enforcement Actions (Discipline)

Continued on page 17

Customer Satisfaction Survey 2015

What is your relationship to OBPE?		
Answer Options	Response Percent	Response Count
Licensee	78.6%	136
Applicant/Resident	13.3%	23
Other health professional	4.0%	7
Complainant	0.0%	0
Patient/Consumer	0.0%	0
Insurance Representative	0.0%	0
News Media	0.0%	0
Governmental Agency	1.2%	2
Attorney	0.0%	0
Other (please specify)	2.9%	5
	answered question	173
	skipped question	0

How did you have contact with OBPE over the past year? [Check all that apply]

Answer Options	Response Percent	Response Count	
Mail	41.6%	72	
Email	66.5%	115	
Telephone	34.1%	59	
In person	14.5%	25	
Website	34.1%	59	
Have not had contact	12.1%	21	
answe	answered question		
skip	ped question	0	

In the past year, what was the purpose of your contact with OBPE? [Check all that apply]

Answer Options	Response Percent	Response Count
Complaint or investigation	7.5%	13
Licensing	32.9%	57
Renewal	32.4%	56
Continuing education	26.0%	45
Policy or practice issues	15.6%	27
Consumer information	6.4%	11
General information	19.7%	34
Have not had contact	12.1%	21
answe	ered question	173
skip	ped question	0

Please rate your overall satisfaction with OBPE services.

Answer Options	Response Percent	Response Count	
Excellent	43.4%	75	
Good	31.2%	54	
Fair	11.6%	20	
Poor	12.1%	21	
Don't know	1.7%	3	
	answered question		
skip	ped question	0	

Continued on page 18

Please rate the following:							
Answer Options	Excellent	Good	Fair	Poor	Don't know	Rating Average	Response Count
The timeliness of the services provided by OBPE. The ability of the	77	43	14	17	16	3.19	167
OBPE to provide services correctly the first time.	80	39	14	18	16	3.20	167
The helpfulness of OBPE employees. The knowledge and	82	41	12	16	16	3.25	167
expertise of OBPE employees.	70	47	15	16	19	3.16	167
The availability of information at OBPE.	52	64	25	17	9	2.96	167
						ed question ed question	167 6

Customer Satisfaction Survey Data

Data Key:

#1- What is your relationship to OBPE?

#2- How did you have contact with OBPE over the past year? [Check all that apply]

#3- In the past year, what was the purpose of your contact with OBPE? [Check all that

apply]

#4- Please rate your overall satisfaction with OBPE services.

[Please rate the following: (4 = Excellent, 3 = Good, 2 = Fair, 1 = Poor, DN = I don't know)]

#5- The timeliness of the services provided by OBPE.

- #6- The ability of the OBPE to provide services correctly the first time.
- #7- The helpfulness of OBPE employees.
- #8- The knowledge and expertise of OBPE employees.
- #9- The availability of information at OBPE.
- #10- Please include any additional comments [optional].

#11- Your name and contact information [optional].

For #s 4-9: 4 = Excellent 3 = Good 2 = Fair 1 = Poor DN = I don't know

www.opa.org

Check out OPA's website at www.opa.org to see information about OPA and its activities and online registration for workshops!

Join OPA's Listserv Community

Through APA's resources, OPA provides members with an opportunity to interact with their colleagues discussing psychological issues via the OPA listserv. The listserv is an emailbased program that allows members to send out messages to all other members on the listserv with one email message. Members then correspond on the listserv about that subject and others. It is a great way to stay connected to the psychological community and to access resources and expertise. Joining is easy if you follow the steps below. Once you have submitted your request, you will receive an email that tells you how to use the listserv and the rules and policies that govern it.

How to subscribe:

- 1. Log onto your email program.
- 2. Address an email to listserv@lists.apapractice.org and leave the subject line blank.
- 3. In the message section type in the following: subscribe OPAGENL
- 4. Hit the send button, and that is it! You will receive a confirmation via email with instructions, rules, and etiquette for using the listserv. Please allow some time to receive your confirmation after subscribing as the listserv administrator will need to verify your OPA membership before you can be added.

