

The Pennsylvania

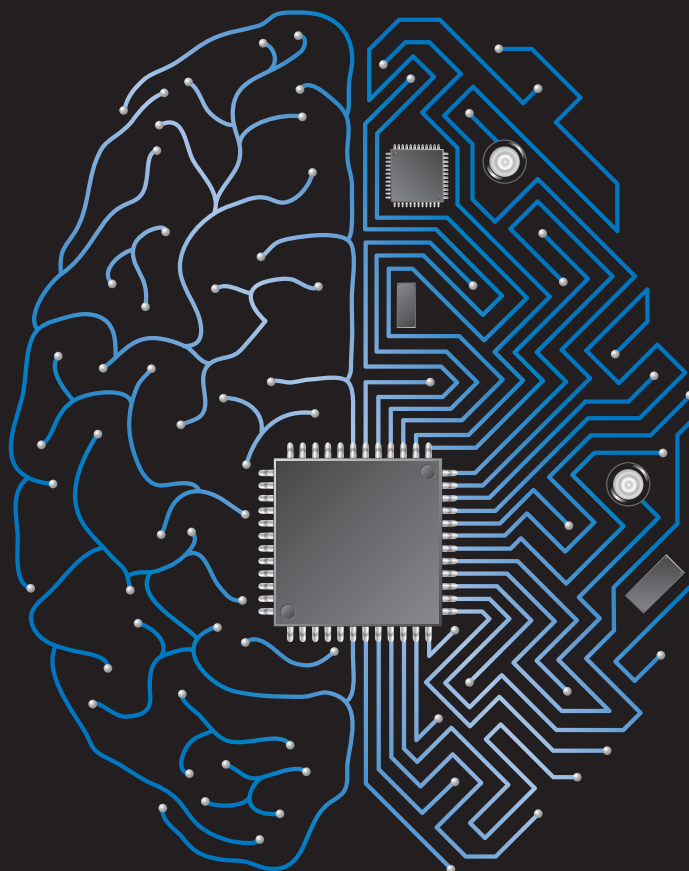
Psychologist

March 2010 • QUARTERLY

CONVENTION 2010

June 16–19
Hilton Harrisburg
Harrisburg, Pennsylvania

PSYCHOLOGY IN
THE DIGITAL AGE:
CHOICES AND
OPPORTUNITIES



ALSO IN THIS ISSUE:

- Special section on psychodynamic thought
- Psychodynamic theory in the schools
- Legal column: Release of a minor's records





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From Typewriters to iPhones

Steven R. Cohen, Ph.D.



This has been an exciting year for PPA. This year's convention, "Psychology in The Digital Age: Choices and Opportunities," is scheduled for June 16-19

in Harrisburg. The program is an exciting one, with information about the uses and misuses of the new technologies. Technologies are tools that can be either helpful or hurtful. In addition to learning about the technologies, we must learn about the ethical implications of the uses of these tools.

I can go back in time and remember writing my Ph.D. dissertation. I had to hire a professional typist to type it on a typewriter, and a computer person to input my research statistics onto little punch cards to feed into a mainframe computer. Desktop personal computers did not exist yet. The giant box of punch cards was still in my basement until last year when I decided to dispose of them. Many of you have never seen a computer punch card except in old movies.

About 8 years ago my daughter, who works in public relations said, "Dad, you need a Web site." She put together some of the biographical information about me, some of the self-published brochures I have written, and in no time I had a Web site. A large portion of my practice is forensic psychology. I began to inform attorneys that they could look at the Web site for information about me. In the early days of the site, one attorney said he hired me based on the fact that I had a Web site. He assumed I was "really an expert" because I had a Web site. He said he did not have a Web site and was really impressed that I was so computer savvy. Of course, having a Web site does not make one an expert, but it is a marketing tool that is not difficult and need not be expensive. In this day and age, most people search the Web for information about psychologists. A Web site is less expensive than a large ad in the Yellow Pages.

PPA demonstrated its leadership and foresight by being one of the first state psychological associations in the country to have a Web site. It has been useful and we are grateful to have had it, but there were problems in finding the valuable information on it easily, and it was getting dated in look and feel. At the December 2009 Board of Directors meeting we approved an upgrade and redesign of the Web site. This has been a 2-year process of evaluating the needs of PPA and the best way to present PPA on the Web. This year we are upgrading the Web site so that it will be more useful to you and to the public. We will be doing Web presentations (Webinars) in the future so that you can obtain CE credits in the comfort of your home or office. We also plan to do video and audio Web conferencing, to avoid those many trips to Harrisburg by committee members.

In addition to marketing your services on the Web, research becomes easy. We no longer have to spend hours in the stacks of libraries to research a topic. The touch of a button on our computer or smart phone gives us access to the journal articles immediately in the comfort of your home or office. With a voice activated search tool on my iPhone, I can just talk into the telephone and it will find what I asked it to. The technology we saw in science fiction is no longer fiction, and is part of our daily life.

PPA had our last election via e-mail and it saved PPA a large amount of money. We will continue to use postal mail for those of you who do not yet have e-mail. If you are not computer literate, you really must learn to be. Remember, in the near future there will be a requirement compelling most to keep their records electronically. PPA will keep you informed as the details emerge.

However there is always a dark side to the explosion of technology. We have all heard of sexting and children becoming involved in this disturbing phenomenon. There are cyber pedophiles, stalkers, and other dangerous behavior going on. Some marriages are being ruined by excessive

The technology we saw in science fiction is no longer fiction, and is part of our daily life.

use of online pornography and online dating. The use of fantasy and the anonymous nature of the Net are addictive to some clients. Many of us are unsure about the boundary issues of social networking with current or past clients.

You may be professionally slandered by a client. I had libelous information posted by a client that said I was under criminal investigation, which was not true. Other PPA members have also been smeared by disgruntled clients on the Net. I was forced to hire an attorney to have these postings removed. But once something is out on the Net, it will show up somewhere. You can have a spotless reputation but still have someone do this to you. Sadly, more of us will find angry postings by clients that may be unhappy with our work or billing. We all will need to deal with these problems that come with our profession and the type of people we deal with.

This convention will be an exciting one. Dr. James Bray, the immediate past president of APA, will be our keynote speaker. A highlight of his term was the Presidential Summit on the Future of Psychology Practice: Collaborating for Change.

We are also pleased to have Mr. Rich Brooks, president of PPA's Web-design company, flyte new media, speak at the Psychology in Pennsylvania Luncheon, and Dr. Richard S. Lord speak at the Psychopharmacology Breakfast Symposium.

In addition to these "headliners" we have many interesting and exciting presentations from our very knowledgeable colleagues. And, most important, is the chance to network with friends, meet new colleagues, and share ideas with the many wonderful PPA members who attend the convention. See you there in June. 📺

Communication: The Times They Are A-changin'

Thomas H. DeWall, CAE



PPA has made great strides in recent years in improving our communication with our members and with the public. We have an excellent Communications Board, chaired by Dr.

David Palmiter. He and his predecessors in that position, as well as the committee chairs within that board, have developed a multifaceted communications strategy.

Exhibit A is this journal, *The Pennsylvania Psychologist*. I hate to call it a "newsletter" because that implies something like a few pages run off on a mimeograph machine (well, OK, something more updated than that). Our journal, also known as the "official bulletin of PPA and PPF" in the fine print on page one, is published quarterly. We publish an update in the months in between except for a combined issue for July and August. Collectively these constitute *The Pennsylvania Psychologist*.

The organization that was the forerunner of PPA, known as the Pennsylvania Association of Clinical Psychologists (PACP), published a newsletter starting in 1936. (The earliest copy still extant, from June 1936, listed all 28 members of the association.) We have copies of most of the issues of the "PACP News Letter" since that time. They appear to have been published intermittently. In the early 1960s the "Pennsylvania Psychologist News Letter" was published semiannually, then it became a quarterly in the mid-60s, and later a bimonthly, dropping the "News Letter" part of the name. Starting in the late 1980s we started our current schedule.

We receive copies of many of the other state psychological associations' newsletters and journals. Based on that, we know that we are the only state association that publishes monthly. And our quality is second to none. In our most recent annual survey 77% of the members rated our publications high or very high. All of our quarterly issues, such as

this one, contain articles around a theme, to give readers some depth on that topic. In all of the issues we have articles that are helpful to psychologists in many areas of practice. In fact, as we have noted in our letters to recruit nonmembers, it would be risky to practice psychology in Pennsylvania without getting the wisdom of Dr. Sam Knapp, Rachael Baturin, and our many other authors, for their articles about new developments in law, regulations, and policies that impact the profession of psychology. Our current bulletin editor, Dr. David Zehrung, has done a great job in upgrading the quality of our publication.

We engage in many other forms of communication with our members and the public as well. We are the only state that publishes an e-newsletter for the public. Called

"Psychological News You Can Use," we send it online on a quarterly basis to PPA members and to all state legislators and almost 400 members of the public who have signed up for it. It contains useful information directed at a lay audience about how to deal with many problems in living and how psychologists can help. We are indebted to Dr. Marolyn Morford and her committee for their leadership on this project.

More and more we communicate with our members and the wider world through our Web site. There is a great deal of information to be found on our site, but the PPA leadership has noted that certain items are often difficult to find. Because of this we are currently engaging in a major upgrade of the site that will make it more user-friendly. The funds to do this come primarily from the 75th Anniversary Fund, to which 178 PPA members contributed during our 75th anniversary in 2008. We will have additional information about our new Web site in upcoming issues of

The Pennsylvania Psychologist and other outlets.

Helping to oversee the process of the revamping of the Web site is Dr. Ed Zuckerman, chair of our Electronic Media Coordination Committee (EMC²). This hardworking committee also monitors and develops policy for our member listserv, to which about 670 members belong. The listserv has become one of our most important membership benefits because it provides a forum for immediate help, advice, and new perspectives on a wide range of issues. It fosters communication among the members and offers a forum for two-way communication between

*More and more we communicate
with our members and the wider
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the PPA leadership and members. Many members of the listserv regard it as worth the price of membership by itself. We also have smaller listservs for individual committees, and most of them communicate this way and by conference call.

Our Public Education Committee (PEC) has been especially active under the chairmanship of Dr. Judy Blau. Through the PEC we coordinate our public education efforts with those of APA. For several years we have gone to great lengths in the campaign to help to "make psychology a household word." Staffer Marti Evans has done yeoman work in this campaign and writes a semiannual column on our members who participate in it. She and Dr. Palmiter are the APA Public Education Campaign Coordinators for Pennsylvania. The PEC and Ms. Evans have arranged to present free "mind-body health" workshops for the public at the annual PPA convention for the last two years, and they are planning to do so again this June.

Continued on page 6

Release of a Minor's Voluntary Outpatient Mental Health Treatment Records

Samuel Knapp, Ed.D.; Director of Professional Affairs
Rachael L. Baturin, MPH, J.D.; Professional Affairs Associate
Allan M. Tepper, J.D., Psy.D.; PPA Legal Consultation Plan

In 2005, Pennsylvania amended the Minors' Consent to Medical, Dental, and Health Services Statute (35 P.S. §10101). This amendment contains provisions regulating a minor's consent for voluntary outpatient mental health treatment, and the release of a minor's voluntary outpatient mental health records (Tepper, Knapp & Baturin, 2006).

Age of Majority

In Pennsylvania, the age of majority is 18. The amendment to the Minor's Consent Statute, however, makes a distinction between a minor less than 14 years of age and a minor 14 to 17 years of age.

Consent to Treatment

For a minor less than 14 years of age, the consent of the minor's parent or legal guardian is required prior to instituting mental health treatment (35 P.S. §10101.1(a)(2)). In this regard, the parent, rather than the less than 14-year-old minor, controls the minor's treatment decisions.

When providing treatment to minors 14 to 17 years of age, the amendment to the Minor's Consent Statute allows for two avenues of consent. First, the 14- to 17-year-old minor can provide consent without the consent of the parent or the guardian. Second, the parent or the guardian of the 14- to 17-year-old minor can provide consent without the consent of the minor.

Situations in which there is shared legal custody raise a number of issues related to a minor's consent to treatment. The amended Minor's Consent Statute allows treatment to proceed with the consent of "a" parent. Conversely, the Pennsylvania State Board of Psychology has not ruled definitively upon the consent necessary to treat a minor in a shared legal custody situation. Prior Board rulings, however, imply the need to

obtain the consent of all of the shared legal custodians prior to instituting treatment of a minor less than 18 years old (*Grossman v. State Board of Psychology*, 2003). These prior rulings, therefore, are in contrast to the language of the amended Minor's Consent Statute. To date, there has been no Psychology Board case addressing these differences.

These differences in statutory and case law language give rise to practical concerns. In this regard, when providing treatment to the less than 14-year-old minor in a shared custody situation, it strongly is recommended that consent of all of the legal custodians be obtained prior to instituting treatment. When providing treatment to the 14- to 17-year-old minor through parental consent in a shared custody situation, it strongly is recommended that consent of all of the legal custodians be obtained prior to instituting treatment. When providing treatment to the 14- to 17-year-old minor through the consent of that minor in a shared custody situation, it strongly is recommended that the minor's consent be documented clearly in the written records.

Release of Records

The amended Minor's Consent Statute is silent regarding the consent necessary to release the treatment records for a minor under the age of 14. The generally accepted principle, however, is that when the parent of a minor under the age of 14 consents to treatment, that parent controls the release of the treatment records. In shared custody situations involving the treatment of a minor under the age of 14,



Dr. Samuel Knapp



Rachael L. Baturin



Dr. Allan M. Tepper

it would appear that absent an overriding court order, the consent of all of the legal custodians is required prior to releasing the records.


In a treatment situation in which a parent has consented to the treatment of the 14- to 17-year-old minor, the consenting parent has a limited ability to access or release the records. In these consent situations, the parent who is providing the consent to treatment has the right to information necessary for providing consent to the minor's mental health treatment, including symptoms and conditions to be treated, medications and other treatments to be provided, risks and benefits and expected results (35 P.S. §10101.2(c)). In addition, the consenting parent may consent to the release of the minor's mental health records and information to the primary care provider if, in the judgment of the minor's current mental health treatment provider, such release would not be detrimental to the minor (35 P.S. §10101.2(a)(3)).¹ All other records requests require the specific consent of the 14- to 17-year-old minor.

¹ It should be noted that there is no definition of "primary care provider" included in the amended Minor's Consent Statute. In the past, primary care providers have been considered to include general practitioners, family physicians, pediatricians, nurse practitioners who provide primary care, and specialists who act in the role of a primary care provider.

In a situation in which the 14- to 17-year-old minor has consented to treatment, that minor controls the release of his or her treatment records. In essence, all of the record release rules that apply when treating a patient 18 years or older apply when treatment is conducted by the consent of the 14- to 17-year-old minor.

