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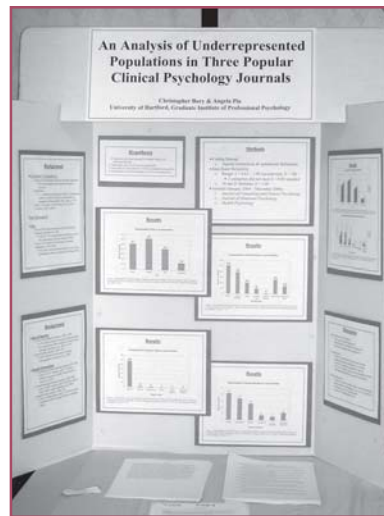
Newsletter of the Connecticut Psychological Association

Winter 2007

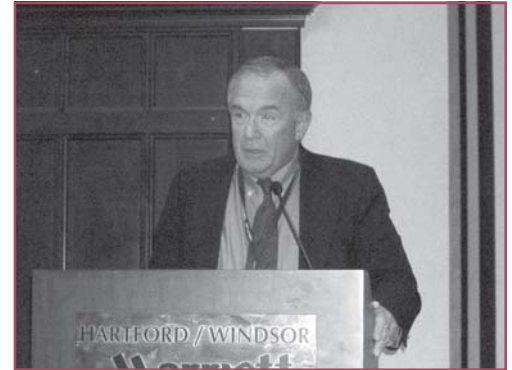
2007 CPA Convention



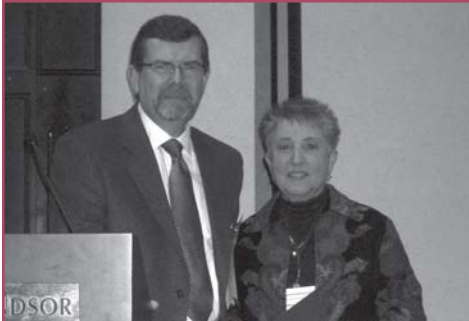
Dr. Jan Owens-Lane received a Diversity Award from Dr. Lee Gunther. The many ribbons on Dr. Owens-Lane signify Presenter, Past President, and Board Member.



A peek at the Poster Session.



Dr. Randy Lee credited the late Dr. Catherine Acuff as a friend, mentor, and trailblazer when he was honored with an award in her name.



Dr. John Mehm awarded Dr. Deena Robbins a certificate in recognition of her many years of dedication to CPA as Regional Rep. and as Co-Chair of the Convention Committee.



Round Table EDTF discussion right in the middle of the convention.

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CT Psychological Association
342 North Main Street
West Hartford, CT
06117-2507

The CT Psychological Association (CPA) represents psychologists in this state. You are invited to become a member. Membership information can be obtained from:

telephone (860) 586-7522
e-mail info@connpsych.org
fax (860) 586-7550 or
www.connpsych.org

The mission of this newsletter is to expand the CPA professional readership in new and relevant ways. We strive to create a balance between sound bites and lengthy discourse on topics that affects the practice of psychology in this state. CPA members are invited to submit letters, original articles, and notices to the editor. Submissions are usually 500 words or less. Please send your copy electronically in Word or text file format to:

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Copy deadline for the next issue is **March 14, 2008**.

Christine Farber, Ph.D.
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The CPA Web site at www.connpsych.org has a directory of members. Officers may be e-mailed by first initial, then last name @connpsych.org.

A Strong Foundation for 2008

By John G. Mehm, Ph.D.



Dr. Mehm

Recent weeks have been a busy time for CPA. There was a great deal of energy throughout the November 9 CPA Convention, and it is rewarding to hear so many positive responses from attendees. I was pleased to conduct CPA's Annual Meeting to discuss the association's accomplishments and plans for the future. Keynote speaker Kelly Brownell presented the challenges of changing our nation's diet, documenting the growing prevalence of obesity and the many factors that contribute to this public health crisis. Allison Ponce did such an outstanding job coordinating the poster session that we needed additional space to accommodate the record number of poster presentations.

Two events linked us with upcoming changes at APA. Thursday's pre-convention program welcomed back Dan Abrahamson, Assistant Executive Director of the APA Practice Organization. Approaching the end of his second year at APA, Dan was asked about the upcoming leadership transition when longtime Practice Organization Director Russ Newman departs at the end of 2007. The social hour in honor of Alan Kazdin provided members with a preview of his plans for the upcoming year as APA President. Many thanks to Convention Co-Chairs Ilene Grueneberg and Deena Robbins for such success in planning their 10th CPA Convention. Congratulations also to Nancy Gianetti, who became CPA's new administrative director just weeks before the convention.

The Ethnic Diversity Task Force once again solicited scholarship donations to provide students from high school, college, and graduate school the opportunity to attend the convention. The importance of developing a rich pipeline to our profession cannot be overstated. CPA also began a connection with the members of Torrington's Prime Time House and staff from the International Center for Clubhouse Development. I had the opportunity to attend a follow-up meeting at Prime Time House to celebrate this relationship, and more opportunities are being planned for the coming year.

A Congressional bill mandating mental health insurance parity (S 558) recently passed the U.S. Senate by acclamation. On December 3, Reps. Chris Murphy (CT-5th District) and Patrick Kennedy (RI-1st District) conducted a Mental Health Round Table at the Connecticut LOB to discuss the future of the House version of this bill (HR 1424). I was honored to represent CPA at this event and noted the longstanding support that our members have for a strong parity bill. With Connecticut's 1999 parity legislation recognized as one of the strongest in the nation, CPA is committed to a Congressional Act which will bring insurance parity to other states while preserving safeguards in states such as our own.

Plans for the coming year are well underway. The CPA Board of Directors will soon be welcoming three new members for 2008: Drs. Miki Lasher, Michelle Silva, and former CPA President David Abrams. We look forward to seeing all present and future leaders at the Annual Leadership Retreat in January. Please contact the CPA office if you have an interest in serving as a delegate to the APA Practice Organization State Leadership Conference in early March. The call for convention programs will be sent in February, so please plan ahead for how you might contribute to the programming of this remarkable event.

**Support CPA's
Legislative Advocacy!**

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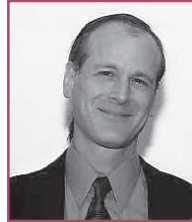
CPA

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The Big Picture Redux

By Michael Schwarzkild, Ph.D.

What a great Convention! It had its usual quirks and excitements for those of us who are charged with helping to make it go, but, from my perspective, the Convention Committee really hit it out of the park this year. Continuing with the sports metaphor, you can imagine that the team has been doing some post-game analysis. The result for me has been the now-familiar realization that our Convention is a prism through which disparate elements of CPA are annually brought together in clear focus. It started with a wonderful e-mail from Student Division Chair and APAGS State Advocacy Coordinator Beth Emprimo: "I think it [the success of the Convention] speaks to how great CPA is as an organization — so supportive and dedicated! As a student, that is so refreshing — and I feel fortunate to be part of something so strong." Wow! Please don't dismiss my including this as simple self-congratulation or ignorance of the significant issues that always face our Association. Rather, see it as an endorsement of the course charted for CPA over many years by a very dedicated Board of Directors. CPA does much that is right, and continues to improve.



Dr. Schwarzkild

I have a passion for trying to view the "Big Picture" at CPA, and I've written about it here before. It's easiest to gain this perspective at the Convention. This year, we started with a Board of Directors Town Hall Meeting at an ungodly early hour on Friday morning. It was shockingly well attended by CPA members who weren't even required to be there. Our Board truly represents democracy in action. The reports presented at the meeting indicated that the Association is sound, and the bylaws changes which passed should make it even stronger.