Questions? Contact the OPA office at info@opa.org.

Welcome New and Returning OPA Members

Derek Burks, PhD Dallas, TX

Bethany Higa, PsyD Portland, OR

Marcy Hunt, PhD Portland, OR

Christina Irvine Portland, OR

Shelly Kerr, PhD Eugene, OR

Kristen Konkel, MS Klamath Falls, OR

Adrienne Kovacs, PhD Portland, OR

Andrea Merg Ashland, OR

Julie Oyemaja, PsyD Portland, OR **Shagun Pawar** Portland, OR

Jamie Pettus, PsyD LPC Portland, OR

Rebekah Ratzlaff, PsyD Hillsboro, OR

Gary Sacks, PhD Portland, OR

Nichole Sage, PsyD Portland, OR

Ronald Sharrin, PhD Portland, OR

Mary Steers, PhD Clackamas, OR

Kathleen Woodside, PhD Portland, OR

OPA Public Education Committee Facebook Page - Check it Out!

Please take a moment to check out the OPA Public Education Committee Facebook page.



The purpose of the OPA-PEC Facebook page is to serve as a tool for OPA-PEC members and to provide the public access to information related to psychology, research, and current events. The social media page also allows members of the Public Education Committee to inform the public about upcoming events that PEC members will attend. Please visit and "like" our page if you are so inclined and feel free to share it with your friends!

You will find the OPA Public Education Committee's social media policy in the About section on our page. If you do "like" us on Facebook, please familiarize yourself with this social media policy. We would like to encourage use of the page in a way that is in line with the mission and ethical standards of the Association.

Go to https://www. facebook.com/pages/Oregon-Psychological-Association-OPA-Public-Education-Committee/160039007469003 to visit our Facebook page.

Conference Highlights



Keynote speaker Dr. Steven López presents on Shifting Cultural Lenses in Clinical Practice.



OPA past presidents Mary Peterson and Eleanor Gil-Kashiwabara with current president Wendy Bourg.



Wendy Bourg presents Mary Peterson with her past president plaque.



Incoming board member Carilyn Ellis with past president Mary Peterson.



Past president and legislative committee chair Robin Henderson presents the Legislator of the Year Award to Senator Sara Gelser (accepted by Rep. Bob Nosse on behalf of Sen. Gelser) with lobbyist Lara Smith.



OPA president Wendy Bourg and APAGS representative Roseann Fish Getchell.



Basics Rights of Oregon received the Outstanding Service Award accepted by Paul Southwick, Rep. Bob Nosse, and Jeana Frazzini.



Conference attendees Eleanor Gil-Kashiwabara, Juliette Cutts, Martha Villegas-Gutierrez and Roseann Fish Getchell enjoying the reception.



Keynote speaker Julie Rosenzweig, PhD, LCSW presenting on, "Are You Neuro-Minded? Reflections on Neuroscience and Psychotherapy."



Conference attendees Shagun Pawar, Ben Paynter and Linda Nishi-Strattner enjoying the reception.



Diversity committee chair Natalie Kollross presents the Diversity Award for Gar deBardelaben (posthumously) to his wife, Marian deBardelaben with president Wendy Bourg.



Teri Strong receives the Labby Award from president Wendy Bourg.



Ethics committee chair Jenne Henderson receives recognition for her work on the OPA board from president Wendy Bourg.



Poster session awardees.



Teri Strong receives recognition for her work on the OPA board as APA Council Representative from president Wendy Bourg.

OPA Continuing Education Workshops

The Oregon Psychological Association sponsors many continuing education programs that have been developed to meet the needs of psychologists and other mental health professionals. The



Continuing Education Committee works diligently to provide programs that are of interest to the wide

variety of specialties in mental health.