Practical Considerations

The amended Minor's Consent Statute limits a psychologist's ability to disclose information in cases where the 14- to 17-year-old minor consents to treatment. This limitation includes disclosure of information to the parents of the minor.


At times, some psychologists may believe that such a stringent rule may place counterproductive constraints upon the treatment of the older adolescent. In such situations, the psychologist should discuss this issue with the 14- to 17-year-old minor prior to instituting treatment. For example, the psychologist might discuss the need to provide the parents with treatment updates, or discuss with the parents the need for outside consultation. If that minor agrees that the psychologist will be allowed to disclose certain treatment information, this treatment should be documented clearly in the written records as part of the initial informed consent procedure. In this way, the psychologist can maintain focus upon the clinical needs of the case, while complying with the necessary confidentiality requirements. 

References

- Grossman v. State Board of Psychology*, 825 A.2d 748 (Pa. Commw. Ct. 2003).
 Tepper, A. M., Knapp, S. J., & Baturin, R., (2006, February). Minors' consent to mental health treatment. *The Pennsylvania Psychologist*, 4-5.

Advocacy Day

The PPA leadership has selected **Monday, April 19, 2010**, as our Advocacy Day this year. PPA members are urged to put it on their calendars. It will again be in room 60 East Wing of the Capitol Building in Harrisburg. The schedule will consist of registration at 9:30 a.m., an issue orientation session from 10:00 to 11:30, and meetings with legislators after that.

We will be providing more information about it by e-mail and on our Web site. We hope to have a good turnout of PPA members. No room for social loafers here! 



PPA's 19TH ANNUAL ADVOCACY DAY

April 19, 2010 • State Capitol

REGISTRATION FEES: \$20 for PPA Members, \$30 for Non-Members, Free for Student Members of PPA

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Problem-Solving Courts Bill Takes Another Step


Senate Bill 383 (introduced by Senator Jane C. Orié (R-Allegheny) has been passed by the Pennsylvania House Appropriations Committee, paving its way for passage by the full House of Representatives. At press time the bill was on the House Calendar. PPA has supported these and similar bills in previous sessions of the state legislature. The second sponsor of SB 383 is Senator Daylin Leach (D-Montgomery), and the bill has 12 other cosponsors. It has already passed the Senate but will need to go back there after House passage because of a minor amendment.

This bill would allow the Pennsylvania Supreme Court to provide guidance and technical assistance to counties establishing problem solving courts (such as mental health or drug courts), including the appointment of a statewide problem solving courts coordinator. A number of Pennsylvania counties have already established such courts. Pennsylvania currently has 7 juvenile drug courts, 2 family drug courts, 22 adult drug courts,

6 DUI courts, 7 adult mental health courts, and 1 juvenile mental health court. This bill is designed to help expedite this movement.

Individuals with serious mental illnesses are over-represented in jails and prisons. Currently about one in six prisoners in the United States has a serious and persistent mental illness. The percentages of prisoners with serious mental illnesses are higher than the percentage of persons with serious mental illnesses in the general population. Many of these individuals are incarcerated for misdemeanors or nonviolent offenses, such as trespassing, disturbing the peace, or disorderly conduct.


These seriously mentally ill people often tax the resources of the prison. Other prisoners may victimize or exploit them. They disrupt prison routines and have difficulty complying with basic prison rules. Because of the extraordinary demands they place on the prison staff, mentally ill prisoners are expensive to house.

One way to address the problem of seriously mentally ill persons being sent to prison is to establish mental health courts, which can take different forms. Generally they divert non-violent mentally ill people into mental health treatment in lieu of incarceration, while their compliance with the treatment program is monitored by a judge. Diversion programs have the potential to benefit everyone. The police benefit because they have to spend less time dealing with disruptive mentally ill people; the prisons benefit because diversion programs can reduce a very substantial burden on them; the patients and their families benefit because persons with mental illness get the treatment they need; and the taxpayers benefit because diversion programs reduce the financial demands on the prison system. However, these programs require technical expertise including specialized probation staff or judges who work with mental health professionals. 

EXECUTIVE REPORT

Continued from page 3

Our Cyber Technology Task Force is making plans for PPA to increase our ability to communicate using 21st century methods. They are investigating the best ways to use social networking, blogging, webinars, and other cyber telecommunications methods to advance our mission to advance psychology in Pennsylvania as a means of promoting human welfare. Task force members have helped us set up wikis for many of our committees to use, enhancing their communication and making them more productive.

Communications within the association are not just one-way. We have several means of eliciting input from the members on the directions PPA should be taking. We send out a survey to all members each fall and usually get a good response rate of about 20%. The Board of Directors uses the information we acquire that way in making decisions for PPA programs. We hold a town hall meeting every year at the annual convention. A portion of the program is always dedicated to eliciting comments from those in attendance about PPA's direction. Members also often give their feedback to staff at CE workshops and frequently call or e-mail with questions or ideas. As previously noted we also receive suggestions for improvements and new ideas from members on the listserv. Members should feel free to communicate their thoughts directly to me or to members of our Board of Directors, listed on our home page at <http://www.PaPsy.org>. 



Check out PPA's Career Center

The Membership Benefits Committee would like to remind all PPA members that the new online Career Center is up and running! Simply click on the green box labeled "Career Opportunities" on the right hand side of the PPA home page (www.PaPsy.org). This is a resource for both job seekers and employers/recruiters.

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PPA and the Digital Age

Tad Gorske, Ph.D.

Chair, Program and Education Board




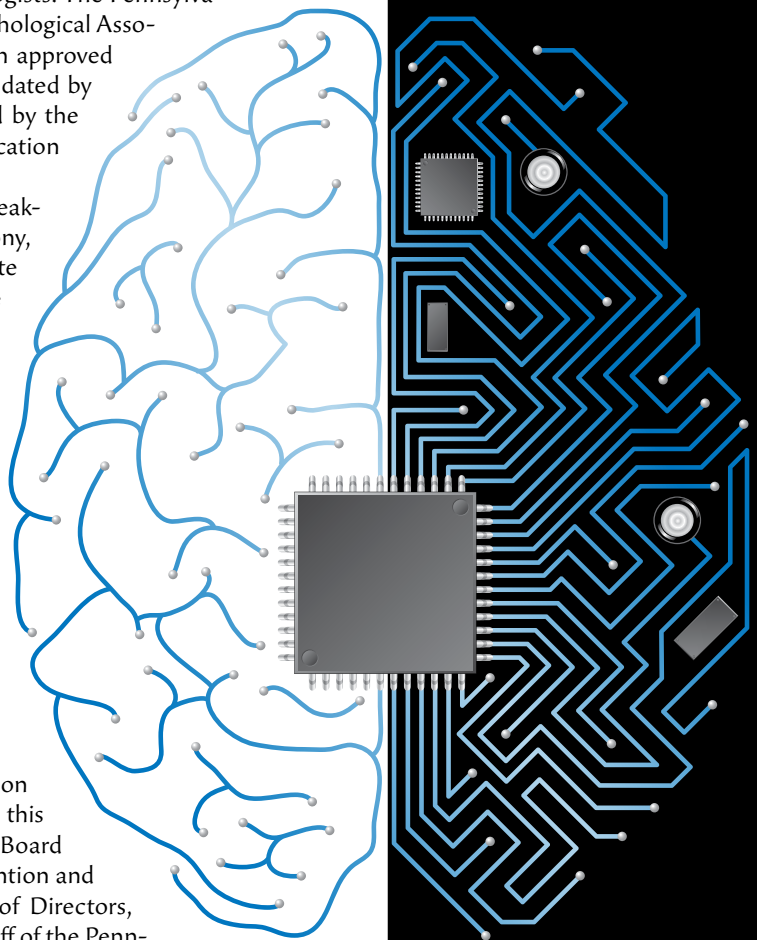
GREETINGS, PPA MEMBERS AND COLLEAGUES. On behalf of the Board of Directors and the Convention Committee, I am pleased to invite all of you to the PPA 2010 Annual Convention where the theme is "Psychology in the Digital Age: Choices and Opportunities." Technological advances affect all of us and whether or not you know the difference between an iPod or a turntable it is important for psychologists to keep abreast of the latest integrations between technology and psychological science. Therefore, under the leadership of Convention Committee Chair Dr. Marijo Lucas, we have developed a program that demonstrates the knowledge and expertise of Pennsylvania psychologists who keep us abreast

of the ways psychology and technology inform each other for the benefit of our patients. Our president, Dr. Steven Cohen, has called upon all of us to come and learn the latest in psychological knowledge while we learn how PPA is advocating for psychologists around the state. The Annual Convention is also a wonderful time to connect or re-connect with friends and colleagues.

Our continuing education program contains a blend of workshops from psychologists across the state that address the latest in psychological science in multiple disciplines including clinical, child and adolescent, neuropsychology, industrial/organizational, legal and ethical, psychopharmacology, and many more. Additionally we have programs addressing how psychology uses current technology to advance practice. We have programs dealing with hot topic ethical issues and also programs for students and early career psychologists. The Pennsylvania Psychological Association is approved by the American Psychological Association to provide continuing education for psychologists; is an approved provider for Act 48 continuing education requirements as mandated by the Pennsylvania Department of Education; and is recognized by the National Board of Certified Counselors to offer continuing education for professional counselors.

Other venues include our Annual Psychopharmacology Breakfast Symposium, the Psychologically Healthy Workplace ceremony, and the Psychology in Pennsylvania Luncheon. Our keynote speaker this year is Dr. James Bray, the 2009 president of the American Psychological Association. At the Town Hall Plenary Session on Friday, June 18, you can find out how PPA is working to serve the needs of psychologists across Pennsylvania and how you can become involved. You will also hear from Dr. Steven Cohen, president, and Dr. Mark Hogue, president-elect, on how PPA will continue to provide leadership and guidance as we continue to move toward future challenges. As always, our convention provides ample opportunities for fun as we learn and grow with each other. On Thursday, June 17, join us for our "Mind-Body River Walk" at 7:30 a.m. Our Friday night event this year is "Electronic Game Night" where you will see how psychologists can have fun using technology while doing the robot dance. Come join us for a time of fun, laughter, and friendship as we learn and grow at this year's convention.

Finally, this is my last article to you as Program and Education Board chair, as my term is completed during the convention this year. I want to thank all of you for allowing me to serve on the Board of Directors and it has been a pleasure working with the Convention and Continuing Education Committees. On behalf of the Board of Directors, Program and Education Board, Convention Committee, and staff of the Pennsylvania Psychological Association, I invite you to join us in our annual celebration as we join together to expand our neural networks and have lots of fun doing it. 



PSYCHOLOGY IN THE DIGITAL AGE: CHOICES AND OPPORTUNITIES

Invited Addresses and Workshops

Marijo Lucas, Ph.D.
Chair, Convention Committee



Just as the tragedy of 9/11 brought with it an abrupt realization of the importance of cell phones in bringing instant connections to loved ones, the Haiti disaster brings an awareness of the power of technology to bring networks of support together at moments when the need is greatest and immediate. Many victims and families were able to cry out for help and find support through their cell phones. Families were able to seek help from media, who were able to visually connect them through the Internet. And as we observed the tragedy unfolding, we soon had the opportunity to make

donations with a simple text message. Within days the Red Cross had already received over \$10 million from text message donations.

How have these technologies changed our perceptions of ourselves, relationships, and our practice? Once again we are aware of the incredible potential for technology to assist in reaching out to others in need. How can these technologies assist us in expanding our applications of psychology practice? What are the implications of these technologies to the future of psychology? What ethical considerations do we need to make when expanding our marketing, outreach, record keeping and our practice with new technologies? We are excited to have several notable invited guests to speak to us regarding these and other changes, decisions, and considerations.



Dr. James Bray

Dr. James Bray, the 2009 president of APA, will provide our **Keynote Address**, Thursday, June 17, on the *Future of Psychology*. Dr. Bray's address will be based on his Presidential Summit on the Future of Psychology Practice. In May 2008 he brought leaders from psychology, business, consumers of services, economics, insurance, medicine, and politics together to transform the practice of psychology. He will address the important issues that have emerged out of this work and in light of national health-care reform.




Mr. Rich Brooks

Mr. Rich Brooks, president of flyte new media, PPA's Web-design company, will be the speaker at our **Psychology in Pennsylvania Luncheon**, Friday, June 18, on *Web Marketing Best Practices for Psychologists*. Mr. Brooks will address how to market yourself effectively and ethically using the Internet. He also will present a workshop, *Web Marketing and Social Media for Psychologists*, on Friday afternoon.



Dr. Richard Lord

Dr. Richard Lord, Chief Science Officer for Metamatrix Clinical Laboratory, and co-editor of the reference book *Laboratory Evaluations for Integrative and Functional Medicine*, will provide our **Psychopharmacology Breakfast Symposium**, Wednesday, June 16, on *The Gut-Brain Connection from Stool and Urine Testing*. Using case examples, Dr. Lord will highlight how microbial and organic acid testing can uncover a variety of factors which restrict recovery in psychiatric patients.

We hope you will join us for these and other exciting programs dedicated to our opportunities and challenges as we integrate new technologies into our personal lives and into the ways in which we respond to those in need. 

Convention 2010... A Preview

Marti Evans, Conference and Communications Manager

PPA's Annual Convention will be held June 16-19, 2010, at the Hilton Harrisburg. This year's theme is **"Psychology in the Digital Age: Choices and Opportunities."** How appropriate for the new decade!

The digital age presents psychology with many choices and opportunities to enhance our knowledge and effectiveness. We are faced with new

means for communication, record keeping, assessment, training, marketing, and research. With these new opportunities we also face new ethical, legal, privacy, and security considerations. Whether you are reluctant to use technology or use it often, we each need to learn about the uses, clinical implications, and ethical issues related to emerging technologies and applications.

The Convention Committee is pleased to announce that there will be no convention registration fee increase for 2010. PPA's Annual Convention is an excellent time to connect with colleagues and friends and learn the latest psychological knowledge in addition to the initiatives designed to enhance psychology as a discipline and profession in Pennsylvania. Join us!

REGISTRATION FEES

To help you properly plan and budget for the convention, the following convention registration fees will apply. If you need a preliminary convention registration form for employer's check-processing/approval, please contact Marti Evans at the PPA office (717-232-3817 or mevans@PaPsy.org).