The other aspects of the Convention showcased all of CPA's strengths, interests, and initiatives, as summed up in our mission statement: "Advancing psychology as a science, as a health profession, and as a means of promoting human welfare." Kelly Brownell's keynote address, about the many factors involved in the problem of obesity in the United States, demonstrated psychologists' involvement in all of these areas. Student participation in our mission was highlighted in the Poster Session. Workshops showed that our members, committees, and executives are actively undertaking legislative projects, networking with the business community, carrying out advanced research in such areas as sleep, trauma, anxiety, and children's issues and applying the results to populations in need, reaching out to students and early career psychologists, addressing ethnic and sexual diversity both within and outside of our organization, examining licensure and ethics issues, and so forth. The luncheon awards ceremony clearly showed who we are, what we do, and who we recognize in furthering our mutual goals.

The rest of the picture is provided by our house organs, *Connecticut Psychologist*, our Web site, and the "E-News," which keep us informed about each other's activities. We are revealed to be a

group of volunteers involved in a tremendous amount of activity. As our new Region 5 representative to the Board, Deborah Stack said at the very successful meeting she recently hosted for her constituents, "Before getting directly involved, I had no idea how much CPA's volunteers were doing in all of these different areas." That, indeed, is the Big Picture.

Dr. Schwarzkild is Director of Professional Affairs for CPA.

Nominations for Psychologically Healthy Workplace Awards

These awards are designed to recognize organizations for their efforts to foster employee health while enhancing organizational productivity. The award program has both state- and national-level components. Since 2000 CPA has striven to establish and promote a positive work climate with CT business companies and organizations. CPA's Psychologically Healthy Workplace Committee is seeking nominations for businesses which excel in at least one of these five areas:

- Employee Involvement
- Employee Recognition
- Employee Growth and Development
- Work-Life Balance
- Health and Safety

Nominations may be made by businesses themselves or by CPA members who recognize the value of a particular workplace. Nominations are available at www.phwa.org and through CPA's Web site at www.connpsych.org. The forms, which can be completed online, are due by June 30, 2008. This is an opportunity for CPA members to positively ally with CT businesses and organizations.

CPA's Psychologically Healthy Workplace Committee Co-Chairs are Drs. David Tate and Len Wysocki. The next committee meeting is scheduled for January 17. New members are welcome. Information may be obtained from Dr. Tate at david.tate@yale.edu.

Report from San Francisco

By Jack K. Plummer, Ph.D.

APA President Brehm welcomed 161 APA Council of Representatives (C/R) members for a one-and-a-half-day meeting. Five-year CEO Dr. Norman Anderson described the organization as "in transit" with 60 percent of its 167,000 members being 55 years of age or older. APA is on firm ground financially, with net assets of \$44 million, although requests from various constituencies exceeded the available resources. Publications generate 68 percent of revenues; non-dues supply 18 percent, and dues provide a paltry 14 percent. Fifty-four percent of expenses are associated with salaries and benefits, which is actually lower than many organizations. In its largest budgetary decision, the C/R authorized \$7.6 million to rebuild the APA Web site, making it more user-friendly.

Dr. Anderson also provided the first status report on the strategic plan mandated by C/R in August. A Diversity Officer will be appointed. James McHugh, long-time counsel, is leaving, as are Russ Newman, Executive Director of the Practice Directorate, and Jack McKay, CFO. Mr. McKay was once fired over the *Psychology Today* fiasco and later returned to save the organization from its financial woes!

A moment of silence was held to honor a long list of deceased colleagues, including three with Connecticut ties.

An agenda item titled, "Reclaiming Recognition of Psychology," urged all of us to be clear when using the terms "psychology," "psychological" and "psychologists." Resolutions were approved regarding healthcare reform, and respect for diversity. Asian, Black, Indian and Latina/o psychological associations were admitted to C/R as full-voting participants. APA reported on the submission of legal briefs in CT courts addressing same-sex marriage and child welfare.

The most hotly-debated issue concerned ethics, more specifically, psychologist participation at U.S. Detention Centers. The controversy attracted an overflow crowd of observers, including local media. Approval was granted for motion, "Reaffirmation of the American Psychological Association's Position Against Torture and other Cruel, Inhuman, or Degrading Treatment or Punishment and Its Application to Individuals Defined in the United States Code as 'Enemy Combatants'." The articles of the Geneva Convention and well-established United Nations principles could have been supported but were not, due in part to technical and legal issues. The media compared the APA position to the American Medical Association and American Psychiatric Association, which apparently prohibit their members from participating in various interrogative activities with, of course, little real power of sanctions. Unfortunately, the media I spoke with seemed to underestimate the importance of psychologists participating in activities which may protect human rights.

I feel privileged to represent my CT colleagues in a third term, despite the sometimes arduous nature of the proceedings.

Dr. Plummer is a former President of CPA who maintains independent practices in Meriden and Litchfield. He has been appointed as CPA's Representative to APA C/R.



Dr. Plummer

CPA Prepares for Legislative Session 2008 Membership Involvement Encouraged

By Anita Schepker, J.D.

Once again, CPA is gearing up for an active and productive year at the General Assembly. With the New Year around the corner, the CPA Board will set legislative priorities at its December meeting.

This year, the Session will begin its deliberations on February 6, 2008. The work does not start in February, however. Already, we have attended the first two meetings of the Health Care Access Working Groups that will make legislative recommendations to the General Assembly in December, 2008. We met with legislative leaders and key committee members, organized a legislative breakout session with Senator Jonathan Harris at the CPA Annual Convention, and put together a brochure with information about CPA and its resources for the benefit of the legislature. We also hope to engage the legislature in supporting and making recommendations for businesses to be nominated for the Psychologically Healthy Workplace Awards in 2008.

We welcome two new legislative interns, Eileen Kurowski and Craig Kimmelblatt, who have already been immersed in CPA activities. Both of our interns came to the last CPA Board meeting. Eileen also attended a meeting with Dr. Christine Farber and Representative Larry Cafero, the Minority Leader of the House. At that meeting, CPA offered itself as a resource to the legislature for issues in which the association has particular interest and/or expertise. Craig attended a bullying symposium at the Legislative Office Building, an event designed as an informational session for legislators, parents, students and school officials. The symposium also made clear the need for stronger and more comprehensive anti-bullying laws in our schools. Throughout the session, Craig and Eileen will be watching and monitoring key issues, attending meetings, and helping CPA advance its legislative presence and agenda.

Last year, CPA members participated in various issues, ensured that expansion of health care proposals included mental health coverage, and testified at meetings with legislators. We hope that in 2008, we have at least as much participation as we had last year, and we will reach out to members for their expertise.

You can help CPA in its legislative efforts by getting involved in a variety of ways. You can testify at a hearing, meet or contact your local legislator on pertinent issues, offer expertise to the CPA legislative team, or work with sister organizations to advance the practice of psychology and its patients. If you want further information on CPA legislative issues, contact the Legislative Committee Chairs, Drs. Barbara Bunk or Christine Farber at: bbunk@connpsych.org or cfarber@connpsych.org. We are looking forward to working with all of you over the next legislative year.

Attorney Schepker, CPA's lobbyist, is with the firm of Schepker & Associates, LLC, West Hartford, CT.



Atty. Schepker

Nooses and Gay Bashing and Misogyny — Oh My! Cultural Competency and Professional Identity

By Kathy McCloskey, Ph.D.

In today's climate, at the beginning of the 21st century, it seems sad that psychologists would need to revisit either the issue of cultural competency or social justice. In the words of an unnamed early career psychologist, "Haven't we already been there and done that?" Well, yes. And unfortunately, no.

