# Image: Weight Provide the Oregon Psychological Association

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### OPA President's Column Executive Director Sandra Fisher Honored

Ryan C. Dix, PsyD, President, OPA



As many of you are aware, our executive director Sandra Fisher is retiring in June after 24 years of leading our organization. In recognition of her leadership, OPA and

OPA's past presidents honored her at the most recent OPA conference. She has meant so much to our organization and I have included what was said about her at the conference here:

"As we bring this business meeting to a close, I want to spend the remaining time acknowledging a huge transition for our organization. As some of you may know, Sandra Fisher, our executive director, is retiring. I feel the need to offer a moment or month of silence, but I don't want to run over our agenda as Sandra would never forgive me since this is her last conference. When I found out that Sandra was retiring, I found myself thrown into the stages of grief. I would like to say that *I have come out of denial, but* that might take a few more years. Additionally, I'm not sure if I should take blame for her retirement or credit that we have the organization in such a fine-tuned place that she felt now was the right time. In all seriousness, there isn't anyone who deserves to

retire more than Sandra. Her remarkably sound judgment, calm demeanor, grace, negotiating skills, sense of humor and attention to detail are unmatched.

"Sandra earned the highest professional recognition in her field by becoming a Certified Association Executive (CAE) in 1997. This demonstrates knowledge, experience and competence. She was awarded the Oregon Society of Association Management (OSAM) Meeting Planner of the Year Award, and also received two of their Golden Quill Awards for publications.

"To try and acknowledge everything she has meant to this organization would take the *next 4 hours, but please allow me a few moments to say more* about her. Here are a few quotes from past presidents, included in a nomination letter submitted in 2007 for the APA award for Outstanding Psychological Association Staff Member that she won, that speak pretty resoundingly regarding her contributions. I want to thank Lynn Moore, one of the OPA past presidents who sent these along. Some of those presidents are here today.

"Sandra Fisher is committed to making the Oregon Psychological Association

### 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 Psychology (OBP)

3218 Pringle Rd. SE, #130 Salem, OR 97302 503.378.4154 Website: www.oregon.gov/obpe

### **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

an organization for all psychologists in the state of Oregon. As a member who lives and practices outside of the greater Portland Metropolitan area, I sought a leadership role in OPA to further the needs of psychologists throughout the state. Sandra supported this effort, and helped to create opportunities for continuing education and other services to be provided to all psychologists. I echo the comments of other past presidents as to Sandra's competence and commitment to the field of psychology. She has been an invaluable resource to me throughout mu leadership journey in OPA.

"I have had the privilege of working with Sandra in several different roles over the past eight years. In my opinion she is most deserving of this award. She has always performed at the highest level in all of the areas required for this award. She is the glue that holds the Oregon Psychological Association together.

"Sandra Fisher provided clear guidance on how to conduct meetings following Robert's Rules of Order. She was always available with supporting materials and procedures to make you feel like you could make the best decisions and choices with your board. I also found her judgment of people to be clear and level-headed. She knew how to help distinguish the truth and facts from hearsay and fantasy and always encouraged direct communication with individuals and groups affected by decisions. She was and is a talented woman to work with. She provides continuity for the Oregon Psychological Association and as an advocate for the APA, essential to our state and national endeavors.

"Sandra is a powerful force for the OPA. She has an extensive knowledge of how organizations work and a deep intuition about how to keep them working well. Sandra

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"Sandra Fisher has helped OPA become a dynamic and growing organization with sound fiscal policies and a clear plan for the future. She has helped us create and maintain a professional network in Oregon that reflects well on our profession. Always in the background, her guidance never lets us fall away from our greatest goals.

"Knowing that Sandra would be by my side inspired me to accept the nomination of president of OPA and to work hard for our association. This relationship has made all the difference. She inspires dedication and service. As a dependable and trustworthy colleague I solicit and respect her advice. Her flexibility, knowledge and people skills are appreciated by our membership.

"Since joining the Oregon Psychological Association board years ago, I have heard numerous incoming presidents express relief and amazement at the tremendous leadership skill of our Executive Director, Sandra Fisher. Sandra has excellent judgment. She offers her ideas to the president and board with humor and humility. *She works collaboratively with other association* leaders to develop creative solutions to the most thorny and time-critical problems. Sandra exhibits strong empathy and compassion for the people with whom she works and volunteers additional time to community projects. Working with Sandra was one of the most enlightening and enjoyable organizational experiences I have had in my professional career.

"I have known Sandra since the time Update Management was bidding on our OPA management contract. She has been, without fail, a friend and a professional who is inclusive, creative, organized, accepting, strong, decisive, smart, and apolitical as OPA has navigated its way through the past decade. I can think of no one who is more deserving of this award than Sandra.

"Sandra Fisher is not only the glue that holds OPA together—she is the heart and brains behind the operation. She is intelligent, thoughtful, tactful, professional, respectful and insightful. There is no pretense to Sandra—what you see is what you get—she is as authentic of a person as you will find—which also enables her to be the funny and personable person that she is. Her involvement with OPA has been one of the driving forces for motivating me to stay involved with OPA (and I've even considered running for president again!).

"In closing, Sandra, I want to say from all of the lives you've touched that I hope your retirement allows you time to enjoy the big and the little things that you have worked so hard for. I hope it also allows time for reflection on the thousands of lives you have touched through your work through OPA. Your leadership of this organization has allowed us all to benefit from your skills and by leading us so effectively, it has allowed us to more effectively serve the citizens of Oregon and beyond. We all thank you."

As president, I also want to say that even though this is a change, I think we are going to continue to be in wonderful hands. Kori Hasti, who will serve as our new executive director, and the many other wonderful staff at Update Management have done a remarkable job stepping in, and I can tell you that our organization will continue to thrive under their leadership. I look forward to the future of OPA in their hands, as well as the wonderful psychologist leaders you have moving into leadership roles on the board. As this is my last column as your president, I also want to thank you again for allowing me to serve as your president.

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Thomas Lynch, PhD, FBPsS

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Jason Luoma, PhD and Jenna LeJeune, PhD

### October 26-27, 2018

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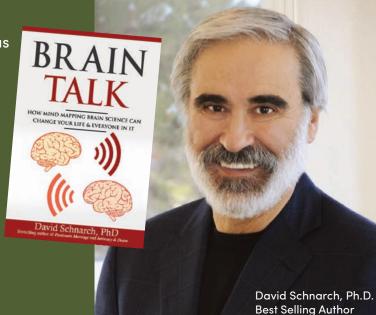


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### Building a Bridge: Increasing Access to Child Assessment among Minorities

### Laura Hoffman, MA, Karina Peters, MA, & Chloe' Freeman, MHS, MA, QMHP

Barriers such as stigma, SES, culturally distinctive beliefs about mental health, and other nonfinancial challenges often prevent ethnic minorities from receiving care, and trust and treatment receptiveness from being built (Snowden & Yamada, 2005). For children, this can impede access to assessment and intervention services that promote personal and educational success (Bear, et al., 2014) and prevent the compounding of problems over time. In particular, difficulty in accessing Early Intervention (EI) evaluations and receiving services they are eligible for can hurt a child's long-term educational trajectory. Thus, it is important to examine the extent to which access to EI evaluations varies across diverse populations and possible approaches for addressing these issues.