	EARLY REGISTRATION (postmark by May 20)		REGULAR REGISTRATION (postmark after May 20)	
	All	Daily	All	Daily
PPA Member	\$310	\$185	\$380	\$210
Non-Member	495	270	550	305
First Year Post-Doc PPA Member	45	35	50	40
Full-Time Student Member	45	35	50	40
Full-Time Student Non-Member	90	70	100	75
Senior PPA Member	195	120	210	135
Senior Non-Member	320	195	365	210
Spouse/Family/Guest	60	40	65	50



HOTEL ACCOMMODATIONS

The Hilton Harrisburg will be the host for the 2010 Annual Convention. To make a reservation, call 1-800-HILTONS or 717-233-6000. When phoning for accommodations, please identify yourself as a participant in the PPA Annual Convention to obtain the group rate: \$120 single/double (plus tax). The group rate is protected until May 20. If the room block is sold out before May 20, reservations will be accepted on a space availability basis only, and the rate you are charged will be higher. **Please make your reservation early! We expect the room block to sell out before May 20. NOTE: Last year the room block sold out in April.**

RESEARCH POSTER SESSIONS

The Science-Practice Research Poster Session, in addition to the Student Research Poster Session, will be held on Friday, June 18. We will be featuring research by psychologists and graduate and undergraduate students in colleges and universities throughout Pennsylvania.

The Convention Committee will be accepting poster submissions from now until April 1. Copies of both applications are available in the Convention section of our Web site, www.PaPsy.org.

Members of the Convention Committee will review all submissions and notify students regarding acceptance by May 10, and will select three submissions by that date for \$200 prizes (Undergraduate, Graduate, and Existential-Humanistic), which will be awarded during the Student and ECP Awards Ceremony on June 18.

Submissions for the Science-Practice Research Poster Session will also be judged by May 10, and recognized during the Awards Ceremony.

2010 CONVENTION COMMITTEE

Tad Gorske, Ph.D.
Pittsburgh
Chair, Program and Education Board

Marijo Lucas, Ph.D.
Rockland, DE
Chair, Convention Committee

Ellen Adelman, Ph.D.
Elkins Park
Eleonora Bartoli, Ph.D.
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Beatrice Chakraborty, Psy.D.
Murrysville
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Peckville
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Newark, DE
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Havertown
Gail Karafin, Ed.D.
Doylestown
Charles Lajeunesse, Ph.D.
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Mark McGowan, Ph.D.
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Danielle Mink, MSW
Middletown
Cathy Petchel, M.A.
McMurray
Stephanie Phillips, Psy.D.
Mars
David Rogers, Ph.D.
Hershey
Jacqueline Sallade, Ed.D.
Lewisburg
Beatrice Salter, Ph.D.
Philadelphia
Adam Sedlock Jr., M.S.
Uniontown
Linda Taylor, Ph.D.
Wynnewood
James Vizza, Psy.D., M.Div.
Johnstown

PROGRAM TOPICS

The 2010 Convention Committee wishes to thank those who submitted proposals for this year's convention, and we encourage those whose programs were not accepted to send a proposal next year.

The following is a list of the convention program topics, presenters and tentative daily schedules as of January 15, 2010. Program descriptions will be listed in the convention program booklet that will be mailed in April.

The members of the Convention Committee (see sidebar, page 9) and I will continue to work hard to ensure a quality convention. We look forward to greeting you in person in June.

WEDNESDAY, JUNE 16

MORNING

21st Annual Psychopharmacology Breakfast Symposium

*The Gut-Brain Connection from
Stool and Urine Testing*
Richard S. Lord, Ph.D., CSO

- *Psychotherapy with African American Clients: Case Study of a Couple*
Cheryll Rothery, Psy.D.
- *Computerization in Neuropsychology: Is Luria Rolling Over in His Grave?*
Mark Hogue, Psy.D.
Tammy Kordes, Ph.D.
- *Internet Addiction: Diagnosis, Treatment and Future Trends*
Kimberly Young, Psy.D.
- *Nutrition and Mental Health: Clinical Application of the Evidence*
Carmen Ranalli Morrison, Ph.D.
- *An Introduction to a Coherent Theory and Practice of Group Psychotherapy (morning and afternoon)*
Ray Naar, Ph.D.
- *Using Rubrics to Assess Student Papers in the Collegiate Classroom*
Charles Lajeunesse, Ph.D.

AFTERNOON

- *Electronic and Traditional Bullying by Middle and High School Students*
Gail Cabral, IHM, Ph.D.
Rebecca Kozlosky, Ph.D.
- *Find Authoritative Content for Your Articles and Presentations*
Pauline W. Wallin, Ph.D.
- *The Therapeutic Value of Suffering: Eastern and Western Approaches*
John Monopoli, Ph.D.
- *Black Man-White Woman from the South: Experiences and Implications*
Tommy Davis, Ph.D.
Marijo Lucas, Ph.D.
Steven M. Palma, B.A.
Alex Gould, B.A.
- *The Adolescent in Family Therapy: Harnessing the Power of Relationships*
Joseph A. Micucci, Ph.D., ABPP
- *Ethical Mistakes: From Consultation Room to Classroom*
John D. Gavazzi, Psy.D., ABPP
Richard F. Small, Ph.D., ABPP
Michele R. Miele, M.A.
- *Transforming Inpatient Mental Health Services: A Recovery Oriented System*
Audrey Townsel, Psy.D., MHA
Luke Amann, M.S.

EVENING

- *The State Board of Psychology in Pennsylvania for the 21st Century*
Members of the Pennsylvania State Board of Psychology:
Patricia Bricklin, Ph.D.
Salvatore Cullari, Ph.D.
Karen Edelstein, Psy.D.
Joseph French, Ed.D.
Ennis Littrell
Catherine Maxaner
Eve Orlow, Ed.D.
Alex Siegel, J.D., Ph.D.
- *Collaborative Process for Resolution of Divorce, Custody and Family Disputes*
Joanne Harrison Clough, Esq.
Thomas Gould, Esq.
Dawn Sunday, Esq.
- *Collaborating with Medical Providers: The Land of Opportunity for Psychology*
Carol A. Salacka, Psy.D., MSN

THURSDAY, JUNE 17

MORNING

Keynote Address
A New Day for Psychological Practice
James Bray, Ph.D.

- *Psychologically Healthy Workplace Awards Ceremony: Understanding the Challenges in Today's Workplace*
Rex Gatto, Ph.D.

AFTERNOON

- *From Dollars to Doughnuts: Money Issues in Treating Eating Disorders*
Karyn L. Scher, Ph.D.
- *Beyond Unconditional Positive Regard: Understanding How Oppression Still Affects Us*
Jill P. Braun, M.Ed.
Lavanya Devdas, MSW
Andrea Nelken, Psy.D.
- *Bring Positive Psychology to Clinical Work with Children and Adolescents: Strategies for Implementing Across Settings*
David Palmiter Jr., Ph.D., ABPP
- *Applying Positive Ethics to Difficult Patients*
Samuel J. Knapp, Ed.D.
John D. Gavazzi, Psy.D., ABPP
- *Developing an Employee Characteristic Profile*
Rex Gatto, Ph.D.
- *What Does Race Have to Do with It? What You Always Wanted to Know About Race and Culture but Were Afraid to Ask*
Eleonora Bartoli, Ph.D.
Beatrice R. Salter, Ph.D.
Tim Barksdale, M.A., M.S.
- *Utilization of Personal Stories as a Means to Cultural Competence*
Hue-Sun Ahn, Ph.D.
Takako Suzuki, Ph.D.
Jeffrey L. Sternlieb, Ph.D.
- *The Sanctuary Model and Its Impact on the Outcomes for Delinquent Youth*
Joseph Lavoritano, M.A., M.Ed., NCSP
James Black, Ph.D.
Martha Tavantzis, MSW, LCSW

- *Counter-Transference in Adult and Juvenile Forensic and Correctional Evaluations and Treatment*
Leslie N. Sandler, Ed.D.
Marilyn E. Sandler, M.A.
- *Compassion Fatigue in Treating Eating Disorders: From Counter-Transference to Self-Care*
Karyn Scher, Ph.D.
- *Pathographies: On the Uses of Cases*
Edward Zuckerman, Ph.D.
David L. Zehrung, Ph.D.
Elizabeth A. Ciaravino, Ph.D.
Jeanne M. Slattery, Ph.D.

FRIDAY, JUNE 18

"Early Career Psychologists and Psychology Students Day"

MORNING

*Town Hall Plenary Meeting
Psychology in the Digital Age:
Choices and Opportunities*
Steven R. Cohen, Ph.D.
Mark A. Hogue, Psy.D.
Thomas H. DeWall, CAE
Samuel J. Knapp, Ed.D.

AFTERNOON

- *Web Marketing and Social Media for Psychologists*
Rich Brooks
- *The Ethics of Self-Care and Safety Issues in Working with Clients*
Donald McAleer, Psy.D., ABPP
Molly Haas Cowan, M.A.
Simone Gorko, M.S.
- *Issues and Innovative Solutions to Clinician-Clergy Collaboration*
William Davis Jr., Psy.D.
Brenda Ingram-Wallace, Ph.D.
Tommy Davis, Ph.D.
- *Student Advocacy, Leadership and Participation in the Pennsylvania Psychological Association of Graduate Students*
Marie C. Weil, M.A.
Christina B. Shook, M.A.
Amanda G. Carr, M.Ed.
- *Ethical Issues when Psychologists Communicate with the Public: How to Present Psychology in an Effective and Ethical Fashion*
David Palmiter Jr., Ph.D., ABPP


- *Hot Topics in High Conflict Divorce and Child Custody: Parent Alienation, Munchausen's Syndrome, Sexual Abuse Allegations*
Jane Iannuzzelli, M.Ed., M.A.
Eve Orlow, Ed.D., M.A.
Steven R. Cohen, Ph.D.
- *Traumatic Brain Injury Assessment and Rehabilitation: A Continuum of Care*
Tad T. Gorske, Ph.D.
Jamie E. Pardini, Ph.D.
- *The Good, The Bad, The Cultural Ethics of School Psychology*
Yuma I. Tomes, Ph.D.
- *Intergenerational Conflicts among Immigrant Families*
Richard F. Small, Ph.D., ABPP
Lavanya Devdas, MSW
Takako Suzuki, Ph.D.
- *Sexual Diversity: What Every Psychologist Needs to Know*
Steve K. D. Eichel, Ph.D., ABPP
Debra Lee Laino, M.S., M.Ed., DHS
- *Organ Jargon: Emotional Pain Expressed Physically*
Rebecca LaFountain, Ed.D.

SATURDAY, JUNE 19**MORNING**

- *Psychology Licensure and Mobility: What Students and Professionals Need to Know*
Alex M. Siegel, J.D., Ph.D.
- *Geropsychology Training Initiative: Pennsylvania's Service Provisions for Diverse Older Adults*
Amanda Carr, M.Ed.
William Davis Jr., Psy.D.
Angella Egwaikhide, M.A., M.S., C.P.R.P.


- *The First E-mail Constructed MMPI-2 Workshop*
Robert M. Gordon, Ph.D.
- *Treating Depression and Related Medical Disorders Using Short-Term Psychodynamic Therapy*
Stephen Shapiro, Ph.D.
- *Behavioral Health Needs of National Guard and Reserve after Deployment*
Michael Crabtree, Ph.D.
Mary Schaffer, M.A., MPC
- *Generation Y in the Workplace: Managing the "Me First" Generation*
Nicole Lipkin, Psy.D., MBA
- *An Introduction to Hypnotic Assessment (morning and afternoon)*
Ronald Pekala, Ph.D.
- *Cognitive-Behavioral Treatment of Post-Traumatic Stress Disorder (morning and afternoon)*
David Yusko, Psy.D.
Aaron Brinen, M.A.
- *5 Simple Steps to Access Your (and Your Clients') Intuition*
Jeanette Samenen, Ph.D.

AFTERNOON

- *Disability Laws: Implications for College-Bound Students with Learning Disabilities*
Valerie Vogel Ross, B.S.
Marie C. McGrath, Ph.D.
- *The Forgiveness Solution: Enhancing Enlightened Well-Being and Decreasing Stress*
Phillip Friedman, Ph.D.
- *Pennsylvania's Response to Disaster and Emergency: The Nickel Mines Amish Shooting*
Simone Gorko, M.S.
Brenda Pittman, B.A. 



The Pennsylvania Psychological Association supports efforts to make our conferences friendly for our environment. We encourage our attendees, presenters, and exhibitors to use products that are made from recycled, recyclable, and rapidly renewable materials.

Our meeting sites are making good-faith efforts to accommodate the growing demand for "green" options. 

Clinical Presentations and Workshops: A Buffet of Choices and Opportunities

Cathy C. Petchel, M.A., Ellen M. Adelman, Ph.D., and Beatrice H. Chakraborty, Psy.D.



Cathy C. Petchel, M.A.



Ellen M. Adelman, Ph.D.



Beatrice H. Chakraborty, Psy.D.

Our 2010 PPA Annual Convention will serve up a clinical buffet of opportunities to enhance our diagnostic insight and knowledge and fine-tune our treatment strategies and techniques.


In their workshop, *Behavioral Health Needs of National Guard and Reserve after Deployment*, Dr. Michael Crabtree and Mary Schaffer will guide us through their timely research regarding mental health concerns and needs of our service men and women. In addressing treatment for post traumatic stress disorder, Dr. David Yusko and Aaron Brinen will discuss *Prolonged Exposure Therapy for PTSD: An Evidence-Based Treatment*. Simone Gorko and Brenda Pittman will look at *Pennsylvania's Response to Disaster and Emergency: The Nickel Mines Amish Shooting*.

Hospitals and medical facilities serve as key sites in the rehabilitation of our clients. Drs. Paula Humphries, Audrey Townsel and Roselyn Watkins will walk us through the *Transforming of Inpatient Mental Health Services: A Recovery Oriented System*. *Traumatic Brain Injury Assessment and Rehabilitation: A Continuum of Care* presented by Drs. Tad Gorske and Jamie Pardini allows us to view brain injury from early presentation to rehabilitation. Dr. Ray Naar will delve into group therapy with his 6-hour workshop, *An Introduction to a Coherent Theory and Practice of Group Psychotherapy*.

Three workshops will address the Mind-Body connection. In *Nutrition and Mental Health: Clinical Application of the Evidence*, Dr. Carmen Ranalli Morrison will explore the impact of nutrition and physiological factors on the presentation of psychopathology. Dr. Karen Scher will teach us about the relationship between eating disorders and dysfunctional financial behaviors in her workshop, *From Dollars to Doughnuts: Money Issues in Treating Eating Disorders*. And we will learn about the somatic expression of psychological issues from a holistic perspective in the workshop *Organ Jargon: Emotional Pain Expressed Physically* from Dr. Rebecca LaFountain.