Dr. Madonna Constantine, a psychologist at Columbia University Teacher's College, recently had a noose placed upon her office door (Cable News Network (CNN), 2007c). She is African American. The U.S. Coast Guard has been dealing with nooses as well: One placed on an African American recruit's seabag and another on the office door of a White female civil rights instructor at the academy in New London, CT (CNN, 2007a). And then there's the Jena 6 in Louisiana. After their Caucasian tormenters had publicly hung nooses from a "Whites-only" tree and later physically intimidated them, six young Black teenagers were charged with assault and one was held in jail without bond for responding in kind (CNN, 2007b). For heaven's sake — *nooses*, in 2007?

James Maestas, a 21-year-old man from Santa Fe, NM, was badly beaten by four men in 2005 and suffered extreme internal injuries, placing him in a coma, while his companion from Albuquerque suffered minor injuries. During the assault, the attackers repeatedly called the two young men "faggots" and told them they didn't deserve to live (Auslander, 2005). In 2005, Rashwan Brazell's body parts were found in bags scattered across Brooklyn, NY as a result of a gay-related hate crime. In 2003, Saki Gunn, a young woman from New Jersey, was fatally stabbed at a bus stop after she rejected her male attacker's sexual advances by telling him she was lesbian. J.R. Warren, a young gay man from West Virginia, died in a similarly horrific fashion after two teenage men beat and stomped him and then ran him over with a car. All three victims were Black and none of these killings received Matthew Shepard-level headlines within the mainstream media (The Advocate, 2007). For heaven's sake — *gay bashing*, in 2007?

Recently, the American Psychological Association (APA) (2007) released the *Report of the APA Task Force on the Sexualization of Girls*. The Task Force synthesized available research that shows the high level of sexualization that girls and young women are subjected to within contemporary North American culture. Unfortunately, everyday oppression and sexualization of females continues as if it were invisible. Indeed, coverage within the media about gender bias is scant compared to other hate crimes. For that, we must look to the all too common reports of wife beatings or the breaking news at 11 o'clock that tells us: "Man kills wife, 3 kids, self in Yuba City, cops say" (Zamora, 2003), or "Ohio man kills self, wife, in parking lot as kids look on" (FoxNews, 2007). This doesn't even begin to address the level of garden-variety rape that occurs on our college campuses, between dating partners, or within everyday



Dr. McCloskey

marriages (Gavey, 2005). For heaven's sake — *misogyny*, in 2007?

Nooses, gay bashing, and misogyny — oh my! What do they all have in common? They represent hate and bias against individuals who fall into social categories that are different from compulsory whiteness, heterosexuality, and masculinity — our present-day dominant social norms. And if we as psychologists are not aware of how we also unfairly compare and contrast others to those norms, we run the risk of not only being culturally incompetent with clients, but also becoming completely irrelevant as a profession.

Fortunately, there are ways to ensure our cultural competence. Unfortunately, it is both uncomfortable to do and an ongoing process. Sounds like fun, doesn't it — an unpleasant never-ending process? But that's just the point. Many more of us would get right to it if it were an enjoyable process and we knew there was an end-point in sight. But we don't because it's not. Even so, we are ethically and professionally required to gain and maintain the knowledge, skills, and abilities that constitute cultural competence, and luckily we know what to do. Due to space constraints, a set of overarching guidelines will be presented in the next edition of the CP, as well as more concrete items that get right at the "how-to." As a sneak preview, the process begins and ends with you, the psychologist.

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Dr. McCloskey teaches at the University of Hartford Graduate Institute of Professional Psychology.

The ASAP at the Hispanic Clinic: Providing Immediate Care and Opportunity for Recovery

By Michelle A. Silva, Psy.D., Luis M. Añez, Psy.D., Manuel Paris, Psy.D., & Luis Bedregal, Ph.D.

Day after day, the front door to *La Clínica* opens to a growing Latino community. Clients are welcomed with a personalized “*Cómo esta Doñita/Don?*” noted not only for its warmth, but for the language in which it is delivered. As an established outpatient provider, the Hispanic Clinic/*Clínica Hispana* of the Connecticut Mental Health Center (CMHC) has offered mental health and addiction services to underserved, monolingual Spanish speaking Latino adults in the city of New Haven and its surrounding towns for over thirty years. A collaborative endeavor between the Connecticut Department of Mental Health and Addiction Services (DMHAS) and the Yale University School of Medicine, the Hispanic Clinic uses a range of therapeutic modalities to serve an average census of 425 registered clients. Most recently, the Clinic, in collaboration with over a dozen behavioral health providers from the greater New Haven area, joined to create the Connecticut Latino Behavioral Health System (CT LBHS). The short-term outlook of this initiative is to ensure that mental health and addiction treatment is both accessible and culturally and linguistically appropriate throughout south central Connecticut, while the long-term vision anticipates replication of this behavioral healthcare service model at the state level.

Current census figures estimate the Latino population at 44.3 million, or 15 percent of the total U.S. population. This data does not include the number of undocumented Latino immigrants currently residing in this country. Demographics in CT reflect national trends in that the Latino population increased from approximately 320,000 in 2000, to a present estimate that surpasses 391,000 (or 11.2 percent of the total state population). In the city of New Haven, Latinos make up approximately 22 percent of the population (U.S. Census Bureau, 2006). The needs of monolingual Spanish speaking clients are most critical, given the obstacles that language and acculturative stressors pose to the receipt of effective services.

Located in an urban setting, clients present with many of the issues typically afflicting inner city communities: poverty, violence, and substance use, among others. Beyond basic needs related to safety and daily survival, the lives of our clients are often further compromised by their legal status, migration experience, language barriers, and the loss of primary support networks.

In 1998, the creation of the Ambulatory Specific Adjunctive Program (ASAP) surfaced as an opportunity to address some of the challenges posed by those in need of a higher level of care. This specialized program developed in response to the significant need for crisis-oriented interventions and the limited number of available clinicians to effectively manage the breadth of clinical and case management needs. In addition, clients requiring inpatient care were often hospitalized in facilities that lacked bilingual and bicultural personnel and so, interventions often failed to sustain beyond short-term stabilization. The ASAP quickly became an integral part of the clinic’s distinct services and remains as a rare and exciting training opportunity for the predoctoral psychology fellow who arrives each year to coordinate and run the program.

We provide the following case vignette in an effort to illustrate a typical day for someone participating in the ASAP:

It is Wednesday morning and Doña Manuela* has just arrived at *La Clínica*. Once again, her transportation came a little too early so she waits outside the clinic doors. The weather has started to change making the wait much more bearable. It is now about 9:05 a.m. and as familiar faces fill the waiting area, Manuela quickly scans for someone to talk to. Manuela has been in the ASAP for approximately six weeks. She arrived with a history of repeated psychiatric hospitalizations, an acute case of diabetes, and serious depressive symptomatology. She lives alone and identifies “mi Dios” (my God) as her strength. The ASAP clinician soon greets Manuela and her peers, and the hallway quickly echoes with an exchange of “Buenos Dias” (Good morning) and “Cómo estas” (How are you?). The walk is familiar to Manuela and she first stops outside her clinician’s door to offer a morning greeting. The routine begins as various group members volunteer to make *el café* (the coffee). Gradually the discussion moves from casual *platica* (small talk) to a more structured group therapeutic process. At various instances, Manuela is observed nodding in agreement and though physically present, she appears to escape to her own memories, perhaps triggered by her peers’ words. Group continues and Manuela speaks. She expresses feelings of loneliness and missing her family back home. She grows quieter and appears preoccupied. Opinions are shared and supportive feedback abounds among the group. Time seems to go by quickly and it is almost the end. The early morning greetings are replaced with “Dios mediante nos vemos el Viernes” (See you on Friday, God willing). And so, Manuela once again walks down that familiar hallway, through a waiting room that once seemed new and threatening, and out the clinic doors. Each person with a different story, a different experience, and yet shared goals for recovery.