The Oregon Psychological Association is approved by the American Psychological Association to sponsor continuing education for psychologists. The Oregon

If you are interested in diversity CE offerings, cultural competence home study courses are offered by the New Mexico Psychological Association (NMPA) to OPA members for a fee. Courses include: Cultural Competency Assessment (1 CE), Multicultural Counseling Competencies/Research (2 CEs), Awareness-based articles (3 CE), Knowledge based articles (3 CE), Skills-based articles on counseling (3 CE) and Skillsbased articles on assessment (3 CE). Go to www.nmpsychology. org for more information.

Calendar items are subject to change To register go to www.opa.org

OPA Ethics Committee

Do you have an ethics question or concern? The OPA Ethics Committee is here to support you in processing your ethical dilemmas in a privileged and confidential setting. We're only a phone call away.

Here's what the OPA Ethics Committee offers:

• **Free** consultation of your ethical dilemma.

Psychological Association maintains responsibility for the program and its content.

OPA Current Education Offerings

All workshops are held in Portland, OR unless otherwise noted. In order to register for OPA workshops on-line you will need a credit card for workshop payment to complete your order. Registration fees for workshops will not be refunded for cancellations as of one week prior to the scheduled event or for no-shows at the event. Prior to that, a \$25 cancellation fee will be assessed. For other events, check their specific cancellation/refund policy.

Links for more information and registration for Fall of 2016 and beyond will be available this summer—please check back.

2015-2016 Schedule

June 24, 2016

Did She Say What I Think She Said? A Crash Course in Implicit Attitudes for Mental Health Professionals

By Andrea Iglesias, PsyD and Glenda Russell, PhD

October 14, 2016

Life-Saving Legal Information for Psychologists

By Paul Cooney, JD

October 21, 2016

OPA is Partnering with the 8th Annual Rural Behavioral Health Practice Conference

Working with Marginalized People in Rural Communities

This will be a virtual meeting with webcast to individuals and groups

November 18, 2016

Diversity (4 hours) and Ethics (4 hours) Workshop—8 Hours Total

By James Mason, PhD and Sandra Jenkins, PhD

December 2, 2016

Power Dynamics in Relationships

By Chris Huffine, PsyD

January 27, 2017

Practice Innovations for 2016-2020: New Settings, Models and Contracts for Psychologists in Individual and Group Practices

By Helen L. Coons, PhD

May 5-6, 2017

2017 Annual Conference

Hilton Eugene Conference Center - Eugene, OR

June 9, 2017

Neuropsychology for the Rest of Us

By Amelia Anderson Mooney, PhD

To register go to www.opa.org

- **Confidential** communication: We are a peer review committee under Oregon law (ORS 41.675). All communications are privileged and confidential, except when disclosure is compelled by law.
- **Full consultation**: The committee will discuss your dilemma in detail, while respecting your confidentiality, and report

back our group's conclusions and advice.

All current OPA Ethics Committee members are available for contact by phone. For more information and phone numbers, visit the Ethics Committee section of the OPA website in the Members Only section, and page 26 of this newsletter.

Psychologists of Oregon Political Action Committee (POPAC)

About POPAC... The Psychologists of Oregon Political Action Committee (POPAC) is the political action committee (PAC) of the Oregon Psychological Association (OPA). The purpose of POPAC is to elect legislators who will help further the interests of the profession of psychology. POPAC does this by providing financial support to political campaigns.

The Oregon Psychological Association actively lobbies on behalf of psychologists statewide. Contributions from POPAC to political candidates are based on a wide range of criteria including electability, leadership potential and commitment to issues of importance to psychologists. Your contribution helps to insure that your voice, and the voice of psychology, is heard in Salem.

Contributions are separate from association dues and are collected on a voluntary basis, and are not a condition of membership in OPA.

Take Advantage of Oregon's Political Tax Credit!

Your contribution to POPAC is eligible for an Oregon tax credit of up to \$50 per individual and up to \$100 per couples filing jointly.

To make a contribution, please fill out the form below, detach, and mail to POPAC at PO Box 86425, Portland, OR 97286

- We are required by law to report contribut this form entirely.	POPAC Contribu for name, mailing address, o		name of employer, so please	fill out
Name:	Phone:			
Address:				
City		State:	Zip:	
Employer:	Occupation:			
Senate District (If known):	House Distric	t (If known):		
Notice: Contributions are not deductible	Contribution: \$ as charitable contributions for st hibited. Corporate contributions	ate or federal incol	me tax purposes. Contributions	

OPA Public Education (PEC) Committee in Action



OPA PEC members at their recent year-end committee meeting.