Two workshops that will help us access our inner psychological world will also be presented. *How to Talk to You: The Dialogue in Your Head Affects Your Clients, Your Family and Yourself*, presented by Dr. Anita Simon, will help us learn how to use SAVI, a system for understanding and changing our self-talk. Dr. John Monopoli will present, *The Therapeutic Value of Suffering: Eastern and Western Approaches* where he will teach us about mindfulness practices as they are used in Eastern traditions and in current Western psychological approaches.

Dr. Ron Pekala provides an *Introduction to Hypnotic Assessment*, a phenomenologically based inventory found to increase the treatment effect of cognitive-behavioral psychotherapy. Dr. Robert Gordon is offering *The First E-mail Constructed MMPI-2 Workshop* and you (yes, you) can digitally co-create this workshop with him in advance, online. *Pathographies: On the Uses of Cases*, presented by Drs. Ed Zuckerman, David Zehrung, Elizabeth Ciaravino, and Jeanne Slattery, is a broad range of multidisciplinary cases designed to guide your effectiveness in training, supervision and self-education. Dr. Jeanette Samanen will provide you with *5 Simple Steps to Access Your (and Your Clients') Intuition*. *Treating Depression and Related Medical Disorders Using Short-Term Psychodynamic Therapy* is Dr. Steven Shapiro's contribution to the program, demonstrating a therapeutic approach ideally suited for patients typically considered unmotivated, resistant or untreatable. *The Forgiveness Solution: Enhancing Enlightened Well-Being and Decreasing Stress* presented by Dr. Philip Friedman will teach you powerful techniques, through transformational forgiveness imagery.

Join us on the threshold of stepping into a new decade, exploring the role of technology and digital effectiveness, as we remain devoted to our pursuit of client success through translational research, accurate assessment, evidence-based treatment modalities, and cognitive rehabilitation techniques. 

CONVENTION THEME

Psychology in the Digital Age: Choices and Opportunities

Mary Pat Cunningham, M.A.



The Convention theme for 2010 selected by our president, Steve Cohen, Ph.D., is "Psychology in the Digital Age: Choices and Opportunities."


Whether you are quite knowledgeable with the newest technologies or reluctant to learn, it is

here to stay. Technology brings with it endless opportunities yet many challenges and concerns.

The convention will provide for us three workshops that will address many of these opportunities and concerns. First, our incoming president, Mark Hogue, Psy.D., and Tammy Kordes, Ph.D., will demonstrate for us how computerization mixes in the field of neuropsychology in a 3-hour workshop entitled, *Computerization in Neuropsychology: Is Luria Rolling Over in His Grave?* Historically, neuropsychology emphasized more qualitative than quantitative outcomes. Today, technology has increased standardization and quantitative assessment. They will point out pros and cons of computerization in neuropsychology along with ethical issues and practice opportunities.

Kimberly Young, Psy.D., offers us insight on Internet addiction in her workshop entitled, *Internet Addictions: Diagnosis, Treatment and Future Trends*. Dr. Young will instruct us on how to diagnose and treat this addiction using assessment tools and treatment techniques geared for this population.

Our ever popular **Town Hall Plenary Meeting** will devote some time on the report of the President's Cyber Technology Task Force (comprised of 15 PPA members) on how technology will affect our practice, students, research, privacy, record keeping, and ethics.

The Convention Committee invites you to yet another informative convention where PPA leadership continues its goal of keeping its members abreast of changing times and its impact on our professional lives. 

Children, Teens, Family, and School Workshops

Gail R. Karafin, Ed.D.




The Pennsylvania Psychological Association is pleased to be able to bring you interesting and informative workshops related to children, teens, family, and schools. In keeping with this year's theme, "psychology in the digital age," Drs. Gail Cabrai and Rebecca Kozlosky, will be presenting on *Electronic and Traditional Bullying by Middle and High School Students*. An increasingly problematic referral in schools and private practitioners' offices, this workshop recommends appropriate assessment questions related to

the presence of bullying or being bullied and discuss gender and cultural differences. To conclude, the presenters will summarize interventions on local and community levels.

There are two workshops related to treating children, teens, and their families. Dr. David Palmiter is presenting on *Bringing Positive Psychology to Clinical Work with Children and Adolescents: Strategies to Implement Across Settings*. Dr. Palmiter discusses proactive parenting strategies to avoid the development of disorders. He promotes techniques for integrating strategies from positive psychology into traditional clinical work with children and adolescents, and their families. A second program in this area includes *The Adolescent in Family Therapy: Harnessing the Power of Relationships*. Dr. Joseph Micucci has prepared a workshop directed toward family therapy with teens using the power of relationships. He describes concepts related to the symptomatic cycles in families, and describes principles and techniques for working with these families. He develops eight steps for carrying out an enactment in the family session.

For the school psychologists, Dr. Yuma Tomes will be presenting on *The Good, The Bad, The Cultural Ethics of School Psychology*. His workshop will explore cultural diversity issues as they impact on psychologists in school and clinical settings. There will be a brief review of the legal and ethical issues addressing concerns of working with culturally diverse individuals and supervisees in multiple settings. The participants will gain greater awareness of the impact of their own cultural background on their work.

And finally, there are a number of programs related to forensic issues when working with children, teens, and their families. There are two workshops directed toward family litigation: *Collaborative Process for Resolution of Divorce, Custody and Family Disputes*; and *Hot Topics in High Conflict Divorce and Child Custody: Parent Alienation, Munchausen's Syndrome, and Sexual Abuse Allegations*. For those interested in forensic work with adolescents, we have *Counter-transference in Adult and Juvenile Forensic and Correctional Evaluations and Treatment*. The workshop entitled *Disability Laws: Implications for College-Bound Students with Learning Disabilities* reviews issues related to the higher education for students with learning differences. With regard to diversity and cultural issues, there is a presentation exploring the *Intergenerational Conflicts among Immigrant Families*. We look forward to these informative presentations. 

Support

PPA Continuing Education Programs!

Attention All Psychology Students!

Marie C. Weil, M.A., Chair, Pennsylvania Psychological Association of Graduate Students (PPAGS)



The Pennsylvania Psychological Association is eager to provide support to psychologists of the future and believes that students add a valuable contribution to our conferences. Our Annual Convention is one of the largest and most widely attended of any state psychological association in the nation.

I am excited to share some of the great programs and events available for psychology students and those interested in early career issues at the 2010

PPA Annual Convention! Convention activities provide a unique opportunity for all to gather and network. PPA offers affordable registration fees for students and first year post-docs.

Workshops that promise to be valuable for students and ECPs include:

- *Student Advocacy, Leadership and Participation in the Pennsylvania Psychological Association of Graduate Students (PPAGS)* will be presented by Marie C. Weil, M.A., Christina B. Shook, M.A., and Amanda G. Carr, M.Ed. This panel of PPAGS members will share their leadership experiences, promote student involvement and encourage new leaders from within PPAGS. PPAGS is the student organization of PPA and works to increase the professional development of graduate students by involving them in PPA's activities, advocacy and governance.
- *I Just Graduated! Now What? Issues Facing Early Career Psychologists* features Michelle Herrigel, Psy.D., co-chair of PPA's Early Career Psychologists Committee, and Allyson Galloway, Psy.D. (see description in the following article).

As students and early career psychologists, we attempt to navigate our way from novice to seasoned professional. Each year the PPA Annual Convention hosts activities designed specifically for beginning psychologists.

- *The Student Research Poster Session* on Friday provides a great opportunity to observe the scientific endeavors of fellow students. The Student Research Poster Session is open to any graduate or undergraduate student currently involved in qualitative or quantitative psychological research. If you would like more information about the opportunity to demonstrate your research skills, visit http://www.PaPsy.org/resources/ce_convention/convention/html.
- The new *Student and ECP Awards Ceremony* on Friday morning will include the Research Poster Session Awards, Foundation Education Awards, new Early Career Psychologist Award, new Student Multiculturalism Award, and the PPAGS Community Service Project Award. The master of ceremonies will be Steven Cohen, Ph.D., president of the Pennsylvania Psychological Association.
- The *Early Career Psychologist and Student Networking Reception* on Friday evening provides an opportunity to relax and network with peers and practicing professionals.
- The *Student Volunteer* program offers full-time psychology students willing to assist in the convention registration area at least 4 hours during the 4-day convention a complimentary convention registration.

We guarantee that our Annual Convention will be an enjoyable learning and networking experience for all students. Join us! 

Programs for Early Career Psychologists

Allyson L. Galloway, Psy.D.




As an early career psychologist (ECP), I am excited to share some of the great programs available for early career psychologists and those interested in early career issues at the 2010 PPA Convention! As you

know, an ECP is defined by APA as any individual within the first 7 years post-graduation with a doctoral degree in psychology. PPA has significantly increased its focus on early career issues in recent years and this year's convention surely demonstrates PPA's commitment to ECPs.

Alex M. Siegel, J.D., Ph.D., will present *Psychology Licensure and Mobility: What Students and Professionals Need to Know*, which promises to be very helpful in navigating the licensure and credentialing issues that so many of us are concerned about, focusing on the common requirements for licensure in different areas, and offering tips to make mobility easier.

Nicole Lipkin, Psy.D., MBA, will present *Generation Y in the Workplace: Managing the "Me First" Generation*, and will discuss the changing corporate landscape and the strengths and weaknesses brought to the workplace by this new workforce, as well as coaching strategies for working with this population.

Also, I have the honor of co-presenting *I Just Graduated! Now What? Issues Facing Early Career Psychologists* with Michelle Herrigel, Psy.D., co-chair of PPA's Early Career Psychologists Committee. In this workshop we will focus on post-doctoral and licensure requirements, approaches for studying for both the national and Pennsylvania state licensure exams, as well as the role of mentorship and volunteerism for the ECP.

These and many other workshops promise to be valuable for ECPs and anyone interested in early career issues. I hope to see you at the convention in June, and hope to meet you at the Student and Early Career Psychologist Networking Reception on Friday evening! 

Business Psychology

Linda W. Taylor, Ph.D.




Each year, PPA presents the Psychologically Healthy Workplace Award to outstanding Pennsylvania business organizations that foster psychological health, productivity, and employee engagement in the workplace. This

year's award winners will again be introduced by Dr. Rex Gatto, president of Gatto Associates in Pittsburgh. Dr. Gatto is an author and a frequent presenter on workplace issues at PPA and to business and psychology groups in this country and abroad, and has given radio and television presentations to audiences across the U.S.

This year's ceremony will also feature a short video, produced by APA, discussing the Psychologically Healthy Workplace Award, as well as a presentation by Dr. Gatto on the topic *What Is Industrial and Organizational Psychology and Its Impact on the Workplace?* The 1-hour awards ceremony will conclude with presentations by the award winners as to the challenges facing the workplace today.

At the convention, Dr. Gatto will also present a 3-hour workshop, *Developing an Employee Characteristic Profile*. In these difficult economic times, with job losses headlining the news, businesses need ways to help them hire, retain, develop, and promote the right employees for the right positions. Dr. Gatto will discuss and present an approach for assessing employee characteristics used in job function or analysis. His presentation will include the battery of assessments used to create a characteristic profile utilized by human resources personnel in the interviewing process or for position advancement. Topics to be covered in the workshop include HR law concerning workplace assessment, and the different batteries that may be used for employee assessment.

Dr. Gatto's workshop will also feature a discussion of how business clients can use the services of mental health professionals in assessing prospective and current employees. Small group discussions will focus on how psychologists can coach people after the employee characteristic profile has been written. Developing skills such as those covered in this workshop will surely be of interest to many psychologists in practice today. 

Ethics Workshops: Keeping Pace with Ethical and Legal Parameters for Practice

Mark R. McGowan, Ph.D., NCSP




The PPA Annual Convention promises to be as interesting and informative as ever! With professional practice continuing to evolve and change, this year's convention will provide participants with a wide variety of opportunities to explore new dimensions, revisit their current practices, and stay current with professional standards. Four outstanding workshops and presentations will be offered.

Using ethical principles as a framework for meeting the challenges and demands placed upon practitioners by problematic clients will be the focus of Drs. John Gavazzi and Sam Knapp in their presentation entitled *Applying Positive Ethics to Difficult Patients*. This 3-hour workshop promises to be an interactive experience that will consider how psychologists can rely on overarching ethical principles to create a therapeutic framework that optimizes treatment efficacy and positive outcomes when working with clients.

The importance and value of learning from our mistakes will be the focus of Drs. John Gavazzi, Richard Small, and Michele Miele, M.A., in their presentation, *Ethical Mistakes: From Consultation Room to Classroom*. This 3-hour workshop will explore the differing perspectives on ethical mistakes and how to avoid them in practice. Drawing on existing frameworks such as the acculturation model and consultation model, participants will have the opportunity to engage in the ethical decision-making process through the use of vignette analysis as well as evaluate the utility of using ethical mistakes in context of training and supervision.

Dr. David Palmiter Jr., who serves as the Communications Board chair for PPA and state representative to APA's Public Education Campaign (PEC) program, will present *Ethical Issues When Psychologists Communicate with the Public: How to Present Psychology in an Effective and Ethical Fashion*. This 3-hour workshop will address professional and ethical practices when working with different forms of media, including the utilization of social networking sites and promoting psychology within current public education efforts.

Lastly, members of the Pennsylvania State Board of Psychology will offer a 3-hour workshop entitled, *The State Board of Psychology in Pennsylvania for the 21st Century*. This presentation will focus on significant changes in the Professional and Vocational Standards, with particular emphasis being given to exploring the potential ethical issues that arise from using new technology in practice. Participants will be provided the opportunity to learn about how the board handles complaints against psychologists and renders decisions through the use of case studies.

In closing, it is important to note that ethics workshops can also be found on specialty topics ranging from cultural ethics in school psychology to dealing with divorce and child custody issues. So, be sure to check out the upcoming schedule for the 2010 Annual Convention. I look forward to seeing you there! 

Academic Workshops

Charles LaJeunesse, Ph.D.



The PPA Annual Convention clearly has much to offer those who work in academic settings, either full- or part-time. The first program in this area will be presented

by Valerie Vogel Ross and Dr. Marie McGrath and is entitled *Disability Laws: Implications for College-bound Students with Learning Disabilities*. The focus of this program is to examine the issues that face students with learning disabilities as the attempt to transition from high school to college. They plan to invoke three legislative acts in terms of how they impact postsecondary educational institutions and protect those with learning disabilities.

Next, Dr. Chuck LaJeunesse of Misericordia University will present *Using Rubrics to Assess Student Papers in the Collegiate Classroom*. In this 2-hour session he will show how to use rubrics to take the mystery out of writing assignments in the college setting. Rubrics help students understand your grading criteria, and also give students an opportunity to employ the rubric in critiquing a classmate's paper and having another critique their paper, giving them important feedback. This process promotes high level thinking and demonstrably better papers.