As described, the group milieu offers a family-like environment for many who are often lacking this source of support due to cultural and linguistic barriers, social isolation, and/or family discord. Clients share their life stories, and are encouraged by both clinicians and fellow peers to pursue their goals. Gradually, they gain *confianza* (trust) and hope, thus empowering them to take an active role in their treatment and recovery. Perhaps this *dicho*, or Latin proverb, says it best: *La perseverancia toda cosa alcanza* (Perseverance attains all). Despite the obstacles, as community providers, we can also be inspired by our clients’ determination and persevere in meeting the needs of those Latino individuals and families who come through our doors every day.

*All confidential and identifying information has been changed to protect our clients.

Drs. Silva, Añez, Paris & Bedregal are with the Yale University School of Medicine.

Law, Workplace and Culture

By Jeffrey Pingpank, J.D.

Cy was exasperated. "You lawyers," he said. "You drive me crazy. If men are from Mars, women from Venus, lawyers must be from Pluto." I asked him why he was so upset. Cy was treating an Asian woman who had moved to the U.S. just a few years ago. She was very reserved and proper. She was suffering from anxiety caused by stress in the workplace. One of her co-workers, who was much more outgoing and expressive than she, had made comments to her that had sexual overtones. Her supervisor was obnoxious and demanding, and put impossible deadlines on her. Together, these two were causing her anxiety. It had gotten so bad that she had gone to a lawyer, and now the lawyer was calling Cy.

Cy said that the lawyer was asking him questions that to him didn't make much sense. The lawyer was asking him if he could separate out the tension and anxiety caused by the demanding supervisor from the tension and anxiety caused by comments of the co-worker. The lawyer also wanted to know if Cy thought the sexual comments were so bad that most women would find them abusive, and if he did, how did Cy reach that conclusion? Cy didn't understand why he was being asked these questions.

I explained to Cy that the reason the lawyer wanted to separate out the anxiety caused by the supervisor's behavior from the anxiety caused by the co-worker's behavior was an issue of liability and money. Under most circumstances, an employee can not sue his employer, or his supervisor, for being a rude, insensitive demanding jerk. If an employee could sue, every time a supervisor looked at an employee cross-eyed, he or she could be sued. So instead, with some exceptions, the law requires workers to put up with demanding bosses, and she could not get compensated for the stress caused by her boss.

One of the exceptions, I explained to Cy, was sexual harassment. If the woman could make out a case of sexual harassment she could collect damages. She would have to prove among other things that the co-worker's comments were sufficiently severe or pervasive to create an abusive working environment. To make matters more complicated, the comments would have to be viewed by an objective standard. That is, would a reasonable person find the comments sufficiently severe to create a hostile work environment?

Cy wanted to know how the law defined a reasonable person and whether the definition differed for people of different backgrounds. Cy said that he thought that women who were more used to "demonstrative" men would have brushed off the comments of the co-worker, but that this woman, because of her background, was not used to such demonstrative behavior and could not brush off the comments. I told him that he was raising an interesting question, one that the law had not really answered. The law has created a "reasonable person" test, which has been interpreted to mean, in the case of a female victim of alleged sexual harassment, a "reasonable woman," but the law had not gone so far as to say that the test would be a reasonable woman in mainstream American



Atty. Pingpank

society, or a reasonable woman with the same cultural background of the complainant. Perhaps Cy has a test case. I told him to ask his patient's lawyer to refine the question, or for Cy to explain to the lawyer his dilemma in answering the questions.

Attorney Pingpank is with the firm of Cooney, Scully and Dowling, the designated counsel for CPA's Legal Consultation Plan. CPA members are eligible to join the plan for a nominal fee.

2007 CPA Awards

New CPA Fellow 2007

Christine H. Farber, Ph.D.

Distinguished Early Career Contribution to Psychology

Pamela S. Huebner, Psy.D.

Distinguished Contribution to Diversity in Psychology

Jan Owens-Lane, Ph.D.

Yale University Hispanic Clinic (New Haven)

Outstanding Legislative Contribution

U.S. Sen. Christopher Dodd

Rep. Faith McMahon

Award for Extraordinary Service to CPA

Mikaru S. Lasher, Ph.D.

Outstanding Lifetime Contribution to Psychology

Kelly Brownell, Ph.D.

Catherine Acuff Award for Outstanding Contribution to the Profession of Psychology

Randolph M. Lee, Ph.D.

President's Award

Christine H. Farber, Ph.D.

Distinguished Contribution to the Practice of Psychology

Steven D. Moore, Ph.D.

Distinguished Psychological Contribution in the Public Interest

Elaine L. Ducharme, Ph.D.

Outstanding Student of Psychology

Elizabeth I. Emprimo, M.A., M.Ed.

Distinguished Contribution to the Health and Welfare of Connecticut's Children

Connecticut Association for Children with Learning Disabilities

Distinguished Contribution to Healthcare in Connecticut

Kevin Lembo, MPA

Yankees Fail to Fly High: Analysis of Their Game

By Reena Levine Seltzer, Ph.D.

In baseball, flies are usually balls batted in a high arc, usually to the outfield. But during a playoff game in Jacob's Field, Cleveland, OH on October 5, 2007, infield flies ruled as they swarmed around the face and neck of Yankee rookie pitcher, Joba Chamberlain, in the eighth inning. The reliever, rattled by the unexpected pests buzzing around his head, repeatedly asked for time to chase away the bugs. He subsequently threw two wild pitches that gave the Cleveland Indians the tying run which ultimately helped them win three innings later.



Dr. Levine Seltzer

In contrast, Cleveland pitcher, Fausto Carmona, also experiencing his first season as a starter, showed uncommon poise and command and nothing bugged him despite being attacked by the same flies. He didn't flinch. "I knew there were a lot of flies," he said, "but I was trying to stay focused. I was not going to allow nothing or nobody to distract me."

Sport psychology certainly comes into play in reviewing this or any other playoff game like the World Series. Sport psychology provides training in mental skills that result in mental toughness. In baseball, whether is it pitching, batting or fielding, effectively and consistently handling big game pressure requires the ability to shift attentional focus (focus on what is important and block out everything else), maintain self-confidence and think like a winner (manage self-talk), and reach and sustain a prime level of intensity.

Joba Chamberlain may have learned how to tune out the loud apocalyptic music and the crowd of 44,732 people waving white towels. He may have prepared for the unfamiliarity of the away-game venue. He may have also used his standard pre-game routine to manage any nervousness. And he probably approached this game with self-confidence, given his demonstrated ability to dominate hitters, his phenomenal 4:1 strikeout to walk ratio, and his proven track record of excelling in pressure situations.

What Joba and his teammates didn't have in their armamentarium of mental skills was a developed strategy for dealing with unexpected events outside of their control, a swarm of flies. The bugs probably didn't bother the Indians, who had experienced their visitations before and may have even considered them part of their home-field advantage. Interestingly, Indian third baseman Casey Blake's comment, "They were bothering them so much I tried to show they weren't bothering me," indicated what strategic self-talk he used during the game to get through this difficult situation.

But actually, Joba wasn't to blame for the loss. The flies also seemed to silence the Yankees' bats. The top-of-the-batting order couldn't produce hits or runs in the bottom of the ninth in this must-win game; they got nothing from A-Rod or Jeter. They managed only three hits over eleven innings. Much like the New York Mets, who failed to make the playoffs after holding a huge seven-game lead in the National League East, the Yankees collapsed. Most likely, the expectation that the Yankees would somehow pull out a win and the pressure to do so changed their at-bat routine so that rather than focus on one pitch at a time, they tried too hard or thought about it too much. The great Yogi Berra once said, "A full mind is an empty bat."