PEC members staff a table at the recent NAMI Walk: Dr. Sandy Ramirez, doctoral students Cindy Marino, Margherita Gaulte, Stephanie Van Orden, Dr. Cyndi Connolly, US Senator Ron Wyden, and Dr. Tony Farrenkopf.

PAC Notes On the Web

The Professional Affairs Committee (PAC) would like to remind OPA Members of content available on the OPA website (www.opa.org). In the Professional Affairs Committee section, the PAC has a subsection with an assortment of resources for members. Included are articles related to practice by PAC members, guidelines, and a template for professional wills to help get us all compliant, information on APA Record Keeping Guidelines, links to CEUs related to practice, and more!

OPA Colleague Assistance Committee Mentor Program Is Available

The goals of the Mentor Program are to assist Oregon psychologists in understanding the OBPE complaint process, reduce the stress-related risk factors and stigmatization that often accompany the complaint process, and provide referrals and support to members without advising or taking specific action within the actual complaint.

In addition to the Mentor Program, members of the Colleague Assistance Committee are available for consultation and support, as well as to offer referral resources for psychologists around maintaining wellness, managing personal or professional stress, and avoiding burnout or professional impairment. The CAC is a peer review committee as well, and is exempt from the health care professional reporting law.

Colleague Assistance Committee

Charity Benham, PsyD, 503.550.7139 Kate Leonard, PhD, 503.292.9873 Rebecca Martin-Gerhards, EdD, 503.243.2900 Colleen Parker, PhD, 503.466.2846 Lori Queen, PhD, 503.639.6843 Marcia Wood, PhD, Chair, 503.248.4511 Chris Wilson, PsyD, 503.887.9663 **CAC Provider Panel** Barbara K. Campbell, PhD, 503.221.7074 Michaele Dunlap, PsvD, 503.227.2027 ext. 10 Debra L. Jackson, PhD, 541.465.1885 Kate Leonard, PhD, 503.292.9873 Doug McClure, PsyD, 503.697.1800 Lori Queen, PhD, 503.639.6843 Ed Versteeg, PsyD, 503.684.6205 Beth Westbrook, PsyD, 503.222.4031 Marcia Wood, PhD, 503.248.4511

OPA Classifieds

JOB OPPORTUNITY

Post-Doctoral (Psychologist Resident) Employment Opportunity in Clinical Child Psychology, with Primary Focus on Psychological Testing and Assessment. MindSights is seeking Psychology Post-Doctoral Trainees/Psychologist Residents to join our team. MindSights is a psychological clinic committed to providing comprehensive, client-tailored psychological assessment services, combining the best science with compassionate practice. We provide comprehensive psychological assessment services to young people affected by developmental/relational trauma, learning disabilities, complex/ comorbid psychiatric conditions, and neurodevelopmental disorders. This is a 12-month limitedduration position beginning mid-September, 2016. Postdoctoral employees will receive weekly training and clinical supervision meeting requirements for attaining independent licensure under the Oregon Board of Psychologist Examiners rules; they will also receive a tremendous amount of collegial and supervisory support as they move through the licensure process. Please see the Employment Opportunities link on our website at www.mindsightspdx.com for additional information and the application process.

Well-established practice with strong referral base seeks licensed psychologist or LCSW. Preference to child/adolescent specialists. Contact Leslie at Willamette Valley Family Center, 503.657.7235.

OFFICE SPACE

Beautiful, furnished SW John's Landing office (290 sq. ft.) with large reception room, parking, and receptionist, available 1-2 days a week, for \$210 per day per month. On bus line, with elevator. Optional secretarial services and billing. Some referrals. Steve Waksman, PhD or Johna, 503.222.4046.