Dr. William Davis Jr., Amanda Carr, and Angella Egwaikhide will present a 2-hour session on *Geropsychology Training Initiative: Pennsylvania's Service Provision for Diverse Older Adults*. They plan to discuss demographics that speak to the growing demand for providing psychological services to diverse older adults. They address the competencies needed to engage this population, discuss regional training sites and address the most innovative strategies for acquiring this additional training.

Clearly, this year's convention shows enough diversity in its offerings so that those not working in a clinical setting, such as myself, will have more options from which to choose. ☺

Forensic Workshops

Adam C. Sedlock Jr., M.S.



This year's forensic choices are varied with content and expertise.

Counter-transference in Adult and Juvenile Forensic and Correctional Evaluations and Treatment, presented by Leslie N. Sandler, Ed.D., and Marilyn E. Sandler, M.A., will address how psychologists working in corrections face the challenging yet unavoidable element of counter-transference, daily. This phenomenon of injecting personal thoughts and feelings into a situation with a patient/inmate whose behavior has caused

serious harm to others and who may continue manifesting inappropriate behavior can cause frustration, decreased empathy, and, ultimately, burnout. The 3-hour workshop will identify the elements of counter-transference; analyze the elements of counter-transference so that psychologists may be aware of which they, individually, may be most vulnerable; recognize the potential for counter-transference before seeing a patient/inmate for the first time; and plan their interactions with an inmate/patient to minimize the occurrence of counter-transference.

The Sanctuary Model and Its Impact on the Outcomes for Delinquent Youth will identify mechanisms for changing a residential institution for delinquent youth from an environment that stressed "what was wrong with the youth" to "what had happened to the youth," and how this impacts care. This workshop will document positive outcomes for youth that also reduce recidivism post-discharge. Presenters Joseph Lavoritano, M.A., M.Ed., NCSP, James Black, Ph.D., and Martha Tavantzis, MSW, LCSW, will demonstrate the Sanctuary Model of trauma-informed care which has risen to be an evidence-supported methodology for addressing the needs of youth in residential care. The 3-hour workshop is for a child/adolescent client base with a treatment orientation.

The Collaborative Process For Resolution of Divorce, Custody, and Family Disputes, with presenters Joanne Harrison Clough, Esquire, Dawn Sunday, Esquire, and Thomas Gould, Esquire, from the Collaborative Professionals of Central Pennsylvania, will demonstrate how collaborative law provides families with a safe non-adversarial process to resolve legal and emotional issues present in the dissolution of marital or non-marital relationships. The 3-hour workshop will aid participants in learning the fundamentals of collaborative practice and the role of allied professionals in this process, including the need for coaches and child specialists. Participants will be able to identify individuals who may be well suited for the collaborative process in addition to identifying the benefit of the collaborative process in meeting the emotional needs of patients going through divorce or separation as compared to the litigation process.

A 3-hour panel discussion, *Hot Topics in High-Conflict Divorce and Child Custody: Parent Alienation, Munchausen's Syndrome, Sexual Abuse Allegations*, presented by Jane Iannuzzelli, M.Ed., M.A., Eve Orlow, Ed.D., M.A., plus PPA President Steven Cohen, Ph.D., will give psychologists the tools they need to identify, diagnose, and treat families experiencing the estrangement or alienation of one parent from the children. Participants who treat or evaluate children and families of divorce will gain knowledge in identifying symptoms and methods of treatment to recognize these forensic problems and respond confidently. Participants will be able to identify at least one difference between valid parental responses and contrived allegations, list the symptoms of the child subject to an alienating parent, such as Munchausen's syndrome, and false sexual abuse allegations. Participants will also identify specific personality traits included in the pathology of the parents, utilize two differing treatment modalities to reunite children from alienated parents, plus list three areas from the ethical guidelines applicable to treating and evaluating families experiencing estrangement or alienation.

Overall, I believe the 3-hour workshops will meet the interest of all with a forensic frame of mind! ☺

Looking to Enhance Your Multicultural Competence? Don't Miss These Workshops!

Stephanie Phillips, Psy.D., and Eleonora Bartoli, Ph.D.

During this year's Annual Convention, PPA will once again offer a variety of workshops aimed at expanding knowledge and awareness in all who choose to participate! In addition to workshops on our central theme, "Psychology in the Digital Age: Choices & Opportunity," this year's convention program includes an ever-growing number of workshops focused on multicultural issues. Some of these workshops are designed to enhance your awareness of multicultural dynamics affecting clinical work, while others will provide you with concrete tools to assist you in conducting therapy with diverse clients.

If you wonder how to best broach the topic of race and culture with your clients, you may want to attend the workshop entitled *What Does Race Have to Do with It? What You Always Wanted to Know about Race and Culture but Were Afraid to Ask*. In this workshop, Eleonora Bartoli, Ph.D., Beatrice Salter, Ph.D., and Tim Barksdale, M.A., M.S., will discuss how issues related to "race and culture are often uncomfortable but central factors impacting the nature and effectiveness of our work with clients." By showing and discussing a documentary, the presenters will lead attendees to "describe the racial and cultural factors that positively and negatively impact race relations," learn ways to engage in racial and cultural discussions with clients, and recognize the impact of racial and cultural issues on the therapeutic relationship.

Hue-Sun Ahn, Ph.D., Takako Suzuki, Ph.D., and Jeffrey Sternlieb, Ph.D., will present a workshop that will prove invaluable in allowing you to use your own or multicultural biography to enhance your multicultural competence. Their workshop is entitled *Utilization of Personal Stories as a Means to Cultural Competence*. It is primarily an experiential workshop that will "increase [participants'] understanding of their own cultural values/worldviews and their impact on their personal and clinical work."

Cheryll Rothery, Psy.D., will present a workshop entitled *Psychotherapy with African American Clients: Case Study of a Couple* in order to "foster empathy, identify relevant cultural, gender, and family issues, and create culturally informed interventions for working with African American clients in individual, couples, and family therapy." This workshop will enhance your ability to understand the experience of culturally diverse couples, consider issues surrounding culturally competent



Dr. Stephanie Phillips



Dr. Eleonora Bartoli

clinical assessments, and become more aware of the role of your own worldviews in treatment.

Taking a systemic perspective, *Black Man-White Woman from the South: Experiences and Implications*, will be presented by Tommy Davis, Ph.D., Marijo Lucas, Ph.D., Alex Gould, B.A., and Steven Palma, B.A. The presenters of

this workshop will integrate their own personal and clinical experiences with current psychological and sociopolitical theory and research, in order to "highlight clinical, academic, social, and political implications" of their findings for both "clinical and political decision-making."

In another workshop entitled *Intergenerational Conflicts among Immigrant Families*, Takako Suzuki, Ph.D., Lavanya Devdas, MSW, and Richard Small, Ph.D., ABPP, will share their knowledge of the importance of intergenerational conflicts among immigrant families, due to acculturation and other psychological and multicultural factors. By participating in this workshop, you will gain valuable knowledge that will assist you in serving the increasingly large immigrant population of Pennsylvania. We also recommend attending the workshop, *Sexual Diversity: What Every Psychologist Needs to Know*. Steve K. D. Eichel, Ph.D., ABPP, will discuss a topic that "is one of the most important areas of human functioning" while at times difficult to address in all of its complexity in clinical work. This workshop will present current research on sexual diversity as well as current, science-informed information about sexual dysfunction and intervention. Finally, Jill P. Braun, M.Ed., Lavanya Devdas, MSW, and Andrea Nelken, Psy.D., will conduct a unique workshop where, through both didactic and experiential means, they will lead participants in an exploration of the power and dynamics of privilege and oppression to enhance psychologists' ability to conduct social justice work through their professions.

And this is not all! Additional multiculturally focused workshops are offered within the rubrics of school psychology (*Cultural Ethics of School Psychology*), academic workshops (on geropsychology training), and in our poster sessions. Make sure not to miss those as well! As you can see, this year's convention offers a plethora of exciting opportunities to enhance your multicultural competence and expand professional lives. We hope you will be able to join us! 📺

Workshops for Practice Development and Therapist Wellness

Jacqueline Sallade, Ed.D.




If you're looking for new ways to diversify and expand your practice along with promoting wellness in yourself and your clients, the 2010 Annual Convention offers a handful of opportunities to learn how to do so.

Do you write articles or give presentations for the general public? When researching your topic, are you overwhelmed with millions of irrelevant search engine hits? In Dr. Pauline Wallin's workshop, *Find Authoritative Content for Your Articles and Presentations*, you will learn strategies and shortcuts (online and offline) to help you hone in on high-quality, authoritative content in a jiffy. You will also learn how to use scientific and other specialty search engines to locate scholarly content.

As psychologists we are sometimes in dangerous situations with clients. How do we keep ourselves safe? How do we handle conflicts between caring for ourselves and maintaining ethical standards regarding our clients? In *Self-Care and Safety Issues in Working with Clients*, Donald McAleer, Psy.D., ABPP, Molly Haas Cowan, M.A., and Simone Gorko, M.S., will introduce the subject of ethical self-care and safety to workshop participants.

In the *Issues and Innovative Solutions to Clinician-Clergy Collaborations* workshop presented by Drs. William Davis Jr., Brenda Ingram-Wallace, and Tommy Davis, the benefits and complexities of clinician-clergy collaborations will be discussed. They will also address the use of technology and other relationship-building strategies to foster more effective collaborations between clinicians and clergy.

Carol A. Salacka, Psy.D., MSN, Lt.Col., U.S. Army (Retired), will discuss the many opportunities available to psychologists to work with primary and specialty care providers in her workshop, *Collaborating with Medical Providers: The Land of Opportunity for Psychology*. She will also review the research in support of collaborative practice; examine the current models; and gain the knowledge, skills and attitudes necessary to develop a collaborative practice.

As you can see, the convention continues to offer a wealth of ideas to "think outside the box," to promote psychology's many benefits to our clients, to help us identify our stress, and to take better care of ourselves. 

Convention Provides an Antidote for the "Hurried Psychologist"

David A. Rogers, Ph.D.




Each year I am privileged to write the article promoting the less serious/more fun side of the Annual Convention. Those of you who have read the previous articles will know that some years I have detailed specifics about the restaurants, attractions, shopping, and the various activities that the Capital City has to offer. Many of those attractions are still available. I have also emphasized that the Annual Conven-

tion Committee (under the continued competent leadership of Dr. Marijo Lucas) has taken its mission seriously by providing attendees with excellent CE experiences and opportunities for FUN!!! In fact, this year a special Social Event Subcommittee has been formed that is developing even more detailed plans for fun (beyond the Mind-Body River Walk and networking with colleagues/vendors) that will fit into this year's theme of "Psychology in the Digital Age: Choices and Opportunities." Can anyone say "Wii"?!

In preparing this article I was also coincidentally reflecting on my daughter Kate's Penn State University master's thesis topic entitled "More Than Child's Play: Educating Parents on the Importance of Play." (Please bear with me...this may be a bit tangential but I have a point!) Kate's literature review reflected on Elkind's (2001) clarion call about the potential damage being done to children who were being "hurried" through their childhood. Kate summarized, "play is important to development because it increases social, emotional, physical, and cognitive abilities in children." As I was reflecting on Kate's thesis and on this article, I was struck by the reality that many of us are "Hurried Psychologists." We understandably struggle to meet the demands of our profession while also balancing personal responsibilities/demands and trying to find/fashion time for ourselves (inferential personal disclosure intended).

Needless to say, if we are to "practice what we preach," we psychologists need to make and take the time to "play, have fun, change pace, goof off, engage in spasso (Italian for play)..." The Annual Convention will be providing opportunities to do just that! While the details cannot be revealed quite yet, I can assure you that the special Annual Convention Social Event Subcommittee will be working hard on your behalf to provide an array of options during the convention for you to feel refreshed and no longer be a "Hurried Psychologist." Our goal is to help you be able to affirm the notion that "play is simple joy that is a cherished part of childhood" (Ginsburg, 2007) and that it is also a "vital part of being an adult who is employed as a psychologist!"

We look forward to seeing you there! 

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Advancing Mindfulness in a Twittering World

Andrea M. Delligatti, Ph.D., with Debi Dunn, MBA



Dr. Andrea M. Delligatti

I admit that I am the last person who should be writing anything about technology. Many of us “seasoned” psychologists have been catapulted into an electronic age that spawns fear and ambivalence. While I value the capabilities of word processing, computerized test scoring, e-mail, and, yes, even Wikis, I have not been convinced that social networking is worth all the aggravation. I have a Web site and a profile on LinkedIn. What more could I need?

This was my conversation with a holistic health practitioner I met at a women’s conference in November as we sat in a presentation about social media. When we met for lunch a few weeks later, she was considering taking the plunge but had her reservations!

As a humble teacher of ancient movement therapies known as qigong and tai chi, she lives, teaches, and values a simple lifestyle that includes meditation, stress reduction techniques, proper nutrition and plenty of exercise. But how is it possible to live in the moment, stay centered, focused, and “mindful,” when your cell phone has become your new communication appendage? It no longer just rings to let you know someone wants to talk to you, but it beeps and buzzes, leaving you messages in e-mail, Facebook, LinkedIn, Twitter and more!

Everyone, it seems, is caught up in “social networking” and it requires a “new” vocabulary to help us communicate with each other in our fast-paced “e-world.” For example, you have “friends” on Facebook who can friend and “unfriend” you if they don’t like what you have to say. Facebook tends to be very social and people display little filtering in what they will post for others to see. Of course for psychologists, Facebook provides lots of data for our study of human behavior! Additionally, people can “fan” you on a Facebook Fan Page, which is more professional in content and

used to advertise your services, events, or products. People “follow” you on Twitter where you can present public education messages, send people to your Web site for information, or advertise your business. The downside is Twitter’s 140-character limit within which to type a succinct message to capture attention or inspire others. LinkedIn began as a professional networking site utilized by larger companies to find talent. Currently, small businesses and professionals are developing a presence on LinkedIn. Finally, there is a blog that is regularly updated with a “post” of a short paragraph on some topic.

Now, if you are like me, your head is spinning. There are not enough hours in the day to deal with all these different means of electronic communication. Well, guess what? You can do the work just once because all can be linked together through a “platform” like Typepad for a blog and TweetDeck to manage your Facebook “Profile” and Twitter “tweets.” Other platform options are available, but regardless of which ones you choose, the “icons” for Facebook, Twitter, LinkedIn, and blog should be “published” on your Web site home page and below your signature on e-mails so visitors can easily click over to these other sites. Believe it or not, this social networking is all about building communities of people who are interested in you and what you have to offer. The best part of all this is that it’s free online publicity for your business and for psychology! But, before you jump into any social networking site, please take the time to learn how to set up a secure and private environment through the use of the site’s “privacy settings.”