### Methods

Participants were families referred to the school district assessment center to have their child evaluated for Early Intervention (EI) services. A ethnicity-stratified sample of 216 families was obtained. Child age ranged from 3 to 36 months. Archival data was collected for factors influencing access to evaluation and access to EI evaluation including ethnicity, primary language spoken in the home, transportation issues, referral source, evaluation completion rates, time between referral and evaluation, and contact attempts by assessment center. To assess strategies for lessening barriers, qualitative data was collected by interviewing administrative team members about their approach to scheduling and supporting evaluation attendance.

#### Results

Results revealed no significant difference in evaluation completion rates between White, Hispanic/ Latino, and Asian families  $(X^2)$ *N*=213)= 1.93, p < .588). Findings demonstrated no significant difference across ethnic groups for Time Between Referral and Evaluation (F(3, 174)=1.11, p < .346), in Cancellation/No Show Rates (F(3, 203)= 0.63, p < .60), or Contact Attempts necessary to schedule evaluations (F(3, 178), = 0.14, p < .94). However, further analysis demonstrated that primary language significantly impacted whether families participated in evaluations evaluation (X<sup>2</sup> (3, *N*=211)= 8.26, p < .04), with families speaking an Asian dialect showing lower evaluation completion rates. Post hoc tests demonstrated a moderate effect size (V = .2). Yet primary language in the home was not predictive of a child's eligibility for services once evaluated (X<sup>2</sup> (3, *N*=192)= 2.73, p < .44). Hispanic/Latino parents were less likely to seek evaluation for Early Intervention (EI) services themselves and more were more likely to be referred by a teacher than other ethnic groups. There was no difference in medical provider referral rates across ethnic groups. Strategies for lessening barriers included utilizing interpreters for scheduling and evaluation, incorporating diverse staff for administration and evaluations, including bilingual staff members, addressing immigration/deportation concerns, providing in-home evaluations, and communicating via family's preferred method of contact.

#### Discussion

Families face many barriers when referred for child assessment. This study explored the unique challenges faced by ethnic minorities

and non-English speakers and the culture-specific challenges for those families. Lower evaluation completion among families speaking Asian dialects may be due to the use of outside translators to schedule these families, thus limiting communication to essential information and reducing opportunities to address concerns, assess parent motivation, or build an initial alliance. Lower rates of self-referral by Hispanic/Latino families highlight the importance of providers and teachers in their evaluation process. The lack of discrepancy between evaluation rates for different ethnic groups suggests that this center's multitiered approach successfully mitigated some of the barriers faced by ethnic minorities. These strategies may play a key role in fostering trust with diverse client groups and reducing stigma. Further examination of the elements of this approach is warranted and may vield methods which other school assessment centers and clinics can use to support equal access to services.

Outcomes may vary across states because of policy and population differences. Limited diversity in the sample prohibited analysis of access for additional ethnic and non-English speaking groups.

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### **Neuropsychological Assessment with Non-Native English Speakers**

#### Théa Prince, BA, OPA Diversity Committee

Neuropsychologists often have to ask themselves how to best evaluate and understand the neuropsychological function of linguistic minorities (Rivera Mindt et al., 2008). This question is becoming more and more important as the use of a language other than English at home is becoming more prevalent, with an increase of 148% between 1980 and 2009 (Ortman & Shin, 2011). This group represents between 12 and 54% of the metro area population age 5 and over speaking a language other than English at home (US Census Bureau, 2015).

A number of researchers have looked at differences in neuropsychological test scores between native English speakers and non-native English speakers; however, the results vary immensely for both verbal and non-verbal tasks. A number of research teams, including Rivera Mindt and colleagues (2008) and Kisser and colleagues (2012), found that bilingual individuals had a disadvantage on tasks that required language processing. However, Kousaie et al.'s (2014) results did not demonstrate that bilingual individuals were disadvantaged on language tasks.

Research findings vary for research that focuses on group differences on non-verbal assessment scores between native English-speakers and non-native English speakers. Kisser and colleagues (2012) found that there were no significant group differences between native English speakers and non-native English speakers on most non-languagemediated tasks. Clare and colleagues (2016) also found no significant overall differences between native English speakers' performance and non-native English speakers' performance on executive tasks, which reflect what many researchers call the bilingual advantage on executive function tasks. Additionally, Bialyosk and colleagues (2014) found that the bilingual advantage on executive function tasks might be mediated by the age of the participant, with the bilingual advantage being more pronounced for older adults than younger adults. A meta-analysis by Zhou and Krott (2016) added to the literature on bilingual cognitive advantage; the team found that research findings on bilingual cognitive advantage had been largely impacted by seemingly insignificant details, such as data trimming and maximum time allowed for participant's responses.

Other research teams have identified that variables other than native language might be at play in neuropsychological score differences between native English-speakers and non-native English speakers. Rosselli and colleagues (2016) found that nonverbal intelligence scores are a better predictor of executive function performance than whether the participant was a native English speaker or nonnative English speaker. Additionally, Boon and colleagues (2007) found that in their native English speakers sample, score differences on Boston Naming, FAS, and Digit Span were present between Caucasian native English speakers and Hispanic native English speakers. This reflects that the difference of test scores might be due to more than language differences, and may be influenced

by cultural differences.

A number of additional limitations regarding the currently available research on non-native English speaker performance on neuropsychological tests has been cited throughout the existing literature, including a lack of information on participant's birthplace, which would allow for analysis of the impact of culture on test scores (Kisser et al., 2012), and failure to control for factors that are known to interact with executive functioning, such as math and reading skills (Yang & Yang, 2016). Other factors might also impact the research findings, such as lower SES; a majority of the US bilingual population is Latinx, "an ethnic group that is unfortunately often associated with lower SES. It is therefore possible that any bilingual advantages in cognitive control advantages may be attenuated by SES disadvantage as low SES is associated with disadvantage on measures of cognitive functions" (Rivera Mindt et al. 2008, p. 259).

