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DrSuzanneLake@aim.com

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kelleyvandewalle@yahoo.com

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Early Career Professionals
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(626) 403-3500 ext 106
martinhsia@gmail.com

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Disaster Response
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Upcoming Luncheon Meetings



Date: Friday, March 2, 2012
Topic: Technology Literacy for Psychologists: New Mandates for a New Era
Speaker: Bruce Gale, PhD

Date: Friday, April 6, 2012
Topic: A 20 Year Analysis - Is It Effective, Is It Necessary, Will It Ever End?
Speakers: Peter Radestock, PhD

PLEASE RSVP NO LATER THAN THE FIRST MONDAY OF THE MONTH TO YOUR INTERNET EVITE, OR TO THE SGVPA MAIL BAG INFO@SGVPA.ORG.

CE credits available for Psychologists, LCSWs and MFTs

Monthly luncheons are held on the first Friday of the month at the University Club, 175 N. Oakland Avenue, Pasadena, from 12:00 to 1:45 p.m.

Members Costs:

Luncheon, Service, and Parking Privileges...\$22
CE credits...\$20
Audit...\$10

Non-Member Costs

Luncheon, Service, and Parking Privileges...\$27
CE credits...\$25
Audit...\$15

Please note: Unclaimed lunch reservations will be billed to the individual--So please claim them!

PRESIDENT'S MESSAGE



Dear Colleagues,

With the warm glow of yet another successful January Jubilee still lingering, I find myself feeling honored by all the enthusiasm I've witnessed since that very fun evening. Not only was there a swell of returning members, I have also experienced an enthusiastic response from many new members of SGVPA, eager to get more involved, and willing to volunteer time and resources to making policy advocacy

more front-and-center. Those I've spoken to are also looking to discover creative ways to provide advocacy resources to our local community. As wonderful as SGVPA is in so many ways, I believe these two imperatives--keeping informed, and providing advocacy resources so our community can take action--need to take a priority. So please take note -- you'll be seeing a lot more on these two topics as the year progresses!

In that spirit, here's a reminder that CPA's annual Advocacy and Leadership Conference in Sacramento is taking place March 25-27. I'll be gladly attending, along with the other CPA chapter Presidents. I will also be a part of the group that storms the capitol on Tuesday, March 27, visiting politicians' offices to have conversations about current legislation that affects the field of Psychology and mental health generally.

On a different note, I'd like to give a shout-out to Dr. Martin Hsia, the Early Career

(continued on p. 7)

Rockin' the Fourth Annual January Jubilee A Whimsical Recollection

By Suzanne Lake, PsyD
Editor

On January 13, SGVPA members and friends gathered at the elegant Shakespeare Club House to enjoy an evening together in celebration of the year ahead, and to inaugurate the 2012 Board of Directors. About 200 SGVPA members and friends, including California Congressman Anthony Portantino, and LA Assistant District Attorney Jackie Lacey, mingled gaily in the early phases of the party, as the sweet-sounding melodies of a professional vocalist and pianist floated through the sumptuous, flower-filled rooms.

As the auditorium filled up with the happily fed and “buzzed,” JJ Chair Dr. Elisse Blinder welcomed the crowd, and introduced 2011’s esteemed President, Dr. Deborah Peters. Dr. Peters reminisced about the year, playfully comparing the SGVPA Board to a car--complete with directors whose personalities functioned individually as windshield wipers, rear view mirrors, engine, and so on--to drive efficiently along the road of SGVPA life in 2011.

Then followed a dramatically convivial installation ceremony, wherein eight illustrious past presidents--representing the fully forty years of SGVPA’s history--semi-solemnly passed the torch along from one to another, and finally into the hands of the new President, Dr. Stephanie Law.