So, back to my friend, Debi, who as a “mindfulness” practitioner, perceives the social networking movement as “a return to the ‘yin’ (feminine, emotional, social) vs. the ‘yang’ (masculine, less emotional, more independent) attitude.” In some respects, it is a refreshing change, but in others, it is bothersome information overload. She noted that some qigong, tai chi, and mindfulness masters do not subscribe to this twittering world, while others have jumped in with both feet. So the real

question is “should she succumb?” Here is her story:



Debi Dunn, MBA

There was just no way in “my mindful qigong world” that I had “time” to tweet, friend, fan, or even follow all of these communities of people. But that all changed with my first tweet! I already had the requisite Web site, www.theheartofhealing.com, to which I attached a blog. I set up a Facebook page and created a separate fan page called, “The Heart of Healing.” I already had a LinkedIn site for Debi Dunn. So, the last step was setting up Twitter, “DebiDunnQigong,” and TweetDeck to manage Twitter and Facebook...and probably more that I haven’t even figured out yet. I sent out a 140-character “tweet” message and within 24 hours got followers from Australia, the UK, and Singapore. Overnight, I went global! A woman from the UK, a book publisher, read my tweet, checked out my fan page on Facebook, went to my Web site, read my blog, and then e-mailed me to see if I would be on her BlogRadio show in April 2010 to talk about Qigong and my new Tranquil Journeys meditation CD. “Oh,” she added, “I would be glad to offer your two new Qigong DVDs and meditation CD for sale on my Web site here in the UK if you would like! By the way, if you are planning to publish a workbook, I can also help you with that through my new Web site for authors.” If this were not enough excitement, the following day I received an e-mail that said, “The Dalai Lama is now following your tweets on Twitter.” That’s all the confirmation I needed! All is tranquil in my world...now back to my meditation...ohmmmm.

Maybe we psychologists will feel a bit more “tranquil” if we put aside our fears and embrace this new technology to advance our businesses, our profession, and psychology’s value to the public. After this past year, I’m ready to give it a try! 

The Psychodynamic Diagnostic Manual: A Clinically Useful Complement to the DSM

Nancy McWilliams, Ph.D.

The *Psychodynamic Diagnostic Manual* (PDM Task Force, 2006) was created by a task force chaired by the child psychiatrist Stanley Greenspan, M.D., in cooperation with the American Psychoanalytic Association, the International Psychoanalytical Association, the Division of Psychoanalysis (39) of the American Psychological Association, the American Academy of Psychoanalysis, and the National Membership Committee on Psychoanalysis in Clinical Social Work. Guided by a steering committee chaired by Robert Wallerstein, M.D., the PDM summarizes issues not covered in the DSM that are critical to psychotherapists. In brief, it redirects our attention from a proliferation of syndromes to the whole suffering person.



Background

In recent decades, Dr. Greenspan became concerned over the gradual diminishment in professional discourse of in-depth, biopsychosocial case formulation and individual treatment planning. He noted that, notwithstanding their laudable efforts to create a more reliable and less theoretically biased classification system than prior taxonomies, the creators of DSM-III and its successors had inadvertently contributed to a mental health culture in which complex, inter-related clinical problems are reduced to

a string of descriptions of behaviors and symptoms, represented ultimately as co-morbid diagnoses, that make it difficult to conceptualize integrated and comprehensive therapies for many kinds of suffering.

Although the authors of DSM-III, III-R, IV, and IV-TR explicitly disavowed the aim of guiding psychotherapy, the descriptive, noninferential language of those manuals (see Klerman, Vaillant, Spitzer, & Michels, 1984, for the prototypical debate on the paradigm shift) has come to define the categories in which therapists think and talk, as well as the categories by which outsiders such as third parties construe the clinical process. Our understanding of psychotherapy has tilted toward the observable and readily quantifiable. Therapy results have come to be measured almost solely in terms of symptom-relief rather than in terms of the patient's growth toward overall mental health (as defined by such concepts as ego strength, affect tolerance, resilience, and related concepts, all of which have been subject to a long history of disciplined clinical observation and well designed research).

In the present climate, the claim that there is no empirical evidence supporting psychoanalytic concepts and treatments has been frequently made, most stridently by insurers reluctant to support long-term care. It is true that there are very few randomized controlled trials (RCTs) of more complex and open-ended treatments, in contrast to the number of RCTs on more short-term, symptom-focused therapies. This state of affairs reflects both cost factors and the complacency of the psychoanalytic community in its long heyday. But despite the relative scarcity of relevant RCTs, there is abundant scientific data supporting traditional psychodynamic and humanistic treatments (e.g., Blomberg, Lazar & Sandell, 2001; Gabbard, Gunderson & Fonagy, 2002; Smith, Glass, & Miller, 1980; Seligman, 1995) and their underlying assumptions about defense (e.g., Cramer, 2006; Vaillant, 1992), personality (e.g., Singer, 2005; Westen, 1998), affect

(e.g., Fonagy, Gergely, Jurist & Target, 2002; Lewis & Haviland-Jones, 2004), attachment (e.g., Mikulincer & Shaver, 2007; Wallin, 2007), and other areas relevant to treatment. Contemporary neuroscientists (e.g., Schore, 2003; Solms & Turnbull, 2002) are also weighing in on the biology of the traditional talking cures.

Empirical studies repeatedly demonstrate that two variables, *individual personality factors* and the *quality of the therapeutic relationship* (Ackerman & Hilsenroth, 2003; Blatt & Zuroff, 2005; Norcross, 2002; Wampold, 2001), account for the lion's share of variance in psychotherapy outcome. The strengths of the psychodynamic tradition have been its appreciation for individual differences (often framed as neurotic, borderline, and psychotic organizations interacting with defensive patterns and personality styles) and its explication of relationship factors (working alliance, resistance, transference); in other words, psychodynamic formulations and treatments have emphasized precisely the domains that empirical studies have concluded are critical to outcome.

A tradition that has stimulated, responded to, and benefited from a vast body of research in areas critical to clinical process cannot reasonably be said to be without empirical foundation. Dr. Greenspan wanted to make this point and to keep alive in the mental health disciplines the psychodynamic appreciation of individual differences, subjective experience, maturational issues, complexity, and inferences about meaning. While acknowledging that recent editions of the DSM have greatly facilitated certain kinds of research, he felt that clinical reliance on that manual, in the absence of more inferential, dimensional, contextual, biopsychosocial assessment, has skewed our field in disturbing and even countertherapeutic ways, and he concluded that a more practitioner-oriented classification system might compensate for this effect.

Accordingly, with help from leaders of the sponsoring organizations, he established task forces on adult personality

Nancy McWilliams, Ph.D., teaches psychoanalytic theory and therapy at the Graduate School of Applied & Professional Psychology at Rutgers University. She was Associate Editor of the PDM. Address: 9 Mine Street, Flemington, NJ 08822, nancymcw@aol.com

structure and pathology, adult symptom syndromes, childhood and adolescent syndromes, assessment of capacities that comprise mental health, and outcome research. He also solicited original papers from noted psychoanalytic scholars and researchers (e.g., Blatt, Dahlbender, Fonagy, Leichsenring, Shevrin, Wallerstein, Westen). Despite considerable theoretical diversity among task force members, Dr. Greenspan set a collaborative tone and produced the PDM in just two years.

Overview of the PDM

The document that emerged consists of sections on (1) adults, (2) children and adolescents, and (3) infants and toddlers, followed by the compilation of solicited papers. The first two sections are divided into chapters on (a) personality differences (level and type of personality organization); (b) profile of mental functioning (components of mental health such as reality testing, ego strength, affect tolerance, self and object constancy, self-esteem, moral sense, authenticity, mentalization, reflective functioning); and (c) characteristic subjective experiences (affective, cognitive, somatic, interpersonal) of patients suffering DSM disorders. There are three extensive case formulations at the end of each section and clinical vignettes throughout. The longer case narratives illustrate how individuals with similar DSM diagnoses may require significantly different treatments, depending on their unique characteristics and situations.

The longer case narratives illustrate how individuals with similar DSM diagnoses may require significantly different treatments, depending on their unique characteristics and situations.

In the infant section, there are detailed descriptions of early problems in different realms (e.g., interactive disorders, regulatory-sensory processing disorders, sensory modulation difficulties, sensory discrimination difficulties, neurodevelopmental disorders of relating and communicating). These rich and specific depictions suggest the

limitations of more reductionistic, currently popular childhood diagnoses and have clear practical utility for clinicians treating pre-schoolers and their families.

So far, the clinical community's most positive responses to the PDM concern the infancy section. Negative reactions include the complaint that this putatively developmental document lacks a section on the elderly, an omission that will be corrected in the next edition. (Remarkably, it did not occur to anyone on the steering committee – most of whom were over 60 – to include a section on geropsychiatry. Denial is evidently not the exclusive prerogative of our patients.)

Citations of empirical and clinical literature pervade the PDM, but the solicited papers ("Conceptual and Research Foundations"), comprising about half the manual, provide its overall epistemological grounding. These essays are stand-alone articles – most are excellent summaries of their topic areas, especially useful for therapists in training – that cumulatively undermine the perception that there is no science behind the psychodynamic and humanistic therapies.

A Hypothetical Clinical Illustration

What does the PDM add to clinical assessment? Consider a patient complaining of longstanding episodes of severe anxiety unrelated to identifiable triggers. At intake she discloses a trauma history, bouts of bingeing and purging, regular marijuana use, anorgasmia, fainting spells, periods of amnesia, and recurrent physical afflictions (unexplained headaches, back pain, menstrual pain, gastrointestinal bloating). Describing her in DSM terms would require several "comorbid" diagnoses and rule-outs, perhaps including Generalized Anxiety Disorder, Bulimia Nervosa, Cannabis Abuse, and PTSD or Amnesic Disorder Not Otherwise Specified. The general impression might be of someone with Somatization Disorder (300.81), but the patient reports only three pain syndromes, not the four required. This collection of labels captures little that a therapist needs to know in order to help such a person.

Via the PDM framework, a more holistic picture might emerge. In terms of personality (P Axis), this woman would be seen as organized psychologically at the borderline level (discriminated from

the DSM's Borderline Personality Disorder), with notable problems in affect regulation, self and object constancy, and self-esteem that she has handled by compulsive and addictive behaviors, dissociation, and a characterological tendency to somatize. In the Personality section, characteristics of individuals in the borderline range are summarized, and their implications for therapy are discussed (e.g., clear contracts, structure, here-and-now focus, weathering affect storms). Somatizing patients are described phenomenologically in a narrative, and then in terms of their constitutional/maturational patterns and characteristic preoccupations, affects, pathogenic beliefs, and defenses. The manual suggests the import of such dimensions for psychotherapy.

The patient's profile of mental functioning (M Axis) might reveal her as someone with strengths in regulation, attention, and learning, but notable deficits in quality of internal experience, capacity for relationships and intimacy, and affective experience, expression, and communication. Such an assessment orients a therapist to areas of treatment emphasis.

Finally, the therapist could hone his or her empathic attunement to the patient's suffering by consulting the section on the subjective experience of symptoms (S Axis) in the areas of anxiety, eating disorders, substance abuse, and trauma. For example, with respect to eating disorders, *affective states* noted in the PDM include feelings of being starved for care; feelings of failure, shame, and ineffectiveness; and fears of abandonment, aggression, and loss of control. *Cognitive patterns* include a sense of being inadequate, incompetent, and unloved, and a preoccupation with being young. *Somatic states* include numbness, confusion about bodily sensations, inability to judge the stomach's fullness, and a sense of physical emptiness that may express a more inchoate psychological emptiness. *Relationships* may be affected by issues of control and perfectionism, secrecy about the eating disorder, compliance, and ingratiation.

Concluding Comments

The PDM deals very little with etiology but extensively with the phenomenology of psychopathology. Its language is

Continued on page 23

The Scientific Renaissance of Psychodynamic Therapy

Robert M. Gordon, Ph.D., ABPP

John Simmons (2009) in *The Scientific 100* ranked the top six scientists of all time: Newton, Einstein, Bohr, Darwin, Pasteur and Freud. Most of Freud's ideas have strong empirical support (Bornstein & Masling, 1998; Westen, 1998) as does the psychodynamic formulation of psychopathology (PDM Task Force, 2006), and psychoanalytic treatment (de Maat et al., 2009; Leichsenring & Rabung, 2008). Despite this, however, there is still a great deal of resistance to a psychodynamic psychology.



Empirical research in psychoanalysis began early on. Otto Fenichel in 1930 studied the results of 721 patients in psychoanalysis at the Berlin Institute. He found that psychoanalysis was very effective for the neurotic patients, but not so effective for the psychotic patients. Psychoanalytic researchers continued publishing empirical effectiveness and process studies with refinements in theory and treatment over the years, but this research has been largely ignored by academic psychologists.

Effectiveness research in naturalistic settings fell out of favor to the randomized controlled trials (RCTs). This methodology greatly favored behavioral and cognitive treatments that were very short-term and that focused on single symptoms that could be easily studied under stricter laboratory conditions. In the early 1990s APA's Division of Clinical Psychology considered RCTs the "gold standard," and they advocated only those treatments supported by RCT research. Psychodynamic researchers had problems with this sort of research on ethical and theoretical grounds. For example, they questioned the ethics of offering only a long-term control group to people in need of treatment. They also questioned the value of trying to understand personality piecemeal in a laboratory setting when it is a complex, dynamic, adaptive system,

and then trying to validly generalize the results to naturalistic settings.

Psychodynamic researchers wanted to study complex syndromes that involved affects, memories, cognitions, behaviors, preconscious fantasies, temperament, attachment and object internalizations, and defenses in a dynamic interaction. They were interested in studying polysymptomatic patients with underlying personality disorders that are common to actual practice, as well assessing increasing mental capacities such as ego resiliency. For example, I found a powerful effect size increase of .80 in the MMPI Ego Strength scale after about 3 years of psychoanalytic psychotherapy with 55 polysymptomatic borderline level patients (Gordon, 2008).

Cogan & Porcerelli (2005), using the *Shedler-Westen Assessment Procedure* (SWAP) as an outcome measure, found that patients who completed psychoanalysis as compared to those in the beginning stage of psychoanalysis, not only had significantly lower scores in symptoms such as depression, anxiety, guilt, shame, feelings of inadequacy, and fears of rejection, but also significantly higher scores in inner strengths and capacities. These included an increased capacity for pleasure, ability to achieve, empathy for others, interpersonal effectiveness, and increased resiliency.

Eventually, a new generation of psychoanalytic researchers began to do ethically sound, high quality, short-term and long-term effectiveness (field) and efficacy (RCT) research. They still had trouble getting published. In an insightful move, relabeling "psychoanalytic" as "psychodynamic" circumvented much of the prejudice (I use the terms interchangeably), and funding and publication outlets slowly opened up.