This brief literature review highlights the need for additional research on neuropsychological assessment in non-native English speakers. As expressed by Boon et al. (2007, p. 361), "the development of norms might be insufficient in

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### Past OPA Presidents: Peter S. Armstrong, PhD

I was president of the board from 2002-2003 and left the board after my past president year. At that time I told Sandra I was going to focus on fly fishing and never join another board. She chuckled and Mike nodded. I did fish and several years later became president of the board of Oregon Psychoanalytic Center for 5 years; yikes. That was a number of years ago. Now I continue in practice, but just 3 days a week. I am spending a good deal of time sketching and traveling and cautiously resisting any leadership. And right now I am in Africa at the beginning of a month-long safari.

As all past presidents know, Sandra was an invaluable partner in leading the organization. I leaned in her always and learned a great deal. OPA will not be the same without her.

#### Neuropsychological, continued from page 6

and of themselves unless specific test/test-items that are reflective of a diverse cultural experience are developed simultaneously with normative data." Clinicians can refer to the decision tree by Pontón (2001), which provides guidelines for determining if a language barrier exists between the clinician and client. Additionally, clinicians should always be aware of cultural variables that can impact assessment. Research by Rivera Mindt and colleagues (2008) also provides an extensive review of the literature and considerations for clinicians conducting assessments with bilingual clients.

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### **OPA Staff Change**

After serving for 24 years as **OPA's Executive Director, Sandra** Fisher will be retiring at the end of June this year. Fisher is retiring from association management work altogether after 30 years of service in the profession. She and her husband (who also has recently retired) are calling their retirement "Life 2.0" and are excited about the opportunities that retired life will bring to them. Sandra remarks,"I have appreciated the partnership with OPA these past 24 years and have learned so much from all the members over that time. While I will not miss the day-to-day details of running an association, I will definitely miss the people and relationships I have formed over the years."

Kori Hasti will serve as the new Executive Director for OPA starting July 1. Kori's association Rosselli, M., Ardila, A., Lalwani, L., & Vélez-Uribe, I. (2016). The effect of language proficiency on executive functions in balanced and unbalanced Spanish-English bilinguals. *Bilingualism: Language and Cognition, 19*(3), 489-503. doi:10.1017/S1366728915000309

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experience comes from seven vears as a staff person at the Home Builders Association of Portland, with the last four years of her time there as the Account Manager for their Remodelers Council. She has extensive experience in managing major events and coordinating consumer shows, social events and membership meetings. She also has experience working with executive boards and familiarity overseeing committees, charitable fundraisers. and sponsorship sales. In addition, Kristie Volk will stay on as OPA's assistant, and all of our other staff in their various capacities will remain unchanged.

Kori is excited to be joining the OPA family—please welcome Kori when you see her at an OPA event or when you get the opportunity to speak with her. Webinars

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### To Text or Not to Text: Psychotherapy in the 21st Century

Irina Gelman, PsyD and Morgan Bolan, MA, OPA Ethics Committee

Are you reading this article on a cell phone? According to the Pew Research Center (Smith, 2017), 85% of Americans read the news on their phones. 90% of American adults and 80% of American youth own mobile devices and 80% of all cell phone users text, making it one of the most popular and frequently used mobile features. Naturally, it would only be a matter of time before texting entered the therapy office. Whether you are a "digital native" born after 1980 or a "digital immigrant" born before 1980, you are likely impacted by the cultural paradigm shifts in communication and interpersonal expectations (Zur, 2015). For younger clients and a new generation of professionals just entering the field, texting in the clinical environment may seem natural. Some psychologists are incorporating text messaging into their practices to meet client demands. However, research on the impact of text communication on the therapeutic relationship is limited, and there are few clear guidelines regarding clinicianclient texting. Texting for mental health providers typically falls into two categories: Administrative (appointment scheduling, reminders, etc.) and clinical (crisis intervention. safety checks, etc.; Armstrong, 2016). We conducted an informal survey of Association of Psychology Training Clinics and found that out of 25 responses, 9 clinics utilize text messaging. Most of them use the technology for DBT skills coaching or exclusively to manage scheduling. It is apparent that the use of smartphone technology has rearranged the "social landscape of communication" (Ling, 2012, 157-158). Psychologists are left to consider practical and ethical implications of incorporating this technology into their practice, including weighing risks and benefits, and exploring recommendations for appropriate use.

There are a number of reasons to consider using text messaging. For starters, it offers a quick and inexpensive method to transmit brief messages. The convenience is especially relevant in handling administrative tasks, such as rescheduling or cancelling appointments quickly and without engaging in time-consuming phone calls (Moon, 2013). Moon further points out that there is some evidence that texting plays a role in improved attendance and retention rates. Much of the empirical evidence related to texting in psychotherapy is based on interventions geared toward symptom reduction and improving healthy behaviors. Boschen (2009) points out that texting can be used to remind clients of homework assignments and medication. Additionally, depending on sophistication of applications, technology can be used to provide real-time feedback about coping skills (Boschen, 2009). As mentioned above, some clinics elect to use text messaging solely for the purpose of skills coaching. One clinic director shared that they "allow texting only for DBT, non-crisis coaching." An argument can also be made that texting in "real time" can more accurately track symptoms, rather than relying on clients' retrospective accounts. One therapist advocated that "texting is a way of helping patients become more independent," and that "the simple act of typing out a message can be therapeutic in itself" (Boodman, 2015, p. 5).

On the other hand, the absence of a conceptual framework, professional consensus, and empirical research presents clinical, ethical, and legal challenges that leave clients and therapists vulnerable to complications. Texting can lead to more frequent, informal, and complex out-of-session communications, creating challenges in setting appropriate boundaries and expectations for professional relationships. In *The Psychology* 

of Cyberspace, John Suler (2004) points out that the "disinhibition effect" may lead to inappropriate texts from clients, creating complex situations that clinicians may not be prepared to address. Some examples include threatening selfharm or texts sent while under the influence of substances. Once texting enters the therapeutic relationship, it may be difficult to re-establish boundaries that exclude this type of communication (Boodman, 2015). Clinicians may find themselves working past their typical hours to the point that increased workload becomes a concern. There are ongoing debates about which clients can benefit from various types of technology-based interventions and with which populations such interventions may be contraindicated (Zilberstein, 2015). Some clients may use technology to avoid therapeutic connection or limit disclosure. Additionally, varying levels of technological literacy and possible tech failure, as well as an overreliance on clinician response and risk misinterpretation, can make the use of technology challenging.