Office Rental: Professional office space, 160 sq ft, furnished or unfurnished, with waiting room in charming English Tudor near Good Samaritan Hospital, NW Portland. Bus/streetcar/freeway access. Full or part-time. 503.225.0498.

Office available in office suite across from St. Vincent Hospital. Part-time receptionist and ample parking available. Office close to MAX line. Practice associated with medical psychology. Call 503.292.9183 for information or email akotsphd@qwestoffice.net.

PATIENT TREATMENT GROUPS

Pacific Psychology Clinic in downtown Portland and Hillsboro offers both psychoeducational and psychotherapy groups. Sliding fee. Group information web page www.pscpacific.org. Phone: 503.352.2400, Portland, or 503.352.7333, Hillsboro.

PROFESSIONAL SERVICES/EQUIPMENT

Confidential psychotherapy for health professionals. Contact Dr. Beth Kaplan Westbrook, 503.222.4031, helping professionals since 1991.

Go to Testmasterinc.com for a variety of good online clinical tests for children and adults, plus manuals. Violence-proneness, PTSD, ADHD, Depression, Anxiety, Big Five Personality, etc. Bill McConochie, PhD, OPA member.

Does the business part of your practice ever feel like too much? Do you wish you could take home more \$\$ with less effort? Would you like to work smarter, not harder? I provide practice management consultation exclusively to mental health professionals. I know your business. For a free consultation to see how I can help you, call Margaret Sears, 503.528.8404.

SERVICES

Accepting new clients to my medical billing practice. I am efficent and detail oriented and have 30 years experience in medical billing. If you find you need my services please email me at tmemedicalbilling@ gmail.com or call 541.912.4478. References upon request.

VACATION RENTALS

Sunriver Home 2 Bd, 2 ba, sleeps 5, minutes to the river and Benham Falls Trailhead. Treed, private back deck, hot tub, well maintained. \$150-\$225/night. Call Jamie Edwards 503.816.5086, To see photos go to vrbo.com/13598.

Alpenglow Chalet - Mount Hood. Only one hour east of Portland, this condo has sleeping for six adults and three children. It includes a gas fireplace, deck with gas BBQ, and tandem garage. The lodge has WiFi, a heated outdoor pool/hot tub/sauna, and large hot tub in the woods. Short distance to Skibowl or Timberline. \$200 per night/\$50 cleaning fee. Call 503.761.1405.

Manzanita, 4 blks from beach, 2 blks from downtown. Master Bdrm/bath w/Qn, rm with dble/sngle bunk & dble futon couch, extra Irg fam rm w/Qn Murphy-Bed & Qn futon couch, living rm w/Qn sleeper. Well eqpd kitch, cable. No smoking. \$140 summers, \$125 winters. http:// home.comcast.net/~windmill221/SeaClusion. html Wendy 503.236.4909, Larry 503.235.6171.

Ocean front beach house. 3 bedroom, 2 bath on longest white sand beach on coast. Golf, fishing, kids activities nearby and dogs (well behaved, of course) are welcome. Just north of Long Beach, WA, 2 1/2 hour drive from Portland. \$150 per night, two night minimum. Week rental with one night free. Contact Linda Grounds at 503.242.9833 or DrLGrounds@comcast.net. Beautiful Manzanita Beach Getaway. Sleeps 6 (2 bedrooms and comfortable fold-out couch), & is available year-round. Wood stove & skylights, decks in the front & back of the house. Clean & comfortable. Centrally located; a few short blocks to beach, main street, & park. Golf & tennis nearby. No smoking/ pets. Call 503.368.6959, or email at karen@manzanitaville.com or, go to www.manzanitaville.com.

OPA Attorney Member Benefits

Through OPA's relationship with Cooney, Cooney and Madigan, LLC as general counsel for OPA, members are entitled to one free 30-minute consultation per year. If further consultation or work is needed and you wish to proceed with their services, you will receive their services at the discounted OPA member rate. Please call for rate information. They are available to advise on OBPE complaints, malpractice lawsuits, practice management issues (subpoenas, testimony, informed consent documents, etc.), business formation and office sharing, and general legal advice. To access this valuable member benefit, call them at 503.607.2711, ask for Paul Cooney, and identify yourself as an OPA member.