Psychodynamic therapy (PDT) is now the more favored term researchers use for referring to all the forms of psychoanalytic treatment. Blagys & Hilsenroth (2000) found seven features that reliably distinguished PDT from other therapies: (1) focus on affect and expression of

Eventually, a new generation of psychoanalytic researchers began to do ethically sound, high quality, short-term and long-term effectiveness (field) and efficacy (RCT) research.

emotion, (2) exploration of attempts to avoid distressing thoughts and feelings, (3) identification of recurring themes and patterns, (4) discussion of past experience (developmental focus), (5) focus on interpersonal relations, (6) focus on the therapy relationship, and (7) exploration of wishes and fantasies.

Shedler (2010) recently summarized the efficacy research on psychodynamic therapy in the *American Psychologist*. The publication in this journal marks a historic turn of events for psychoanalytic science. He reported that RCT studies supported the efficacy of PDT for depression, anxiety, panic, somatoform disorders, eating disorders, substance-related disorders, and personality disorders. He compared the meta-analytic studies of PDT with the meta-analytic studies of CBT and related therapies. The psychodynamic outcome studies tended to have similar or larger effect sizes as the non-psychodynamic treatments, which are usually considered empirically supported. This should not be surprising since PDT targets more personality constructs at a deeper level with more intensive treatment than the non-psychodynamic treatments.

Further, while the benefits of the non-psychodynamic empirically supported therapies tend to decay over time (Westen, Novotny, & Thompson-Brenner, 2004), PDT has enduring benefits. For example, Bateman & Fonagy

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(2008) found that 5 years after treatment completion (and 8 years after treatment initiation), 87% of patients who received "treatment as usual" continued to meet diagnostic criteria for Borderline Personality Disorder, compared to 13% of patients who received PDT. No other treatment for personality pathology has shown such enduring benefits.

Shedler presented five independent meta-analyses showing that the benefits of PDT not only endure but also increase with time. That is, the patients not only had significant symptom reduction that held up over time, but also acquired increased mental capacities that allowed them to continue in their maturation over the years. Additionally, Shedler presented several studies that showed that it is the psychodynamic process that predicted successful outcome in cognitive therapy rather than the pure cognitive aspects of the treatment.

Now, more than 100 years since Freud's ideas of a dynamic unconscious rattled American psychologists, there is more than enough evidence to require graduate schools to teach psychodynamic theory and treatment as scientifically valid and essential to our understanding of psychology. 

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THE PDM

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accessible; jargon is minimal. Although the authors felt they should acknowledge their collective bias by titling the manual "psychodynamic," they tried to make it readable by, and useful to, practitioners of other orientations, such as biological, cognitive-behavioral, and family systems perspectives.

The PDM is available from Amazon for \$19.25. By self-publishing it, the steering committee was able to make it affordable to students and beginning therapists. Its authors invite criticisms and suggestions from the mental health community. The manual is a work in progress that will be only as valuable as it is clinically and pedagogically useful. 

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Psychodynamic Therapy: What's New?

Diane Snyder, M.A., dssnyder@carlow.edu



As a psychology graduate student, the term “psychodynamic psychotherapy” conjures up images of Freud sitting behind his patient, smoking a pipe, while his patient

lies on a couch free associating. But is that really what psychodynamic theory and therapy are all about? How relevant is psychodynamic therapy today?

As I embarked on my quest to answer these questions, my first dilemma was deciding where to begin. I soon discovered the Pittsburgh Psychoanalytic Center. Being one of more than 70 psychoanalytic institutes and societies worldwide, the Pittsburgh Psychoanalytic Center trains psychoanalysts and provides psychoanalytic education programs. One major goal of psychoanalysis is to create a major and pervasive change in the character structure. Psychoanalysis is a long-term, in-depth psychotherapeutic technique, but is a technique that is representative of other psychodynamic therapies?

My next course of action was to locate practicing psychologists with a psychodynamic orientation. I had the good fortune to come across Dr. Elizabeth Bogado Briganti, Psy.D, who practices in Philadelphia. I shared with Dr. Briganti my image of Freudian therapy and my questions about the psychodynamic approach. She shared that the Freudian approach is the classical approach and it is where psychodynamic theory started. Today, however, psychodynamic therapy is much different than it was in Freud's time, almost a century ago. There have been many theorists that have made significant contributions to psychodynamic theory after Freud, including Mahler, Klein, and Anna Freud, to name a few. For Dr. Briganti, one of the most appealing aspects of the psychodynamic approach is that it is an insight-oriented therapy. Psychodynamic therapy provides the client with the opportunity to learn about herself and thus create a deep, profound, and lasting change.

Dr. Briganti then steered me toward another resource. In 2007, the Institute for Relational Psychoanalysis of Philadelphia opened up with their first class. In speaking with Dr. David Mark, Director of the Institute, I learned a great deal about what relational psychoanalysis has to offer. Dr. Mark credits Greenberg and Mitchell's book, *Object Relations in Psychoanalytic Theory* (1983), as laying the foundation for relational psychoanalysis.

The term “psychodynamic” sounded like a dinosaur to me: old-fashioned, outdated, a significant part of the history but not the future of psychology.... I was wrong.

Relational psychoanalysis, in contrast to classical psychoanalysis, sees relationships as central organizing features of understanding personality and psychopathology. In relational psychoanalysis, the analyst, at times, discloses the feelings she experiences in that moment. According to Dr. Mark, this is essential for proper therapy, because this type of disclosure assists in mutual recognition. Relational psychoanalysts believe that mutual recognition is essential to the growing process. That is, we grow and develop by knowing someone and being known by that same someone. This is in contrast to the concept of mirroring from more traditional psychoanalysis. Relational psychoanalysis also integrates concepts from broader social movements such as constructivism and feminism, thus bringing new life to psychoanalysis.

Satisfied with my greater understanding of both classical and relational psychoanalysis, I was still left with many questions about psychodynamic therapy. After all, most psychodynamic therapists are not analysts. What exactly do psychodynamic therapists do? They provide long-term therapy, right? Well, not necessarily.

In 1990, Drs. Lester Luborsky and Paul Crits-Cristoph, of the University of Pennsylvania, published *Understanding Transference: The Core Conflictual Relationship Theme Method* (CCRT), and ushered in a new era in psychodynamic therapy. Brief psychodynamic psychotherapy gained momentum in the 1990s. CCRT is but one model of brief psychodynamic therapy. Brief psychodynamic therapy is not psychoanalysis crammed into a time-limited number of therapy sessions. Rather, brief psychodynamic therapy has two main goals: symptom relief, and significant but limited character change.

“Brief therapy” is definitely one of the buzzwords of our time. Another is “evidence-based treatments.” How does psychodynamic therapy hold up in today's world of evidence and empirically based treatments? According to Dr. Jonathan Shedler, of the University of Colorado at Denver, psychodynamic therapy holds up quite well. Shedler (2010), in his examination of meta-analyses of treatment outcome studies argues that there is considerable empirical support for both psychodynamic treatments and concepts. Shedler further argues that the discrepancy between the scientific evidence and the perception of a lack of empirical support may be the result of bias.


So as I began my journey into the world of psychodynamic therapy, I admit I was a skeptic. The term “psychodynamic” sounded like a dinosaur to me: old-fashioned, outdated, a significant part of the history but not the future of psychology. I admit I carry many negative stereotypes; equating psychodynamic therapists with older, arrogant, white males. I doubted this journey would yield anything of value for me, a future psychologist.

I was wrong.

My journey began with Freud and classical psychoanalysis. I went on to discover the richness of psychodynamic therapy. I have come to appreciate the focus on the expression of human emotions, the focus on the client's attempts to avoid anxiety, the exploration of recurring themes, and the exploration of the client's

past relationships. I've learned that psychodynamic theory has evolved significantly since its inception and that it does have a place in today's world of brief and evidence-based treatments. I've discovered that psychodynamic therapy is alive and well in Pennsylvania, and although today's psychodynamic therapy looks far different from Freud's therapy, I am left with a new respect for the man who set this all in motion.

So, am I a convert? Not quite. While Freud was a great thinker for his time, there was another great thinker who left a substantial mark on the world: Alfred Adler.

But that's a discussion for another time... 

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Welcome New Members

We offer a hearty welcome to the following new members who joined the association between November 1 and January 31, 2010.

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Philadelphia, PA





Does Psychodynamic Theory Have a Place Within the School?

Susan Edgar-Smith, Ph.D., and Ruth Baugher Palmer, Ph.D.
sedgarsm@eastern.edu & rpalmer@eastern.edu

As educators of school counselors and school psychologists, we teach our graduate students the importance of collecting assessment data from multiple sources and making data-driven decisions through the use of objective, reliable, and valid measures. While maintaining objectivity is integral, we also must remember that the interpretations we derive from these tools necessitate clinical judgment; after all, these measures are inanimate tools that cannot speak for themselves. No matter how objectively we gather data, we need to interpret it through the perspective of an informed clinical lens. Yet, in this day of evidence-based practices, with a decided focus on observable, overt behaviors, there is wariness about clinical interpretations, especially those that reflect upon internal workings of the mind, emblematic in psychodynamic theory.

In our collective work, spanning many years both within and out of school settings, we have often observed unconscious conflicts and defenses at the root of our most difficult student cases. Though cognitive-behavioral techniques have garnered widespread empirical support on many fronts, they may be rendered ineffectual if the unconscious sources of problems are significant yet remain undiscovered and unaddressed (Shapiro, Friedberg, & Bardenstein, 2005). Indeed, Jeffrey Young, a well known clinical researcher, focused on adult cases in which traditional CBT interventions yielded poor outcomes and found that these cases usually involved chronic, difficult-to-treat patients who had underlying personality disorders and characterological issues (2003). Successful treatment of overt symptoms, then, required assessment of and intervention with these “underlying” issues, for which psychodynamic concepts are especially helpful. We contend that for the school clinician, obtaining an understanding of a student’s unconscious content can similarly be a vital step in facilitating improved student



Dr. Susan Edgar-Smith



Dr. Ruth Baugher Palmer

functioning. To demonstrate, we offer a brief case study of a middle school student we will call “Ashley.”

For several years, the deteriorating behavior of a gifted yet learning disabled (written expression) student puzzled her IEP team. Ashley accelerated in math, science, and gifted programming but often struggled in her English and social studies classes with “meltdowns” occurring whenever written assignments were demanded. These began in her early school years with mild refusals that progressed into severe confrontations in middle school. When asked to do writing assignments, Ashley would sob quietly in her seat, and when further prompted to begin the assignment, she would throw her books and on occasion shove her desk into the teacher.


On the surface, an FBA indicated that Ashley’s behavior served the function of avoidance of a difficult task. While allowing Ashley to use a computer on writing assignments and breaking down these assignments into chunks helped to alleviate some of these avoidance problems, she still exhibited seriously disruptive behavior. Understanding Ashley’s behavior from another viewpoint was needed, in particular, deciphering the motives behind the avoidant and rebellious behaviors. According to psychoanalytic theory, cognitive development in the conscious and unconscious minds remains drastically different. As the conscious mind matures, reason and logic develop while the unconscious mind can remain unrealistic and illogical, much like that of a young child (Freud, 1933). Ashley’s tantrum-like behavior reflected

the actions of a much younger child, and her reaction was disproportionate to the demands placed upon her. Through careful and respectful probing over several interviewing sessions, Ashley began to describe the source of her anxiety.

Although Ashley’s behavior rating scales showed a combination of clinical level internalizing and externalizing behaviors, it was only through the interviewing sessions that Ashley began to describe an overly restrictive superego that fomented excessively high expectations. Given her strong cognitive functioning in most every domain except writing, she felt ashamed of her deficiencies there and perceived herself as inferior to classmates that she viewed as ‘normal’ in comparison. She needed to learn how to judge herself less harshly for her perceived deficits. For years, the school personnel interpreted Ashley’s behavior as weak superego functioning (although not in those terms!), believing she exhibited a weak moral compass, had poor impulse control, and disrespected authority. Harsh reprimands (e.g., sending home hours of homework that was not completed in class) and response costs aimed at deterring behavior only fueled Ashley’s already marked feelings of shame and repeated use of the same unhealthy defense mechanisms (oppositional behaviors). Thus although objective testing helped demonstrate the outward manifestation of behaviors, an understanding of the internal dynamics contributing to this overt behavior was needed to better inform decisions about intervention strategies.

Exploring Ashley’s perception of others proved fruitful for approaching her problems in relationships. Object relations theory proposes that people can hold unrealistic and distorted images of others (and of self), images initially formed in problematic early interactions with significant others that persist in the present, even in the face of contradictory information (Greenberg & Mitchell, 1983). These distorted views can prompt

interpersonal reactions that may puzzle the onlooker who is the recipient of the reactions. In Ashley's case, throughout the years, teachers identified her as "lazy" and poorly motivated and often blamed her parents for poor limit-setting. Ashley grew to mistrust the authorities in schools and reacted strongly against anyone who tried to intervene. Her aggressive reactions baffled those attempting to offer her help and support. Uncovering the roots of her persistent mistrust of others proved crucial in helping Ashley (eventually) alter her views of and behavior with school personnel – and helped prevent use of interventions that (paradoxically) reinforced those distorted self and other views underlying the oppositional behaviors.

We contend that there is a beneficial place for psychoanalytical inquiry in a comprehensive social-emotional assessment. Once the unconscious cause(s) of a symptom is discovered, the goal is to help the student find a solution to the underlying problem that incorporates healthy coping mechanisms, an increased understanding of the self, and the development of healthy and positive schemas for relationships with others. Because of its focus on motivation, particularly unseen factors that may be expressed in outward behavior, psychodynamic theories offer school practitioners sound clinical hypotheses regarding possible meanings of overt behaviors, meanings that in many cases may afford clues to effective behavior change strategies. 

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2. State Board of Psychology approved provider
3. AMA-approved provider (if related to the practice of psychology)
4. College courses for credit (must be regionally accredited college and the course must earn semester or quarter hour credit)

NOTE: for Act 48 we can give 90 credit hours for one 3-credit-hour college course.

Teaching

1. Teaching anything that qualified under Workshops above
2. We can grant 1 contact hour for every 1 clock hour of instruction up to 15 hours per course
3. The number of contact hours awarded will be determined by dividing the number of contact hours by the number of instructors.
4. An individual course or workshop may be credited to an instructor only once every 4 years.

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1. 10 hours per article, book or chapter
2. If multiple authors, divide by number of authors
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Great Gifts from Google

Ed Zuckerman, Ph.D.



We all use it for searching but Google, the most inventive of companies, continues to give us new tools and services, many of which are very valuable to psychologists.

Herewith an overview and update.