When considering the integration of texting into therapy, a number of ethical principles must be considered: Competence, confidentiality, informed consent. and maintenance of records. Additionally, inter-jurisdictional boundaries are a consideration. Regarding competence, APA Guidelines for the Practice of Telepsychology (Joint Task Force for the Development of Telepsychology Guidelines for Psychologists, 2013) recommend that psychologists become knowledgeable and competent "in the use of the telecommunication technologies being utilized." In 2015, Georgia became the first state to require 6 hours of training before clinicians can work with any communication technologies (Armstrong, 2016).

Continued on page 10

#### To Text or Not to Text, continued from page 9

Regarding confidentiality, it is the therapist's responsibility to choose technological platforms that adhere to confidentiality and legal standards of their jurisdiction. Psychologists have a primary obligation to take reasonable precautions to protect information (Moon, 2013). Given the instinctive nature of cellphone use for most people, informed consent is needed to clearly outline limits of electronic transmission of information and risks to privacy. Armstrong (2016) offers many recommendations for navigating relevant ethical issues: Apprise clients of your policies regarding text messaging and have them sign forms that verify and document having had these discussions.

When considering inter-jurisdictional boundaries, best practice is to provide service via text only where you are licensed. Password-protect cell phones, even if your agency does not have a formal policy requiring this. Write out policies regarding text messaging and run them by your malpractice carrier and your professional association attorney. For record-keeping, place copies of text messages into a client's chart. For privacy preservation, it is advisable to work with specialists to encrypt technology and utilize compliant platforms. Personcenteredtech.com offers a list of HIPAA-compliant text messaging services at https://personcenteredtech.com/pct\_vendorreview\_ tag/secure-texting/

In conclusion, as technology continues to evolve, more psychologists may consider incorporating texting into their practice. Some benefits include scheduling efficiency, homework reminders, real-time record of clients' symptoms, and skills coaching. On the other hand, increased workload, boundary violations, privacy issues, and erosion of the therapeutic frame are raised as concerns. Ultimately, it is responsible practice to understand the changing culture resulting from technology and to consider clients' increasing reliance on, and in many cases, preference for, this mode of communication.

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#### July 27, 2018 \* 9-12 and/or 1-4

Addiction, Attachment, and Complex Trauma Michael Bricker, NCAC-II, CADC-II, LPC

#### Recorded webinar sale all of August- Buy 1, get 1 free!

September 28, 2018 \* 9-12 and/or 1-4 Sexual Health + Well-Being - Karlaina Brooke, PsvD

Private Practice Boot Camps (non-CE) - Carrie Conte, LMFT 1-day event: Thursday, 6/14 \* 9-4 6 week series: Wednesdays, 7/11 - 8/6 \* 11:30 - 1

### For more information, to register, or to inquire about presenting with us, go to <u>ormhceu.com</u>

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### **Cliff's Notes**

### Cliff Johannsen, PhD, APA Council Representative for Oregon

The APA Council met in Washington DC in early March, the cross-cutting meetings of boards and commissions occurred there in April, and we are looking forward to the August meeting in San Francisco. If you will be present there, I encourage you to look in on us from the gallery.

I have distilled the most important business items from the March meeting below. While these are very significant changes, I can assure you that Council has reviewed them thoroughly and debated them vigorously. Katherine Nordal quipped that in her experience there had never been a Council meeting with this number of significant proposals. In the spirit of transparency, I voted to approve each of these items.

In the realm of ethics, the APA Board of Directors is still digesting recommendations from the Commission on Ethics Processes. This stems from flaws identified in the Independent Review. An Ethics Code Task Force has been identified and is beginning to work on the next comprehensive revision of the code. Among the thorny issues identified is the question of whether psychologists can provide treatment to detainees or military personnel in national security settings.

Organizational challenges have their origins the Good Governance Project, the Independent Review, fiscal difficulties supporting congressional advocacy, and longstanding conflicts over balancing the needs of researchers, educators, and clinicians.

The business item addressing transparency of minutes and votes could not be resolved in the time available and was postponed until the August meeting. Remaining members of the workgroup (including myself) will work with the President and CEO to propose alternative language in light of discussion at the March meeting.

In regard to organizational structure, it was quite interesting to stand at the microphone behind Brian Welch, who is now a Council Representative, as he blamed his successors in the APAPO Executive Director role for mismanaging the Practice special assessment that he created during his tenure. You will remember the lawsuit by members who, the court decided, were misled about the assessment. Without that funding paid by licensed members, APAPO's and the Education Directorate's attempt to fund the Governmental Affairs office by voluntary donations severely limited psychology's voice in Congress. And the Science Directorate also gained little from those efforts.

To resolve this quandary, all APA memberships will become inclusive of both 501(c)3 and 501(c)6 organizations. Annual dues will be combined. Members will complete a new membership agreement, effective during the 2019 dues cycle. A work group has been appointed, which will plan implementation across science, education, practice, and public interest. Immediately there was controversy on the Council listserv about whether science and men had a strong enough voice on that workgroup. The President explained the appointment procedure and there seems to be agreement that it was fair and responsible. The plan will integrate priorities across both (c)3 and (c)6 organizations, use the existing governance structure, allocate dues between the two organizations, recommend amendments to the Bylaws and Rules, have no increase in dues for three years, eliminate APAPO dues, and provide monthly updates to Council.

Leading up to this decision, APA staff researched other professional associations with this combined structure and found the arrangement to be workable. It will require staff and governance to be cognizant of when they are wearing the charitable hat vs. the political hat. It is also inclusive of the vision of our new CEO, Arthur Evans.

Council voted to support pursuing accreditation of master's level programs in psychology, in areas where APA already accredits. This included adopting the Guidelines on Core Learning Goals for Master's Degree Graduates in Psychology, and approving March 2028 as the expiration date for the Guidelines. On Friday morning, Council participated in small and large group discussions related to master's level practice in psychology. At the conclusion of the discussion, there was agreement among Council members that 1) there is a benefit to uniformity in title, and 2) there should be standards for the scope of practice of master's level practitioners. Council was informed that staff will compile the notes from each table in order to inform next steps for future action by Council on these two issues. This is noteworthy because it has been 68 years since the Boulder conference of 1949, which established that doctoral-level training was the entry level for the profession of psychology.