Given the Indians' flawless pitching and their own natural flies, and the Yankees failure to stay relaxed, focused and grounded in the present moment, the Indians did well. In any case, if you can learn the game of baseball, then you can learn enough sport psychology techniques to help you develop a solid mental game and achieve peak athletic performance on the ball field.

Reena Levine Seltzer, Ph.D., is a clinical psychologist with an interest in sport psychology. She maintains a private practice in Woodbridge, CT and can be reached at reenaseltzer@gmail.com.

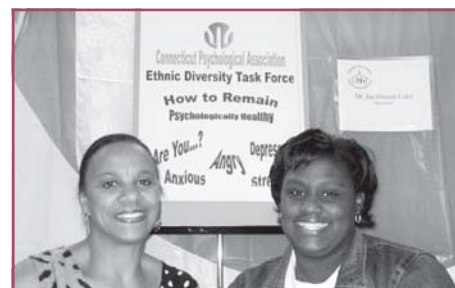
EDTF Remains Active

By Mikaru Shichi Lasher, Ph.D.

On October 6, 2007, the Ethnic Diversity Task Force (EDTF) participated in two health fairs in two different locations in Connecticut. Information was shared with the community about various psychological disorders. Attendees to the health fairs expressed interest in learning about depression, bipolar disorder, and psychological resources in their local areas. Jan Owens-Lane, Ph.D. and Shanita Gadsden, B.S. participated in the Health and Wellness Fair at the Christian Tabernacle Baptist Church in Hamden. Ree LeBlanc Gunter, Ph.D., and Miki Lasher, Ph.D. attended a health fair sponsored by Casey Family Services in Bridgeport.

In December Drs. Miki Lasher, Gretchen Vaughn, and Michael Schwarzchild presented EDTF's request for financial assistance with its hairdresser initiative. The CPA Educational Foundation voted to commit financial resources in the range of \$1,000 to \$3,000 in support of this important outreach activity, contingent upon a review of the project budget.

EDTF is currently in the process of updating the *Directory of Mental Health Professionals of Color*. If you would like to update or add your information to the directory, there is still opportunity to do so. Information can be obtained from Gretchen Vaughn at: gvaughn@connpsych.org.



Dr. Jan Owens-Lane and Shanita Gadsden at Christian Tabernacle Baptist Church in Hamden

From Tee to Page

By Roberta Isleib, Ph.D.

In the mid 1990s, not too long after I'd gained a slippery grip on the physical basics of golf, I began to compete in tournaments at my own club and in low-level Connecticut state events. I found myself quivering with anxiety on the first tee, torn between a furious desire to whomp my opponents and equally strong fears about the (quite real!) possibility of total humiliation. How did real golfers thrive in pressure-packed conditions? Was there any wisdom that could apply to me? I set off on a quest for answers.

Ten years later, my golf dreams have receded, replaced by dreams about making it big as a writer. Did I waste my time chasing down wisdom from the sports pros? Not at all! In fact, I use many of their tips to help manage the ambitions and fears of my writing life—and my “regular” life as well.

Dr. Richard Keefe, clinical psychologist and author of *On the Sweet Spot*, explained that winning a tournament like the U.S. Open changes your life financially. “That practical reality aside,” said Keefe, “most players have dreamed about winning the Open since childhood. They can't stop thinking about what it would be like to win. And that is exactly the worst mindset for good golf.” His advice? Develop a pre-shot routine that kicks in on the tee, quieting the caucus in your mind. Translation to writing: Write every morning on the same computer, at the same desk, the same dog at my feet.

Golf psychologist Joseph Parent, author of *Zen Golf*, told me that the greatest pressure is generated by the prestige or ego status involved with the prospect of winning a big tournament. “Hope



Dr. Isleib

and fear crescendo at the same time,” said Parent. “Players hope to win the tournament and the benefits that come with it, while at the same time, they fear blowing the opportunity. The combination produces tension and stress.” Parent counseled “firing your own inner evil caddie.” Translation to writing: I give myself permission to write a lousy first draft, roughing the story out first and fixing the words later.

Dr. Shane Murphy, author of *The Achievement Zone*, counsels elite athletes to break down their goals into specific processes, rather than product-oriented steps. They are directed to focus less on winning and more on improving their performance independent of scores. Translation to writing: I map out daily and weekly word-count goals on my calendar, and reward myself when I reach them.

And finally, sport psychologist Dr. Bea Epstein-Shepard told me: “Your subconscious mind is looking for big opportunities.” She suggested identifying big goals and then literally making these aspirations concrete: Paste them on the wall to give the imagination and subconscious a goal, and then set them aside to concentrate on the small steps that might bring you closer to those goals. Translation to writing: I keep a photograph of the winner of the 2006 Edgar Award for best mystery novel and a copy of the New York Times bestseller list pinned on the wall above my desk. And then I move on to the writing.

But every once in while, I imagine the gown that I'll wear to the ceremony . . .

Dr. Roberta Isleib is an author whose latest book is reviewed elsewhere in this newsletter.

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Virtual Reality Exposure Therapy for Veterans of Iraq War Comes to Connecticut

By Chris Gilliam, Ph.D.

Post-traumatic stress disorder (PTSD) was the biggest mental health problem noted in an anonymous survey completed by soldiers and marines returning from active duty in Iraq or Afghanistan. Approximately 12.6 percent of veterans met criteria for PTSD (Hoge et al., 2004). As the war continues, that number is likely to rise, as previous research has demonstrated that rates of PTSD increase with the number of combat experiences (Hoge et al., 2004; Litz, Orsillo, Friedman, Ehlich, & Batres, 1997). This is of particular concern for the current war, since many soldiers are deployed to Iraq more than once. We learned from the Vietnam War that the costs of war-related PTSD can be substantial, not only to the veterans and their families, but also to the taxpayers. Thus, timely and effective treatment for PTSD is greatly needed.



Dr. Gilliam

Among the many treatment approaches, exposure-based therapy has been the most carefully studied and has shown the most promise for reducing PTSD symptoms. Since PTSD has to do with anxiety about a memory of a traumatic event, the goal of exposure therapy is to desensitize patients to their feared memories. In other words, the goal is to teach patients that combat is dangerous, not the memory of their combat experiences. Typically, exposure therapy for PTSD includes both imaginal and *in-vivo* exposure. Imaginal exposure requires the patient to repeatedly imagine their traumatic event, while *in vivo* exposure involves real-life contact with avoided situations or activities that are not objectively dangerous. Research has revealed that *in vivo* exposure is often more effective than imaginal exposure for reducing anxiety, perhaps because some patients have a poor imagination and/or find it easy to ignore imaginal scenarios (Foa & McNally, 1996). Until recently, exposure therapy for PTSD has relied heavily on imaginal exposure because past traumatic events often cannot be readily recreated in a therapist's office. The advent of virtual reality has provided a new medium of exposure therapy for veterans with PTSD.

Recently, a collaborative team of researchers developed a virtual Iraq program to provide a new medium for the delivery of exposure therapy for combat-related PTSD among Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) Veterans. Virtual Reality Exposure Therapy (VRET) has several advantages over traditional exposure therapy. Unlike imaginal exposure, which relies on a patient's ability to vividly visualize the feared situation, a virtual environment can provide a consistent feared stimulus. This is helpful especially for patients who have difficulty with fully engaging in imaginal exposure. Unlike *in vivo* exposure, VRET can be performed completely in a therapist's office. The technology can be used to generate stimuli or conditions (e.g., an Iraqi street or marketplace) that would be difficult or impossible to replicate in real life. Furthermore, the computer simulation is under the therapist's direct control; thus, it is easier to insure that exposure exercises go according to the treatment plan. Finally, VRET for PTSD may promote treatment-seeking behavior in the current gen-

eration of young military personnel who have grown up with digital gaming technology (Rizzo, Rothbaum, & Graap, 2007). The most significant advantage of VRET may be its potential for improving the acceptability of treatment for PTSD. Many veterans perceive a stigma associated with seeking mental health services and those veterans that need treatment the most are least likely to seek it (Hoge et al., 2004).