Gmail

The key to the treasure that is Google is to have a Gmail address. You can have as many of these as you like for your multiple role functions and bounded identities; some to be given when you expect to be spammed, etc. You can have them all forward to one address for simplicity. They are permanent and keep your e-mail forever so you don't have to organize it but can just search it when you need something. Gmail has the best spam filtering, can be encrypted (https), and has huge storage (7 GB free, 20Gb more for \$5/year) for online backup or sharing as well as just mail.

Better finding

You already know the basics like putting a phrase in quotation marks to search for it and not for each of the words and inserting a minus sign in front of words to eliminate them from the search, but have you used “~” the same way to expand your search with synonyms for the search's words (keywords)? If you need a more complex set of exclusions click on “Advanced Search” in the upper right corner.

- ♦ Need a definition? Type “define:[the word]” without the brackets, and Google will return definitions with links to the dictionaries on the Web and lots more related words and phrases.
- ♦ Need to convert units of money, measurements, and others? Just type in, say “15 inches in centimeters” and hit “Search.” It will also replace a scientific calculator for trig functions and others.

- ♦ Missing just one word? You know the question but not the answer, most of the quotation, part of the title? Just type the part you know and put an asterisk in for the missing part.
- ♦ To show search results within a numerical range type your search terms followed by the range with three dots. For example, Michael Jackson 1970...1980.
- ♦ Found a big Web site but can't find the specifics you want there? You can browse the Web site by typing “site:(name of Web site e.g. PaPsy.org)/(your search terms)”
- ♦ If you read something fascinating and wonder who else links to the page you're on, type link:twitter.com/(name of Web site without the brackets.)
- ♦ For organizing your results click “Show options” (next to “Web” on the far left in the “Results” bar. I just found “Wonder wheel,” which clusters the results by associative distance (à la Jung and cluster analysis).

At the top of the basic Google search page are links to specialized “libraries” of links such as “Shopping,” “Images,” “Maps” and especially “More” and, at the bottom, “even more.” These are great for research.

For researching

- ♦ “Google Scholar” is a fair match for APA's *PsycNET* when you want to know what the research says. Scholar is a broader search and *PsycNET* a much more refined search. Google's page ranking system elegantly places the best results near the top. For the forensically inclined, it can even find legal opinions and journals.
- ♦ “Books” under the “more” menu is not Amazon but will offer you an overview, reviews, and prices at everyone who sells the book and even library holdings from which to borrow it. For many older books you can download a free copy. Too many books found? Want content from

magazines? Use “Advanced Book Search” to narrow your results.

- ♦ “Reader” under the “more” menu will collect the latest updates from your choice of Web sites (and blogs, news, etc.) and display it in one window so you won't have to remember to go to each. If your interests are cross-cultural, trans-disciplinary, or multifactorial, this may be just what you need to keep informed and productive. You can share your “inbox for the Web” with others and even read it on your smartphone.
- ♦ Find some text, a document or even Web page that looks interesting but you don't read Estonian? Just paste it into “Translate” under the “more” menu. Need to search the Web in other languages or fonts? It does this and then returns results in English. Amazing.

For those in practice

Of course you know “Google Maps” for driving directions and even photos of the area. But did you know you can get your practice listed on the map that shows up when potential clients enter say “psychologist westmoreland PA” into a Google search box? Clicking on the map's orange balloons or practice's name can link to your practice's Web site or to a popup box over the map with your address, phone, etc. You can easily expand this box at no cost by using Google's Local Business Center. Read <http://maps.google.com/support/bin/topic.py?topic=13416> and in an hour you will have “hung out your shingle in cyberspace” at no cost. You can, of course, pay for an ad that will appear on the search page. For the next marketing step use “AdWords” to try focused, cost-controlled, effective advertising.

Need a Web site? How about free and instantly placed into Google? Go to “Sites” under the “more” menu to easily make an attractive and functional Web site.

Continued on page 31

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CE Questions for This Issue

The articles selected for one CE credit in this issue of the Pennsylvania Psychologist are sponsored by the Pennsylvania Psychological Association. PPA is approved by the American Psychological Association to sponsor continuing education for psychologists. PPA maintains responsibility for this program and its content. The regulations of the Pennsylvania State Board of Psychology permit psychologists to earn up to 15 credits per renewal period through home study continuing education. If you have more than 30 continuing education credits for this renewal period, then you may carry over up to 10 credits of continuing education into the next renewal period.

You may complete the test at home and return the answer sheet to the PPA office. Passing the test requires a score of at least 70%. If you fail, you may complete the test again at no additional cost. We do not allow more than two attempts at the test.

Complete the response form at the end of this exam, making certain to match your answers to the assigned question numbers. For each question there is only one right answer. Be sure to fill in your name and address, and sign your form. Allow 3 to 6 weeks for notification of your results. If you successfully complete the test, we will mail a confirmation letter to you. The response form must be submitted to the PPA office on or before November 30, 2011 – the end of the new renewal period.

Return the completed form with your CE registration fee (made payable to PPA) for \$20 for members (\$35 for non-members) and mail to:

Continuing Education Programs
Pennsylvania Psychological Association
416 Forster Street
Harrisburg, PA 17102-1748

Learning objectives: The articles in this issue will enable readers to (1) assess and explain current issues in professional psychology, and (2) describe and act on new developments in Pennsylvania that affect the provision of psychological services.

DeWall

- Which of the following statements is correct?
 - The "PACP News Letter" gradually evolved into *The Pennsylvania Psychologist*.
 - PPA is one of several state psychological associations that publishes an e-newsletter for the public.
 - PPA is using the 75th Anniversary Fund to pay for the e-newsletter.
 - PPA is deferring upgrading the Web site until more funds are available.

Legal Column – Knapp, Baturin, Tepper

- Heather, aged 16, consents for outpatient psychotherapy. When it became necessary to get a release of information form signed to send information to another health care provider, the psychologists needed to get the form signed by
 - either of Heather's parents
 - Heather
 - both of Heather's parents
 - No release of information form was needed.

McWilliams

- According to Stanley Greenspan and Nancy McWilliams, the DSM, in reducing clinical problems to a description of quantifiable behaviors and symptoms, has contributed to a culture in which the underlying meaning of complex clinical problems has been lost, and in which therapeutic progress is measured in terms of symptom reduction and not in terms of growth toward overall mental health.
True
False
- What doesn't the PDM contain?
 - chapters on personality differences
 - discussions of characteristics of mental health, including reality testing, ego strength, affect tolerance, self and object constancy, and authenticity
 - case formulations and clinical vignettes
 - a section on the elderly
 - a section on infancy

Gordon

- PDT is not only effective in reducing symptoms, but also in increasing mental capacities.
True
False

Delligatti & Dunn

- Qigong, tai chi and meditation are forms of mindfulness practice
True
False
- Twittering, blogs, and a Facebook fan page can be used to market:
 - services
 - products
 - events
 - public service announcements
 - all of the above


PPAGS – Snyder

- Goals of brief psychodynamic psychotherapy include:
 - major and pervasive character change
 - crisis management
 - symptom relief and limited character change

School Psych – Edgar-Smith & Baugher-Palmer

- Which of the following concepts is LEAST associated with object relations theory?
 - Individuals can hold both realistic and unrealistic images of others and the self.
 - Images formed during early interactions with significant others can persist into the future.
 - Distorted views of others may prompt reactions that do not seem to match current interactions with others.
 - The use of response costs helps students form positive images of the person distributing the response costs.

Psych Tech – Zuckerman

10. Google's search function can be made more functional by using:
- "Advanced Search's" exclusions
 - adding punctuation such as minus signs and tildes (~) before search terms
 - "Directory" to index your hard drive's contents
 - searching for your keywords in "Images," "Books," and "Dictionary"
 - all of the above. 


PSYCH TECH...

Continued from page 28

"Even more"

Under the drop-down "more" menu, "Even more" will show how Google is trying to live up to its goal of providing all the information in the world to everyone.

- ♦ I recommend exploring "Talk" for video chatting, "Apps" for those who don't need the power and complexity of Microsoft's Word/Excel/Outlook Express/PowerPoint, and "Docs" for sharing or working collaboratively on any project.
- ♦ You have to enter all the information yourself but "Google Health" is a permanent, password-protected Personal Health Record (PHR) available from anywhere. Start with the basics now, add history when you have time, add more as it occurs, and it will work for you.
- ♦ Have Google index your own computer's hard drive by all the words and numbers in every file and then use Google's familiar search box to find it. As good as Spotlight on Macs, download "Google Directory."
- ♦ You know you read it a few days ago on some page but can't find it now? Google will keep track of the Web sites you visited and you can search them all by key words. Set up your "Web History."

New tools and functions are being invented and implemented regularly so check back every few months to see what is new and helpful. 

Continuing Education Answer Sheet *The Pennsylvania Psychologist, March 2010*

Please circle the letter corresponding to the correct answer for each question.

- | | | | | | | | | | |
|----|---|---|---|-----|-----|---|---|---|-----|
| 1. | a | b | c | d | 6. | T | F | | |
| 2. | a | b | c | d | 7. | a | b | c | d e |
| 3. | T | F | | | 8. | a | b | c | |
| 4. | a | b | c | d e | 9. | a | b | c | d |
| 5. | T | F | | | 10. | a | b | c | d e |

Satisfaction Rating

Overall, I found this issue of *The Pennsylvania Psychologist*

Was relevant to my interests	5	4	3	2	1	Not relevant
Increased knowledge of topics	5	4	3	2	1	Not informative
Was excellent	5	4	3	2	1	Poor

Comments or suggestions for future issues _____

Please print clearly.

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Address _____

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I verify that I personally completed the above CE test.

Signature _____ Date _____

A check or money order for \$20 for members of PPA (\$35 for non-members of PPA) must accompany this form.
Mail to Continuing Education Programs, PPA, 416 Forster Street, Harrisburg, PA 17102-1748.

May 14 Parenting Coordination Training

PPA is offering a Joint Parenting Coordination Training with the Pennsylvania Bar Institute on May 14, 2010, from 8:30 a.m. to 4:30 p.m., which will be live in Philadelphia and simulcast to Pittsburgh and Mechanicsburg. Six continuing education credits will be offered to participants of this workshop.*

Parenting coordination provides a mechanism for assisting parents in implementing their custodial arrangement and resolving related parenting issues, allowing both parents to remain actively involved in parenting decisions without placing the child in the middle of the conflict. This alternative-dispute-resolution approach is likely to be less costly, less prone to delay, and less stressful to both parents and children than resolving disputes through litigation. The increased use of parenting coordination has created a need for more trained parenting coordinators. This training is intended to provide lawyers and psychologists with training to enable them to better fulfill the demands of the parenting coordination role. It will focus on understanding what parenting coordination is and the current state of Pennsylvania law relating to parenting coordination; the procedural and logistical steps involved in becoming appointed as a parenting coordinator and starting to serve; the processes to be followed in parenting coordination sessions; and the issues that may be addressed by parenting coordinators. Practical parenting coordination techniques and decision-making methods will be highlighted.

If you are interested in attending the training, please contact Rachael L. Baturin, MPH, JD, at the PPA office or e-mail rachael@PaPsy.org.

* **Parenting Coordination Training** is sponsored by the Pennsylvania Psychological Association. PPA is approved by the American Psychological Association to offer continuing education for psychologists. PPA maintains responsibility for the program and its content. Six continuing education credits will be offered to participants of this workshop. Certificates of completion will be mailed to participants who attend the entire workshop and complete the evaluation form. Partial credits will not be given. The Pennsylvania Psychological Association is an approved provider for Act 48 continuing professional education requirements as mandated by the Pennsylvania Department of Education.

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PPA member and multiple insertion discounts are available. Acceptance of advertising does not imply endorsement by PPA or PPF. For further information, contact Marti Evans at the association.

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Electronic Election for Board of Directors

Nancy Chubb, Ph.D., MBA, Chair, Nominations and Election Committee

Soon your ballot for the PPA Board of Directors elections will be arriving via e-mail. Please watch for it. If you think PPA has an e-mail address for you that is not current, or if the office doesn't have your e-mail address, please e-mail Iva Brimmer at iva@PaPsy.org with a current address. Do it NOW.

We will post a few reminders to all members and those on the listserv during the month that voting is open, March 15 to April 15. As a reminder, for those of you on the listserv, as with all postings, any commentary about the election or candidates must observe the listserv rules and etiquette (<http://www.PaPsy.org/membership/rules.html>).

If you do not have an e-mail address, or if the PPA office doesn't have it, you will receive a paper ballot in the mail.

The candidates' statements will be posted on the PPA Web site, www.PaPsy.org, in the members-only section. We have a terrific slate of candidates who have served PPA well, and we are so pleased that each of them is willing to continue to lead. Please be sure to vote! 

2010 CE Calendar

The following programs are being offered either through co-sponsorship or solely by PPA.

April 8-9, 2010

Spring Continuing Education and Ethics Conference
Lancaster, PA
Marti Evans (717) 232-3817

April 10, 2010

PPAGS Workshop: Congratulations! You Have a Doctorate: Now What? Pursuing a Successful Career in Psychology
Lancaster, PA
Marti Evans (717) 232-3817

May 14, 2010

Parenting Coordination Training: Understanding High Conflict Families and Resolving Their Disputes
Philadelphia, Allentown, Pittsburgh, Mechanicsburg, and Wilkes-Barre
Rachael Baturin, MPH, J.D.
(717) 232-3817

June 16-19, 2010

Annual Convention
Harrisburg, PA
Marti Evans (717) 232-3817

September 24, 2010

APA Insurance Trust Risk Management Workshop
Harrisburg, PA
Marti Evans (717) 232-3817

November 4-5, 2010

Fall Continuing Education and Ethics Conference
Exton, PA
Marti Evans (717) 232-3817

For CE programs sponsored by one of the Regional Psychological Associations in Pennsylvania, visit <http://www.PaPsy.org/resources/regional.html>.

Registration materials and further conference information will be mailed to all members.

If you have additional questions, please contact Marti Evans at the PPA office.

also available at www.PaPsy.org – HOME STUDY CE COURSES

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3 CE Credits

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3 CE Credits

Confidentiality, Record Keeping, Subpoenas, Mandated Reporting and Life Endangering Patients*

3 CE Credits

Foundations of Ethical Practice*

6 CE Credits

Ethics and Boundaries*

3 CE Credits

Readings in Multiculturalism

4 CE Credits

Pennsylvania's Psychology Licensing Law, Regulations and Ethics*

6 CE Credits

*This program qualifies for three contact hours for the ethics requirement as mandated by the Pennsylvania State Board of Psychology.

For all Home Study CE Courses above contact: Katie Boyer (717) 232-3817, secretary@PaPsy.org.