In regard to practice guidelines, Council voted to adopt the *Guidelines* for Psychological Practice with Girls and Women and Clinical Practice Guideline for Multicomponent Behavioral Treatment of Obesity and Overweight in Children and Adolescents: Current State of the Evidence and Research Needs. Council also received updates on Guidelines for Psychologists Regarding the Assessment of Trauma for Adults and the work of the Advisory Steering Committee for Development of Clinical Practice

Continued on page 14

### 2018 OPA Annual Conference Highlights



**OPA** Conference attendees enjoy one of the keynote presentations.



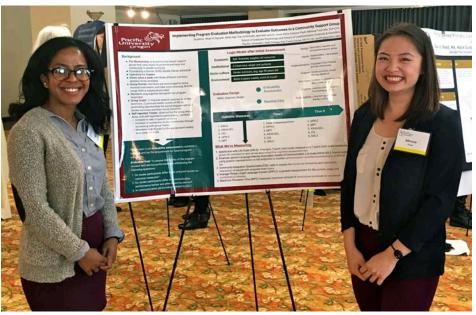
President Ryan Dix presents Senator Lew Frederick with the Legislator of the Year Award.



President Dix presents the Community Service Award to Juliette Cutts and Jessica Beeghly of the Yakima Valley Farm Workers Clinic.



President Dix presents Beth Westbrook with the Labby Award.



Poster session presenters Richelle Jean-Bart and Minnie Tran.



Poster session presenters Stephanie Taldo, Laurel Fuson-Lang, and Carolina Ekonomo.



OPA Diversity Committee members Shoshana Kerewsky, Derek Burks, Amy Kobus, Goali Saedi, and Nina Hidalgo.



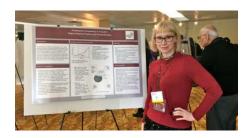
Poster session presenter Gabriel Reed.



Attendees enjoying the poster session presentations.



President Ryan Dix and PEC chair Celeste Jones present Goali Saedi with the Public Education Award.



Poster session presenter Aex Barr.



Conference attendees enjoying networking at the reception.



Conference attendees enjoying networking at the reception.



Presentation of a poster session award by Jennifer Shaheed.



Presentation of the diversity poster session award.



President Ryan Dix presents Jennifer Shaheed with an Appreciation Award for her service to the OPA Board of Directors as the Student Representative.



President Ryan Dix presents Shahana Koslofsky with a plaque for her service as OPA President for 2016-2017.



President Ryan Dix presents Spencer Griffith an Appreciation Award for his 7 years of service on the OPA Board of Directors.



President-Elect and Conference Chair Natalie Kollross enjoy the reception with Nick Schollars and Jennifer Shaheed.



OPA Past Presidents surround OPA Executive Director Sandra Fisher in recognition of her service to OPA and retirement.

#### Cliff's Notes, continued from page 11

Guidelines and APA Guideline Development Panels.

There is widespread confusion among APA members about the distinction between "*professional* practice guidelines" and "*clinical* practice guidelines." I think the language is too subtle. Professional guidelines address issues that are population-based, such as forensic practice. Clinical guidelines are diagnosis-based and conform to national and international standards of science, thus being more rigorous. APA has only recently begun to create clinical guidelines, in part because payers needed justification for approving psychological care. The professional guidelines tend to be promulgated by APA divisions. The clinical guidelines represent a collaboration between science and practice.

The situation is further complicated by the use of "resolutions," which have the intended effect of educating the public and providing a platform for public policy advocacy. They are not guidelines. An example was adopted at the March meeting, the *Resolution on Pregnant and Postpartum Adolescent Girls and Women with Substance-Related Disorders*. This was promulgated by the Public Interest Directorate.

With the adoption of the PTSD clinical guidelines last year, it became apparent that only cognitive-behavioral therapy had the requisite empirical support. This was alarming to clinicians utilizing other approaches, and at the March meeting most of the practice caucus (Association for Psychological Practice–APP, of which I am the President) discussion was still about how to rectify unintended consequences. In the Council meeting, an update was received on the development of a professional practice guideline that will address issues of psychotherapy practice and complement efficacy based recommendations in clinical practice guidelines. There is a proposal to include this professional guideline as a standard component of all clinical guidelines going forward. I expect this will remain controversial for the foreseeable future. My hope is that it will spur better science among the other approaches to psychotherapy.

Looking forward to the August Council meeting, there will be two new business items. The first is *Archiving the 2015 Resolution on Violent Video Games Due to Inconsistent Evidence Based on Effects*. This is generating some debate over the meaning and application of the underlying science, and Council members are sharing articles for review. The second is *Resolution for the Use of the Term "Patient" In American Psychological Association Policies, Rules, and Public Relations Activities When referring to the Health-Related and Scientific Activities of Health Service Psychologists and Scientists in Health Care Services and Settings.* This is Bob Resnick's swan song after a very long commitment to APA governance.

### OPA Announces 2018-2019 Board of Directors

The following OPA members were elected to serve as the new officers for the 2018-2019 board of directors and will take office on July 1st:

Alan Ledford, PhD – President Elect Marie-Christine Goodworth, PhD – Treasurer (Appointed) Carilyn Ellis, PsyD – Secretary

The following OPA members were elected as directors for the 2018-2019 board:

Michelle Guyton, PhD Shea Lott, PhD

Remaining Board members will include (with the title that will go into effect on July 1, 2018): **Natalie Kollross, PsyD,** *President;* **Ryan Dix, PsyD,** *Past President;* 

**Cliff Johannsen, PhD**, Director/APA Council Representative; **Amy Kobus, PhD**, Diversity Committee Chair; **Nicole Sage, PsyD**, Ethics Committee Chair; **Mary Peterson, PhD**, ABPP/ CL, OBPE Liaison; **Nicholas Schollars, MS**, Student Representative; **Bill McConochie, PhD**, Lane County Chapter Representative.

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### **OPA 2018 Award Honorees**

Every year, OPA recognizes outstanding individuals and organizations through its award ceremonies at the Annual Conference. Below are this year's recipients.

### **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 the Yakima Valley Farm Workers Clinic and their representatives with this years' Outstanding Service Award. The Yakima Valley Farm Workers Clinic has successfully integrated behavioral health into primary care, and is normalizing the idea that behavioral health is an important component of every person's overall health.

Yakima Valley Farm Workers Clinic is a not-for-profit system of community health centers formed in 1978. YVFWC provides comprehensive primary care services, behavioral health consultation, nutrition services, and much more to 149,000 individuals in Oregon and Washington. YVFWC understands that mental health is part of wholehealth. Everyone lands somewhere on the behavioral health spectrum and can benefit from some level of behavioral health intervention. The **YVFWC Primary Care Behavioral** Health program provides necessary and timely intervention for patients in the context of an integrated Primary Care Home where the Behavioral Health Consultant is a routine part of each patient's visit.

The ultimate goal is to make a behavioral health check-ups as routine as annual physicals. In order to make that vision a reality, YVWFC began integrating behavioral health into primary care in the early 2000's. Working with the primary care community, behavioral health leaders, and policy makers that support their work, YVFWC has fully integrated behavioral health into a Primary Care Behavioral Health Program that serves thousands of patients in need each day. These relationships have been central to their ability to support patients with the level of care that will best meet their needs.