Research on the effectiveness of virtual reality programs for the treatment of PTSD has been promising. An open trial of VRET among Vietnam Veterans found significant reductions in PTSD symptoms during follow-up evaluations (Rothbaum et al., 2001) and a pilot study of PTSD from the World Trade Center attack found improvement in PTSD symptoms following VRET (Difede, Cukor, Patt, Giosan, & Hoffman, 2006). Research on VRET among OIF/OEF veterans with PTSD is underway as several researchers around the country have begun research studies using virtual Iraq. At the Anxiety Disorders Center at the Institute of Living, we are taking an active role in this exciting and novel approach to treat PTSD among Veterans by conducting an open clinical trial to test the effectiveness and acceptability of VRET among OIF/OEF veterans. We hope that our study will not only help the veterans that enroll in our VRET program, but that knowledge from the study will contribute to improvement in the treatment of combat-related PTSD for OIF/OEF veterans across the country.

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Dr. Gilliam is a postdoctoral fellow at the Anxiety Disorders Center at the Institute of Living, and co-investigator of the study "Virtual Reality Exposure Therapy for Combat-Related Posttraumatic Stress Disorder in Operation Iraqi Freedom and Operation Enduring Freedom Veterans," led by Dr. Melissa Norberg and Dr. David Tolin (Principal Investigators).

The Constitution State

By Pat DeLeon, Ph.D.

George Walker Bush, the 43rd President of the United States, was born in New Haven, which today is the home of APA President-elect Alan Kazdin. For years, as a Connecticut native, I have been urging Dan Abrahamson to run for the APA Presidency. Accordingly, I was extremely pleased when he decided to serve psychology by moving to APA (albeit as an appointed, rather than elected, official) and head-up the Practice Directorate's state advocacy efforts. All of psychology has been well served by our two colleagues' sincere commitment to the field. Their vision and timeless dedication has been special. *Mahalo*.

Working within the public policy (i.e., political) process, one eventually comes to appreciate that a major attribute of a successful leader is the ability to "think outside of traditional boxes," while simultaneously convincing colleagues to appreciate, and hopefully follow, an evolving vision. As our profession enters the 21st century, it is important for us to grasp the necessity of thinking in an interdisciplinary manner, as well as comprehending the unprecedented magnitude of change which the communications and technology fields are bringing to what we consider to be our domain. Comfortable "silos" of practice or of education are ultimately limiting.

Over the past decade, psychology has steadily evolved into one of the nation's bona fide healthcare professions, bringing the best of the behavioral sciences to such major public health issues as childhood obesity and the recognition that 80 percent of older Americans live with at least one chronic disease. The Centers for Disease Control and Prevention (CDC) recently noted that these adults over 65 can lower their risk of premature death and disability by adopting healthier behaviors and getting recommended screenings. Nearly 95 percent of health care expenditures are spent on treating chronic health conditions among older adults, a population for whom the psychosocial-cultural-economic gradient of care is so critical. Yet, we would rhetorically ask: How many of our colleagues appreciate the historical role that the Department of Agriculture (or legislatively, the Senate Committee on Agriculture, Nutrition, and Forestry) has played in shaping our nation's health and education policies, and especially those targeting the pressing needs of rural America? Are we collectively aware, for example, that it was the Senate Agriculture Committee which first recommended federal reimbursement for our nation's nurse practitioners (APNs) – thereby effectively moving the Senate Finance Committee (which has jurisdiction over Medicare and Medicaid) to ultimately include APNs as recognized providers? As we have matured as a profession, have we broadened our public policy perspective sufficiently to learn from the impressive accomplishments of others? How many of us still think of ourselves as exclusively mental health providers, operating in a policy vacuum?

During the closing hours of the first session of the 110th Congress, both the House of Representatives and U.S. Senate deliberated on their version of the Farm bill reauthorization act (the Senate Food and Energy Security Act of 2007). Included within Title VII –



Dr. DeLeon

Research and Related Matters, National Agricultural Research, Extension, and Teaching Policy Act of 1977 – of the Senate version is a program that should be especially interesting to psychology: "Sec. 7046. Women and Minorities in STEM Fields.... (a) Establishment – The Secretary shall establish a program under which the Secretary, in coordination with applicable Federal, State, and local programs, shall provide grants to eligible institutions to increase, to the maximum extent practicable, participation by women and underrepresented minorities from rural areas... in science, technology, engineering, and mathematics fields (referred to in this section as 'STEM fields'). (b) Activities – In carrying out the program established under subsection (a), the Secretary shall – (1) implement multitrack technology career advancement training programs and provide related services to engage, and encourage participation by, women and underrepresented minorities in STEM fields; (2) develop and administer training programs for educators, career counselors, and industry representatives in recruitment and retention strategies to increase and retain women and under-represented minority students and job entrants into STEM fields; and (3) support education-to-workforce programs for women and under-represented minorities to provide counseling, job shadowing, mentoring, and internship opportunities to guide participants in the academic, training, and work experience needed for STEM careers....(1) Grants – The Secretary shall carry out the programs under this section at such institutions as the Secretary determines to be appropriate by providing grants, on a competitive basis, to the institutions.... (d) Authorization of Appropriations. – There are authorized to be appropriated such sums as are necessary to carry out this section for each of fiscal years 2008 through 2012."

Psychology has much to contribute in effectively addressing complex societal issues such as improving the quality of life of those with chronic diseases and increasing the number of women and ethnic minorities seeking fulfilling careers in the sciences. This Summer, APA's Jeff McIntyre testified before the Senate Commerce, Science, and Transportation Committee on The Impact of Media Violence on Children. "In the late 1990's, tragic acts of violence in our schools directed our nation's attention to the serious problem of youth violence. School shootings . . . have brought about a national conversation on the origins of youth violence and what we — as parents, psychologists, and public policymakers — can do to prevent more incidents of violence. Years of psychological research on violence prevention and child development has helped inform, and continue to address, this urgent need . . . Foremost, the conclusions drawn on the basis of more than 30 years of research contributed by APA members . . . shows that repeated exposure to violence in the mass media places children at risk . . ."

The passion and vision of your two Nutmeg State colleagues comes at a challenging time in the history of our nation and of our profession. We look forward to their creative leadership during the coming year, as they foster exciting interdisciplinary dialogues ultimately resulting in collaborative successes. *Aloha*.

Dr. Pat DeLeon is former APA President and a guest columnist.

Creating a Post-Doctoral Position in Your Practice: A Conversation with Barbara Bunk, Ph.D.

By Mikaru Shichi Lasher, Ph.D.

The Early Career Division promotes post-doctoral opportunities in CT. I interviewed an employer of post-doctoral trainees, Barbara Bunk, Ph.D. of Bunk, Grueneberg, and Associates, LLC. This large group practice in Glastonbury primarily focuses on services to children, adolescents, and families. The partners are Drs. Barbara and Ilene Grueneberg. In addition to post-doctoral trainees and pre-doctoral students, several part-time licensed psychologists are on staff.