In her address, Dr. Law laid out her priorities for the year of her presidency, including hospitality and inclusivity, political advocacy, and social action. She lauded the organization as it has grown to include so many facets of professional opportunity and development, exhorting her listeners, “I want you all to experience the richness of being an SGVPA member!” She then expressed appreciation of each 2012 Board member individually, as she invited them to the stage, and the audience roared with appreciative applause. Finally, she thanked the assembly, and invited the guests to party on as the program drew to a close.

As people rose to respond to her invitation, and clusters regathered around the piano, buffet, and wine bar, it was generally agreed there’s just nothing like the SGVPA January Jubilee--for entertainment, networking, feasting, membership discounts, appreciations, and professional stimulation. *“I can’t wait for the next one!”* was overheard from many enthusiastic guests when, at length, they began to drift regretfully away.





Discerning Your Destiny

Remniscences of the Event by a Graduate Student Who Was There

By James Robinson, MA



It was an evening of open laughter, of truths spoken lovingly, and of infectious inspiration for young professionals and students who attended the Early Career Professionals' panel discussion, "Discerning Your Destiny," on January 26. A wide variety of therapists-in-the-making spent two hours of speed-dating their way through the big questions of starting a career, while the four panelists--all seasoned professionals motivated by a wish to give back to the community--were honest and enthusiastic with their responses.

The panel consisted of Dr. Wayne Kao, PsyD, of Pacific Clinics, who discussed his time spent in community mental health; Dr. Paul Clement, PhD, who gave riveting accounts and pithy one-liners of advice distilled from years of experience in both academia and private practice; Karen Miller, PhD, giving warm, yet realistic advice as if we were her own advisees; and Melissa Johnson, PhD, who imbued the room with her inviting countenance while chatting about her journey towards passionate service paired with fervent self-care.

Though the topics discussed were diverse and plenty, there is some advice that particularly bears repeating. Dr. Miller assuaged the audience's anxiety over choice of training program (PsyD vs. PhD), and amount of clinical and research experience necessary, by stating, "Your CV will speak for you!" She explained that interviewers and prospective employers will be able to assess your expertise through your hard work and experience, rather than relying on the impact of your degree, or what educational institution you hail from.

On the subject of getting experience, Dr. Johnson proclaimed, "Be a lobster!" She quickly unpacked her metaphor by explaining that young professionals must be willing to "be a small crustacean in a big shell" for a bit, in order to grow. Equally as important, however, we must be willing to be cramped for a short period of time as we begin to outgrow a certain role in our lives. To this end, Dr. Miller advised that students and early career psychologists alike "Say yes... if you can!" The panelists encouraged the audience to try out new things--even if the opportunities don't appear to match our interests exactly--since it's only through a wide variety of experiences that we can be sure

of our true passions.

When asked about professional success, the panelists gave much practical advice. Among the recommendations, Dr. Miller and Dr. Johnson suggested finding a mentor, adding that we may find several different mentors for different areas of our training, or during different periods of our professional development. The panel uniformly insisted on the importance of getting licensed as soon as possible after graduation, explaining that young professionals can quickly hit a "glass ceiling" until they are able to practice independently. And finally, Dr. Clement summed his many years of experience in the two tips for professional success: "Show up! And do acceptable work."

Overall, the evening was a delight for all those involved, providing a much appreciated chance for learning, collaboration, and mentorship from some of the most illustrious psychologists in the San Gabriel Valley.

I would like to publicly thank Dr. Martin Hsia, Dr. Meghan Crawford, and John Nelson for their hard work in dreaming and designing the evening. And I will personally acknowledge a small amount of credit in coordinating room space and audio support as the Fuller Graduate School of Psychology co-sponsor. This event marked an innovative expression of SGVPA's mission to engage developing mental health professionals, and reflected one of the most admirable traits of our organization: supportive collaboration between professionals of all ages, levels of expertise, and personal passions.