"We believe that by integrating behavioral health into primary care we have not only contributed to the goal of increasing a person's overall health, but we are reducing behavioral health stigma across the system. As active members of the Primary Care Team, BHCs provide an important connection between physical and behavioral health."

Thank you again to Yakima Valley Farm Workers Clinic for all of their daily efforts to normalize behavioral health.

### 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 Beth Westbrook, PsyD as the 2018 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. Westbrook has more than 40 years' worth of service to the psychological community. It is fair to say that Dr. Westbrook is a learned woman. She started her educational path by earning her Bachelor of Arts in Psychology, then a Master of Arts in Expressive Therapies (Dance Therapy), and then a PsyD in Clinical Psychology. It is also fair to say that this unique mix of education is part of why she is such a powerful advocate for the psychological community.

Beth has a private practice in Clinical Psychology. Concurrently, she also consults for both the Medical Society of Metropolitan Portland in the Physician Wellness Program and the State of Oregon program for impaired professionals— Health Professionals' Services Program.

Beth is driven by her family and friends. Her mother was a psychologist engaged in teaching and school psychology. Beth was exposed to psychology and academia at an early age. Clinical Psychology gave her a diverse background after an early diverse family life. Clinical Psychology is challenging, intellectually and emotionally, and complex.

Beth's goal is to do in-depth work, whether long-term patients or shorter-term wellness work. She will continue to develop programs and access to treatment for health professionals. She is proud of the work at the national level on mental health parity and Medicaid advocacy (HERC). Her focus is on privacy, respect of individual differences, and the use of her psychodynamic training. Beth wishes to continue to foster well-being on a statewide basis. She would like her legacy to be one of increasing awareness of the need for personal care and colleague support. She would also like to help develop a mentoring program.

Prior to her current position, she worked as Adjunct Faculty at Marylhurst College; as an Interventionist—lung health study at Oregon Health Sciences University; primary clinician (group therapist) for the District of Columbia Council on Aging; providing short term psychiatric unit group, individual and family therapy at Mount Vernon Hospital in Alexandria, Virginia; parttime faculty at Pacific University; and as a consultant—Doctoral Psychology Student Supervision at Legacy Health.

As a true leader in the psychological community, she has served in many

Continued on page 16

#### 2018 Awards, continued from page 15

volunteer capacities including Meals on Wheels, Fulcrum Behavioral Health Board, the French American International School on the Public Relations committee, Co-chair Academic Affairs committee, and Diversity committee, YMCA-Capital Campaign and Childcare Staff in-service training, American Red Cross Mental Health Disaster Relief, Lincoln High School Foundation Board, Mazamas Critical Stress Management Team, White Bird Dance, and the Medical Society of Metropolitan Portland Physician Wellness Committee.

Beth has been an OPA member for over 30 years and has served in numerous positions:

- From 1989-1993, Beth served on the Social Issues Committee and was the Public Education Committee Co-Chair.
- Beth was the President-elect in 2002-2003 and in the 2003-2004 year, she was the OPA President. Immediately following this, she was the OPA Past President.
- In 2004-2005, Beth was the Continuing Education Committee Chair.
- From 2003-2006, Beth was on the Impaired Professional Taskforce; serving as Chair from 2004-2006.
- Beth was also on the Legislative Committee from 2010-2012.
- Since 2011, Beth has been a member of the Colleague Assistance Panel, which is a part of the Confidential Peer Support Committee.

Beth has an extensive list of memberships and professional services, making it easy to see her dedication to the profession. She has been involved in:

- American Dance Therapy Association
- School of Professional Psychology
- Oregon Psychological Association
- Portland Psychological

Association

- Association for Women in Psychology
- American Psychological Association
- State of Oregon Health Evidence Review Commission and Evidence Based Guidelines Subcommittee

All of this, and more, makes Beth an exemplary recipient of the recognition of her peers.

#### Legislator of the Year

This award is presented to a legislator for outstanding contributions to the advancement of psychological and mental health issues.

OPA selected Senator Lew Frederick as the 2018 Legislator of the Year recipient. He exemplifies the merits the award calls for through his years of service and contributions to the development and advancement of psychology.

Senator Lew Frederick began his term as the District #22 State Senator in January, 2017 after three and a half terms as a State Representative. He represents North and Northeast Portland, both known as the Soul of Portland; and the transportation hub for the State with both the Columbia and Willamette Rivers, I-5, I-205, the west end of I-84, railroads running east, west, north and south, the Port of Portland east of the Willamette River, and the Portland Airport. His love of northeast Portland is apparent as he has lived in the same house north of the Lloyd Center in the Irvington Neighborhood for over 40 vears.

He serves on the Emergency Board, Full Ways and Means Committee, the Subcommittee on Public Safety, Joint Interim Committee on Student Success, and Chairs the Subcommittee on Natural Resources.

Senator Frederick's legislation has addressed racial profiling, drug defelonization, cleaning up brownfields, over-testing of students, student data privacy, low-income housing, supporting minority contractors, body cameras, ethnic studies, foster children, foreclosure mitigation, mental health family support, and automatic "motor voter" registration.

A graduate of Earlham College, he is a PhD candidate at Portland State University and has studied at MIT, Morehouse, and the Woods Hole Marine Biology Laboratories.

Senator Frederick grew up directly involved in the Civil Rights Movement, concerns which continue to the present with activities surrounding education, technology, the environment and health care. With an academic background in biology, theater, psychology, and political science, his professional life includes seventeen years as a television reporter at KGW-Channel 8 in Portland, thirteen years as the Director of Public Information for the Portland Public Schools, teacher, actor, and ranch hand.

#### **Diversity Award**

The Diversity Award recognizes a licensed psychologist with a record of a strong and consistent commitment to diversity through their clinical work, research, teaching, advocacy, organizational policy, leadership, mentorship and/or community service. Diversity is defined in its broadest sense and includes work with a wide range of minority populations and efforts related to social justice, inclusion, and equity, as well as cultural awareness and competence. This year's Diversity Award recipient is Carol Carver, PhD.

Carol epitomizes the phrase often used in diversity circles, that "we rise on the shoulders of those who came before us." Our awardee has quietly but persistently promoted lesbian/ gay/bisexual rights for over 30 years, paving the way for the current queer and trans movement.

Her advocacy for lesbian and gay rights began while she was still a graduate student. In 1977, she was a floor organizer at the Nebraska state convention for the International

Continued on page 17



Shoshana Kerewsky presented the Diversity Award to Carol Carver along with President Ryan Dix.