Dr. Lasher

Creating a Post-Doc Position: Approximately 13 years ago, Barbara and Ilene decided to form a group practice. Their decision was based partly on a desire to be able to meet state licensing requirements for providing supervision to post-doctoral trainees. Barbara and Ilene felt strongly about the importance of giving back to the profession of psychology by sharing their expertise with those who were just starting out in the field. Over the years, at least five post-docs in full- and part-time positions have been employed.

How Much Work Is Involved in Supervision? The state requires at least three hours of supervision per week of full-time work, including both individual and group supervision. Supervision is provided to all practitioners working at the site, so there was not an additional burden from supervising students *per se*. Most of the supervision was focused on specific cases, but some didactic learning experiences were provided as well.

Professional Liability: Professional liability falls on the licensed psychologist when employing an unlicensed trainee. Barbara noted that it is therefore important to get to know the trainee well to assess their skills and level of independence.

Financial Considerations: The state requires that post-doctoral positions be salaried, which implies a financial commitment from the practice. Barbara and Ilene recognized this potential drawback, but considered it to be similar to psychologists treating a certain percentage of *pro bono* clients as part of professional ethical standards. Additionally, the salary paid to the post-doc trainee may be partially reimbursed. For example, payments can be made through contractual work with specific types of insurance or state/federal-funded programs. Although insurance companies typically will not pay for services provided by trainees, some unlicensed individuals hold professional counselor licenses which are reimbursable. Clients who pay for services privately can pay a reduced fee with a post-doctoral provider. Revenue can also be increased for the practice due to the total increase in client numbers and referrals.

Benefits of a Post-Doc in a Practice: Teaching provides learning experiences for both the trainer and the trainee. Students bring fresh perspectives and knowledge that can expand the practitioner's awareness and skills. Additionally, collegial contact can offset stress and isolation. Overall, Barbara felt that post-doctoral training was a positive experience and would recommend it to other psychologists.

Post-Doctoral Positions: Not as Hard to Create as You Might Think

By Miki Lasher, Ph.D. and Lisa Gersony, Psy.D.

Do you miss interacting with trainees? Do you enjoy supervising trainees? Could your workplace use the fresh ideas and vitality of the newly graduated? Why not create a post-doc position? It's not as hard as you might think. Here is a broad (but not exhaustive!) overview of the post-doctoral experience standards for Connecticut:



Dr. Gersony

1. The experience must last the equivalent of one year. This means:

- at least 35 hours per week for no less than 46 weeks within 12 consecutive months, or
- at least 2000 hours within 24 consecutive months

2. The work must be salaried.

3. The starting date must begin after the postdoctoral candidate has completed all requirements for his or her degree.

4. Activities must be related to the educational preparation of the prospective post-doc and the area where he or she intends to practice.

5. There are two types of employment settings that meet Connecticut standards.

- The first is an environment that employs at least two full-time licensed psychologists, at least one of whom will provide face-to-face supervision and take responsibility for the activities of the post doc. *For each 40 hours of post-doctoral work experience in this setting, at least 3 hours of supervision must be provided, at least one of which is face-to-face.*
- The second type of setting must provide mental health services (such as a licensed facility, a facility operated by a state agency, municipality or by a private nonprofit corporation) and employ one full-time licensed psychologist who will take responsibility for the post-doc's activities and provide supervision. The agency must also provide the services of a second licensed psychologist who will provide further face to face supervision. *For each 40 hours of post-doctoral work experience in this setting, at least 4 hours of supervision must be provided, at least one of which is face-to-face.*

Still interested? Then it's easy to learn more and pick up the two page application form from the State of Connecticut Department of Public Health Web site: http://www.dph.state.ct.us/Licensure/apps/PLIS/Psychology/Psych_Home.htm.

Drs. Gersony and Lasher are members of CPA's Early Career Professionals Group.

Attention Students!

By Beth Emprimo, MA, Med., LPC

Being more involved as a student and becoming part of CPA not only looks great on your CV, but also allows you to gain important knowledge and experience *and* does not necessarily have to take up much of your (extremely valuable) time. Here are some ideas:



Beth Emprimo

- **Legislative/Advocacy Efforts** – Keeping abreast of legislative issues is so important, as we are future psychologists and need to be aware of what is happening in our field! Going to the CPA Web site (www.connpsych.org) and APAGS Web page (<http://www.apa.org/apags/advocacy/>) and reading about current legislative issues is a great place to start to learn about the many issues affecting our profession.
- **Attend CPA Social Events** – Participating in regional social hours, events, and seminars is a great way to network and stay connected. Although you may not be planning to stay in Connecticut long term, this is still a great way to make contacts and learn about different aspects of the profession from seasoned psychologists.
- **Committees** – Be part of a CPA committee. CPA is made up of many different committees with specific foci. Ethnic Diversity Task Force (EDTF), Gay, Lesbian, Bisexual, and Transgender Task Force (GLBT), and Child & Youth Committee are just a few. Feel free to speak to members about joining one—they welcome and appreciate student input.

Those are just a few of the many ways to become more informed and involved, which can help you stand out not only as a student, but as a future psychologist!

Ms. Emprimo is State Advocacy Coordinator for APAGS, a CPA board member, and doctoral candidate at University of Hartford..

Prepare for Graduate School!

By Alisa Graham, B.A.

Students who plan to enroll in graduate, medical, or law school after completing a bachelor's degree as an undergrad may not realize how important it is to start planning ahead during the transition from college to graduate school. The implication here is that planning ahead involves more than just purchasing goods for on-campus housing or even registering for classes during the first semester. A first year graduate student needs to be privy to what their responsibilities will be while in graduate school. And if you're not too sure about how to figure that out, you can always consult with an advisor from your program, or a third or fourth year graduate student who has already experienced the first year grad jitters. First year grads sometimes find it difficult to juggle full-time coursework, career-related commitments such as the APA or CPA, volunteering, graduate assistant work, family time, friend time, personal down time, or even entertainment such as a party or movie. Study anxiety and pressures are sure to come, especially towards the end of the first semester. Accepting academic support from a mentor and your peers can be very helpful (realizing, of course, you're not in this alone!). It's important to keep your focus by prioritizing.



Alisa Graham

Ms. Graham is currently a graduate assistant at Columbia University.

**Take a psychologist to lunch . . .
and invite him or her to join CPA.**

BOOK REVIEW

Preaching to the Corpse

Published by the Penguin Group in 2007

Authored by Roberta Isleib, Ph.D.

Reviewed by Alma Elder, Ph.D.

Light reading is a recipe all its own. Defrost several idiosyncratic characters, add dashes of positive and negative attributes to each of them, and mix thoroughly in a plot. Then decorate with real-life observations about institutions and psychology and, *voila!* You have produced a creation that will add sweetness to your life. Among the many treats of *Preaching to the Corpse*, a book by Dr. Roberta Isleib, is its deadpan, living-on-the-edge type humor. For example, the poison that kills one victim results from a lecture on poisonous plants at the Women's League and another victim is injured be-

cause he slips on Crisco. Another treat is the heroine's use of therapy to confront issues regarding her family and romantic relationships.

Dr. Isleib, a member of CPA, continues to pursue a successful path of writing and entertainment through the medium of paperback books. This is the seventh paperback that she has produced in about the same number of years. She is traveling, giving presentations, and signing enough books that she might have to start thinking about carpal tunnel syndrome.



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A Tribute to

Dr. Judith Kohan Steiber

Written by Jack H. Bloom, Ph.D.

Born: Brooklyn NY 1919 — Died: Bridgeport CT 2007

Judy was a woman for all seasons, an exemplar for 20th and 21st century womanhood. Bright, gracious, kind, steadfast in her thinking, coherent, with a sense of security in herself that made her competent in so many areas yet overbearing in none. My psychological training makes it hard to believe she was an only child. She was not “spoiled” in the slightest. She possessed an uncanny sense of how to relate, respect, and bounce with the punches. Her own cherished loved ones were so many and so varied.