The Oregon Psychologist Advertising Rates, Policies, & Publication Schedule

If you have any questions regarding advertising in the newsletter, please contact Sandra Fisher at the OPA office at 503.253.9155 or 800.541.9798.

Advertising Rates & Sizes

Advertising Rates & Policies Effective September 2013:

1/4 page display ad is \$100

1/2 page display ad is \$175

Full page display ad is \$325

Classifieds are \$25 for the first three lines (approximately 50 character space line, including spacing and punctuation), and \$5 for each additional line.

Please note that as a member benefit, classified ads are complimentary to OPA members. Members will receive one complimentary classified ad per newsletter with a maximum of 8 lines (50 character space line, including spacing and punctuation). Any lines over the allotted complimentary 8 will be billed at \$5 per additional line.

All display ads must be emailed to the OPA office in camera-ready form. Display ads must be the required dimensions for the size of ad purchased when submitted to OPA. All ads must include the issue the ad should run in and the payment or billing address and phone numbers.

The OPA newsletter is published four times a year. The deadline for ads is listed below. OPA reserves the right to refuse any ad and does not accept political ads. While OPA and the *The Oregon*

OPA Ethics Committee

The primary function of the OPA Ethics Committee is to "advise, educate, and consult" on concerns of the OPA membership about professional ethics. As such, we invite you to call or contact us for a confidential consultation on questions of an ethical nature. At times, ethical and legal questions may overlap. In these cases, we will encourage you to consult the OPA attorney (or one of your choosing) as well.

When calling someone on the Ethics Committee you can expect their initial response to your inquiry over the phone. That Ethics Committee member will then present your concern at the next meeting of the Ethics Committee. Any additional comments or feedback will be relayed back to you by the original contact person. Our hope is to be proactive and preventative in helping OPA members think through ethical dilemmas and ethical issues. Please feel free to contact any of the following Ethics Committee members:

Jill Davidson, PsyD 503.313.0028

Jenne Henderson, PhD, Chair 503.452.8002

Cathy Miller, PhD 503.352.7324

Nnenna Nwankwo Student Member

Del Rapier Student Member

Psychologist strive to include all advertisements in the most current issue, we can offer no guarantee as to the timeliness of mailing the publication nor of the accuracy of the advertising. OPA reserves the right not to publish advertisements or articles. Lisa Schimmel, PhD 503.381.9524 Sharon Smith, PhD 541.343.3114 Casey Stewart, PhD, ABPP 503.317.4453

Jane Ward, PhD 503.626.6226

*Newsletter Schedule** 2016

3rd Quarter Issue - deadline is August 1 (target date for issue to be sent out is mid-September)

4th Quarter Issue - deadline is November 7 (target date for issue to be sent out is mid-December)

*Subject to change

The Oregon Psychologist

Wendy Bourg, PhD, President • Shoshana D. Kerewsky, PsyD, Editor

The Oregon Psychologist is a newsletter published four times a year by the Oregon Psychological Association. The deadline for contributions and advertising is listed elsewhere in this issue. Although OPA and The Oregon Psychologist strive to include all advertisements in the most current issue, we can offer no guarantees as to the timeliness or accuracy of these ads, and OPA reserves the right not to publish advertisements or articles.

147 SE 102nd • Portland, OR 97216 • 503.253.9155 • 800.541.9798 • FAX 503.253.9172 • e-mail info@opa.org • www.opa.org
*Articles do not represent an official statement by the OPA, the OPA Board of Directors, the OPA Ethics Committee or any other OPA governance group or staff. Statements made in this publication neither add to nor reduce requirements of the American Psychological Association Ethics Code, nor can they be definitively relied upon as interpretations of the meaning of the Ethics Code standards or their application to particular situations. The OPA Ethics Committee, Oregon Board of Psychologist Examiners, or other relevant bodies must interpret and apply the Ethics Code as they believe proper, given all the circumstances.