#### 2018 Awards, continued from page 16

Women's Year. Her role was to make sure that motions were passed supporting lesbian rights.

She obtained her PhD in Clinical Psychology at the University of Nebraska-Lincoln in 1978. Degree in hand, she began a long affiliation with the National Organization for Women (NOW) and advocacy work for many specific gay and lesbian rights groups. She was a fervent speaker on lesbian rights, AIDS, and public policy as it affected gay and lesbian people. Starting in 1993, she testified before the Oregon legislature on behalf of OPA, focusing on the psychological research about gay and lesbian people as it pertained to civil rights legislation. In the mid-1990's, she was funded by the Pride Foundation and presented trainings throughout Washington, helping sexual minority community members and allies find ways to survive the anti-gay movement. She has continued to support the LGBTQ community through writing articles in both professional and community venues and providing numerous trainings, workshops, and public presentations.

In addition to her advocacy, she worked as a Licensed Psychologist in Oregon since 1981. She worked for many years at the Benton Country Mental Health Alcohol and Drug Treatment Program, and later in private practice in Corvallis.

She has been recognized for her advocacy work and service to psychology at the local, state, and national levels. She has received many awards, including the OPA Labby Award for Outstanding Contributions to the Advancement of Psychology, the PacificCare Behavioral Health Michael Lambert Award for Clinical Excellence, and the American Psychological Association's Karl Heiser Presidential Award for Professional Advocacy in Psychology.

As Oregon psychologists, we are fortunate to have such an outstanding and dedicated advocate of diversity in our ranks. She recently announced her retirement from private practice, desiring to move on to other adventures. We wish her well, but also want to take this opportunity to recognize the many ways she has improved the lives of women and LGBTQ individuals, providing a message of inclusion and compassion for all.

Carol is a graduate of the University of Oregon Clark Honors College. She invites you to make donations to the Honors College in celebration of her career and retirement. If you are so moved, please help Carol to help today's students at http://giving. uoregon.edu/s/1540/17/interior. aspx?sid=1540&gid=2&pgid=2313

#### **Public Education Award**

The OPA Public Education Committee's (PEC) mission is to educate the public about the functions and roles of psychologists and "make psychology a household word." They developed the Public Education Award as a way to recognize and encourage public education activities by OPA members. Nominees are evaluated based on a number of criteria including career contributions to public education in Oregon, the number of public education activities, the uniqueness of the activities, and the reach and impact of their activities.

This year's recipient is Goali Saedi, PhD. Dr. Saedi graduated from the University of Notre Dame in 2012, completing her doctoral internship at University of California, Berkeley, and her postdoctoral fellowship at Stanford University. She currently owns a practice in Lake Oswego, Oregon, and throughout her education and early career has worked to advance public education of psychology.

Dr. Saedi began her public education work with a column in Psychology Today entitled "Millennial Media." Since then, she has written over 80 articles across a range of topics from politics to school shootings, racial violence, and discrimination against transgender people. Numerous articles have been selected by editors as "Essential Reads" and many more have made it to the "Top 5 Most Popular Articles" list. One of her blog articles led to an invitation to serve as a TEDx speaker in Palo Alto, California, on the topic of the exoticization of women of color and the beauty industry.

In addition to writing for *Psychology Today,* Dr. Saedi has written and published a book on female graduate school admittance called *PhDiva: The Smart Girl's Guide to Graduate School Success.* She has also authored a textbook chapter, and is presently working on a teen workbook to decrease phone

### **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 Psychological Association maintains responsibility for the program and its content.

#### **OPA Current Education Offerings**

All workshops are held in Portland, Oregon 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 are available at www.opa.org.

2018 Awards, continued from page 17

and social media usage and manage anxiety.

Related to her interests in media psychology, Dr. Saedi has provided numerous media interviews to ABCNews.com, *Newsweek, Elle Magazine*, and most recently, *TIME* magazine and *Refinery29*. She has also appeared on radio shows including the Dr. Howard Gluss Radio Show on the psychology of Middle Eastern politics, and the Rick and Dave Show regarding October 26, 2018

Registration will be available in late summer

Practice Management/Ethics

By Paul Cooney, JD and David Madigan, JD

December 7, 2018 Registration will be available in fall

If I Didn't Have a Brain, I Wouldn't Have Pain

By Scott Pengelly, PhD

### 2018 Schedule

May 3-4, 2019

**OPA Annual Conference** 

Hilton Eugene Conference Center Eugene, OR



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), Awarenessbased articles (3 CE), Knowledge based articles (3 CE), Skills-based articles on counseling (3 CE) and Skills-based 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

mindfulness during stressful commutes.

As part of her passion for public education, Dr. Saedi has served as a member of APA's Division 46: Society for Media Psychology and Technology, and has served as a reviewer for their journal, the *Psychology of Popular Media Culture*.

While her work in public education and media psychology is extraordinary, Dr. Saedi maintains a heart for service in her local area as well. Locally, Dr. Saedi appeared on AMNW on KATU 19 times as a regular guest psychologist on topics ranging from sleep hygiene to CBT activities, time management and relationship insights. In addition, she promoted psychology to high school students through talks in Sherwood High School psychology classes about being a psychologist.

On behalf of the Public Education Committee, thank you, Dr. Saedi for your outstanding contributions to public education initiatives.

### Welcome New and Returning OPA Members

Vera Anderson, PhD Portland, OR Breanna Bocciolatt, PsyD Sherwood, OR **Renee Bockheim**, PhD Albany, OR **Lindsey Bratland** Portland, OR Randi Burke, PhD Portland, OR Patrick Cheatham, PsyD Portland, OR Niles Cook, PsyD Portland, OR Valerie Correa, PsyD Milwaukie, OR **Catherine Crew, PsvD** Portland, OR Erin Driskill, MSW Portland, OR Susan Glinka, PsyD Portland, OR

Sandra Guyton Doan, PsyD Hillsboro, OR Wendy Hatcher, PsvD Bend, OR Laura Hoffman Dundee, OR Angela Izmirian, PhD Portland, OR Leah Katz, PhD Portland, OR Shea Lott, PhD Portland, OR Matthew Lundeberg, PsyD Portland, OR **Robyn Metcalfe** Junction City, OR **Christopher Mikulic** Hillsboro, OR Terri Mishler, PsyD Beaverton. OR

Patricia Montoya, PsyD Medford, OR Jessica Retan, MA Portland, OR **Enid Richey**, PhD Eugene, OR Maura Sullivan, PsyD Wolfeboro, NH Ellen Sundberg, PhD Springfield OR Martha Villégas-Gutierrez, PhD Portland, OR Ashley Watts, PhD Albany, OR **Charles Weisser, PhD** Oregon City, OR Laura White, PsvD Salem, OR **Shelby Wilson** Portland, OR

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### 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

### **OPA Mentorship Program**

Dear Colleagues,

We are happy to announce that the OPA Mentorship program is up and running. We had 10 psychologists and two Mentees respond to our request at the annual conference. We are working to get the two forms for the Mentorship program on the OPA website. The first form is for the interested parties to give some details of their practice setting, training, interest and location. The second form is for Informed Consent, limits of confidentiality etc.