She was for this writer a loyal and good friend and coworker. For years we occupied offices at The Psychotherapy Center. Every contact was marked by kindness, integrity, and cooperation.

And we cooperated on a lot of things. She got her Ph.D. in Counseling Psychology from Columbia in 1967 just as I was entering the Columbia Ph.D. program. Though we knew each other beforehand, she encouraged and sustained me from her own experience as one who had undertaken a second career. She became a friend and a mentor. That was her way.

And psychology became a passion for her. She never ceased learning.

When Phil Sarrel, M.D. was conducting a Masters and Johnson sex therapy education program at Yale, she committed herself to being there full time for a year.

The program presupposed therapists working in male-female pairs, so each full-timer needed a partner, at least one day a week. She en-

listed me as her partner in that program and we worked together with couples and groups. We were both in the exhilarating Gestalt Institute of Connecticut in its heyday and spent lively weekends as both attendees and later as trainers.

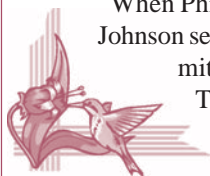
Her tireless activism in our field included her service as Professor at the University of Bridgeport and Director of Psychological Services there. Ever active in CPA affairs and on the Connecticut Board of Psychological Examiners, she strove to establish and maintain high standards for psychologists in our state.

Beyond the professional, there were delightful visits to her wonderfully appointed home, which reflected her exquisite good taste in every corner. Visits to the studio loft in her home left one in awe of her artistic talent. She was an inextricable part of her family and household for years and years.

The death notice in the *Connecticut Post* of Monday, October 8, 2007 says it well.

“Judith Steiber had an avant-garde commitment to free will and the empowerment of women and diversity, a passion for the arts, music and education. She lived her life with ferocious independence, on a quest to unravel the mysteries of the human condition through her paintings, her professional life and caring for her family. Her life and legacy are an enduring memory to her family.”

And to all of us who knew her in any way.



CALENDAR OF EVENTS

(Dates, times, and updates of Regional Socials may be found at www.connpsych.org.)

January 17, 2008

Meeting of Psychologically Healthy Workplace Committee

Place and time to be announced

January 18, 2008

CPA Annual Retreat and Board of Directors Meeting

All members are welcome and encouraged to attend.

University of Hartford Campus

February 6, 2008

State Legislative Session begins. Legislative Committee will be in full swing.

March 9-12, 2008

APA State Leadership Conference

Washington, D.C.

March 19, 2008

Financial Planning Seminar, sponsored by the Early Career Division of CPA; 5:45-7:30 p.m. Bring your tax questions!

770 Saybrook Road, Middletown, CT

April 19, 2008

Board of Directors Meeting

CPA Headquarters

**Please contact CPA office
if you have any changes to the following:**

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Has your CPA Membership status changed?

Are you still a student unlicensed?

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**Take a psychologist to lunch . . .
and invite him or her to join CPA.**

APPLAUSE! APPLAUSE!

During his APA Presidency, Dr. Ronald Levant made “making psychology a household word” one of his initiatives. CPA psychologists are doing just that. One of the ways CPA contributes is through its Public Education Committee. **Dr. Laney Ducharme**, as Chair of this committee, recently educated her community about the impact of psychological stress through both school fairs and television interviews. She also shared information about minimizing the triggers for stress that are often present during the holiday season. Thanks to Dr. Ducharme for serving in this important role for CPA.

In October of this year, **Dr. Jan Owens-Lane** spoke at an event titled, *The Emotional Emancipation of Black People: Building Strong Black Families. A Community Conversation*. In describing a matriarchal model of family, Dr. Owens-Lane talked about a family with a single mom and 2 children. In such a family system, many mothers may find themselves depressed but ashamed to ask for help, experiencing a loss of faith and blaming themselves for the challenges in their lives. One of Dr. Owens-Lane’s messages: Pastors and church members can be educated about depression as both a spiritual and a chemical problem.

In a September column of the *Hartford Courant*, **Dr. Sandra Scantling** addressed the use of erotic movies, writing that an evocative or explicit movie watched together by partners is one way, but

not the only one, to invigorate a couple’s sexual repertoire. Also in September, **Dr. Ginger Blume** wrote about crisis vs. opportunity options available in midlife in *The Middletown Press*. Whereas one person may see crisis, fearing aging, illness, and death, for example, another may discover opportunities. According to Dr. Blume many people who transition effectively through midlife actually profit by constructing new meaning and purpose in the second half of life.

As psychology becomes a household word in Connecticut, a familiar household item is making its way into psychology. Video games! Video games as an intervention for psychological problems? That’s the idea behind a game from Great Britain called “FearFighter.” The game has been proven effective in small-scale studies to treat panic attacks, mild depression, and phobias. A *Hartford Courant* reporter interviewed several Connecticut psychologists for their reactions. **Dr. Karen Steinberg** thought video games might be helpful for people with agoraphobia or social phobia who wouldn’t otherwise be able to get out of the house for treatment, but she expressed concern that the relationship between doctor and patient would be missing. Dr. Steinberg is a clinical psychologist and assistant professor of psychiatry at UConn. **Dr. David Tolin, ABPP** could see potential use for the games to treat phobias such as fear of flying, for

example. As an anxiety expert at Institute of Living, he has in fact treated patients with virtual reality games. A colleague and postdoctoral fellow at the Institute, **Dr. Chris Gilliam**, was also featured in the *Courant* article and wrote about video therapy for this newsletter.

A member of Connecticut’s *Finding Words* faculty, **Dr. Barbara Bunk** was an honoree at a November event recognizing Connecticut’s progress in responding to child abuse. This event featured Rep. Amann as recipient of the National Children’s Alliance Bud Cramer Award. Way to go, Barbara!

And way to go, Tom! **Dr. Tom Miller**, that is. He formerly held the position of CPA’s public education “ambassador,” now held by Dr. Ducharme. Recently he received the 2007 APA Award for *Distinguished Professional Contributions to Practice in the Public Sector* at the APA Convention in San Francisco. Prior to his relocation to Kentucky, Tom served as CPA’s Public Education Coordinator and received CPA’s award for *Distinguished Contribution to the Science of Psychology* in 2004.

Psychology is not only becoming a household word, but a “clubhouse” word. Clubhouses—which adopt a holistic model of rehabilitation and healing and emphasize relationships as well as member participation—are popping up as valuable resources for persons with mental illness. “Changing Expectations for Recovery” was the title of

a presentation at CPA’s annual convention this year. Attendees of this presentation were invited to a reception at the Torrington clubhouse, **Prime Time House**, on November 29, where **Dr. John Mehm** received an award. Prime Time House was also an exhibitor at the convention. Some of the best examples of well-run clubhouses include the Chrysalis Center (Hartford), Fellowship Place (New Haven), Bridge House (Bridgeport), Laurel House (Stamford), and Prime Time House (Torrington). The first two were developed independently, whereas the latter three are run in accordance with the principles of Fountain House in New York City.

“Stop, hey, what’s that sound? Everybody look what’s going down.” It’s the group called “Too Old to Care,” west central CT’s prime purveyor of Cosmic American Music. The estimable lead singer and guitar picker is none other than **Dr. Michael Schwarzschild**. The group performed in November at a coffee shop in Bethel, CT. One of their songs included this line about aging: “This old road played me hard—it’s the mileage, not the years.” The guitar picker joked that he used to pride himself on knowing the words to the song without music, now he’s glad to be able to read the words of the song. The audience appreciated songs about the hangman’s rope, pillars of anthracite coal and liar’s dice. Watch for future engagements of this rocking group.