Please join your colleagues and offer to serve as a Mentor and to learn or ask questions as a Mentee. Monthly phone or in person meetings are set up by the Mentor and Mentee once a "match" is made. Enjoy a bit of colleague support, new information and conversation regardless of age, orientation or years of experience.

### **OPA Ethics Committee Benefits**

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.
- **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.

OPA Ethics Committee members are available for contact. For more information visit the Ethics Committee section of the OPA website and page 21 of this newsletter.

### 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.

### **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 with questions of an ethical nature. Our hope is to be proactive and preventative in helping OPA members think through ethical issues. The committee is provided as a member benefit only to members of OPA. 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.

If you have an ethical question or concern, please contact Dr. Jill Davidson at dr.jilldavidson@gmail. com. Include a description of your concerns, your phone number, and good times for her to call you back. She will make contact with you within 2 business days. She may ask for more information in order to route your call to the appropriate person on the Ethics Committee, or she may let you know at that time which committee member will be calling you to discuss your concerns. You can then expect to hear from a committee member within a week following Dr. Davidson's phone call. The actual consultation will take place over the phone, so that we can truly have a discussion with you about your concerns.

Following the consultation call, you can expect the committee member to present your concern at the next meeting of the committee. Any additional comments or feedback will be relayed back to you via a phone call.

### Ethics Committee Members

Morgan Bolen Student Member

Jill Davidson, PsyD

Irina Gelman, PsyD

**Steffanie La Torre** Student Member

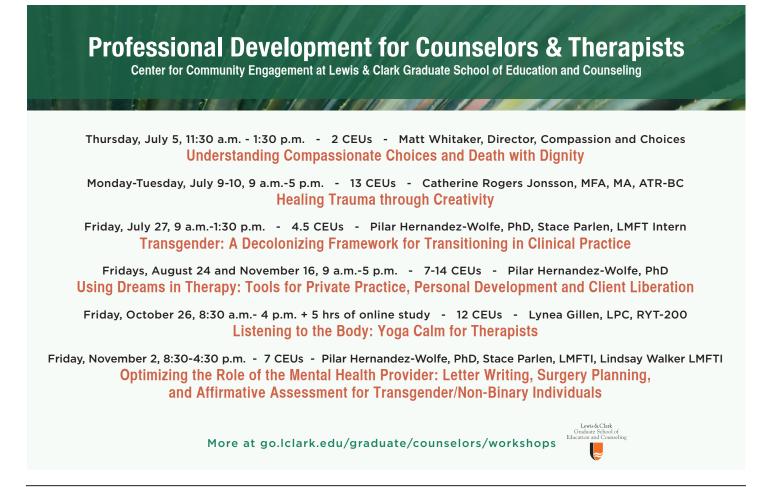
**Catherine Miller, PhD** 

Nicole Sage, PsyD-Chair

**Christopher Watson, MA** *Student Member* 

Jaimie Young, PsyD

Petra Zdenkova, PsyD



### 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

|                             | <b>POPAC Contribution -</b><br>utor name, mailing address, occupation and name of employer, so please  | fill out |
|-----------------------------|--|----------|
| Name:                       | Phone:   |          |
| Address:                    |  |          |
| City                        | State: Zip:  |          |
| Employer:                   | Occupation:  |          |
| Senate District (If known): | House District (If known):   |          |
| Amount                      | f Contribution: \$   |          |
|                             | e as charitable contributions for state or federal income tax purposes. Contributions rohibited. Corporate contributions are permitted under Oregon state law. |          |

### **OPA** Classifieds

#### OFFICE SPACE

Behavioral health space for rent part time. Lloyd area with street and paid lot parking. 10' x 9' with furnishing available if needed. \$500 per month includes all utilities. Email kristin.walker@greenfieldhealth.com

Office Sublet: Available after 5pm all days plus Fri, Sat, Sun, Mon daytime. Downtown Portland. Secure building. Waiting area; \$50 half day; \$100 full day (negotiable) Kg81005@gmail.com.

Office Space to Share and Lease. Shared space: Available, M, Th after 11, F & Weekends. Desirable NW location close to 23rd street, Rent: \$350. Office Spaces to lease in Beaverton. Sq footage: 119 to 285, Rent: \$707 to 1254. Incentives Available. 503.531.9355 to schedule a tour.

Group of 12 independent full and part time psychologists, psychiatric nurse practitioners, social workers, and a psychiatrist has an office (198 sq. ft.) available full time. Located (I-5, I-205, SR 500) class A building near Vancouver Mall. Free parking, large waiting room, full time staff person. Please contact: Judy Leonard, Professional Mgmt Servs, 360.253.6425, drkennethshultz@comcast.net.

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.

Beautiful large office in 2 office suite to rent. Large windows, trees, close to route 26 and 217 intersection, west side, close to Max with lots of parking. Share suite with health medical Psychologist referrals possible. Call 503.292.9183 for details.

#### 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.

#### 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.

### 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 Allan Cordova, PhD, 503.546.2089 Jennifer Huwe, PsyD, 503.538.6045 Rebecca Martin-Gerhards, EdD, 503.243.2900 Colleen Parker, PhD, 503.466.2846 Marcia Wood, PhD, Chair 503.248.4511 **CAC Provider Panel** Charity Benham, PsyD, 503.550.7139 Barbara K. Campbell, PhD, 503.221.7074 Michaele Dunlap, PsyD, 503.227.2027 ext. 10 Debra L. Jackson, PhD, 541.465.1885 Doug McClure, PsvD, 503.697.1800 Lori Queen, PhD, 503.639.6843 Ed Versteeg, PsyD, 503.684.6205 Beth Westbrook, PsvD, 503.222.4031 Marcia Wood, PhD, 503.248.4511

### *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 January 2017:

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

### **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

billing address and phone numbers.

The Oregon Psychologist 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 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. 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.

### Newsletter Schedule\*

### 2018

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

4th Quarter Issue - deadline is November 1 (target date for issue to be sent out is mid-December)

\*Schedule subject to change



### The Oregon Psychologist

Ryan Dix, PsyD • 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.

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