*James Robinson, MA can be reached at
jbrobinson3@gmail.com*



Presenter Psychologists Paul Clement, Wayne Kao, Melissa Johnson, and Karen Miller

Stuck in Tomorrowland

An Addict's Dilemma

By Dan Goldin, MFT
Substance Addiction SIG Chair



A twenty seven year old girl named Katherine came into my office recently with a terrible case of the doldrums--a word that hasn't found its way into the DSM, but carries more descriptive oomph than depression. The doldrums originally described an area of the sea where ships were not able to move for lack of wind. Katherine was in that bad place of being stuck and adrift at the same time, with nothing out there for her to catch a lift from. She lived at home with a father who worked all the time, and a stepmother with whom she shared a nearly total silence. For the last seven years, she had been trying to get through Los Angeles City College, at the rate of about two classes a year. Her one solitary pleasure was cocooning herself in marijuana every night and watching episode after episode of recently defunct TV shows such as *Lost*, *Arrested Development* and *The Larry Sander's Show*.

I dreaded my sessions with Katherine; the empty silences, and the lack of structure except that created by my slow, slow digital clock... Perhaps it was in a search for a horizon that I found myself asking Katherine about her plans after finishing LACC. I felt like a divorced dad at a biweekly visitation dinner. There was no real curiosity behind the question, just desperation, and I fully expected her vague, sad gaze to grow completely blank. But, to my surprise, she came alive! She was going to be an actress or a playwright, she bubbled. How vividly she imagined herself in both roles: She would spend her mornings reading and/or writing, and tending her garden. The evenings would be devoted to intimate, intellectual conversations with friends. She often imagined famous people among these friends. She would at last find true connection in these celebrity friendships.

When I was a child, I used to have absurd pop culture-informed fantasies about my own future. Sometimes I imagined becoming a heavyweight boxer like Mohammed Ali (not sure now, but I might have been black in these fantasies). Other times I imagined hanging out with the Beatles in their surreal mod digs from the

movie *Help!* That I could not imagine the steps involved in arriving at any kind of future at that age aided the fantasies. The future for me was vague, uncharted territory, a kind of tomorrowland disconnected from my past and my present, and therefore a perfect repository for fantasies stitched together from movies and TV. Years later, when I was about twelve, I remember wanting to lull myself to sleep with these fantasies in the old way and, sadly, not being able to sustain a vision of the future that had no bridge from the present.

What had happened to me? I think I had grown used to exploring troublesome and exciting events in my life as breaks in the usual way of my world--breaks that opened up new ways of being or resolved back into old ways. In these little histories that made up my life, I was both author and protagonist. The ambitions of the author -- moral, romantic and otherwise -- constrained the protagonist. And the limitations of the protagonist -- physical, emotional, cognitive -- constrained the author. In turn, this retrospective mode of living informed my prospective imaginings. I could no longer shape-shift into the future.

Katherine, meanwhile, has managed to hold onto the future as a fantastic island unconnected to anything past or current in her life. The real story of her life is always to come. The price of maintaining this vividly imagined future is that she has to live in a featureless, useless present. I think we tend to see our "stuck" clients as mired in the past, reliving and repeating traumatic aspects of development in current relationships. But Katherine and many other substance abusers appear more stuck in the future, albeit a disconnected one. That this stuckness may have roots in early development emerges only when we investigate the fantasied future, which in Katherine's case was a mirror image of what she didn't get as a child--a world where her spontaneous, creative self received love, respect and honor.

*Daniel Goldin, MFT can be reached at
DanielGoldin@gmail.com.*

Why Do Psychologists Need to Think About Advocacy?

By Audrey Ham, PhD



As a Supervising Psychologist in the New York City Public Hospital system, I often had the opportunity to interview future psychologists for internship or postdoctoral positions. Typically, I asked students why they were interested in the field, and the answer I most often heard was, “I like working with people and I want to help people.” As psychologists, many of us entered the field because we are “people persons;” we enjoy interacting with others, and are concerned about the well being of others. However, the irony is that much of our work is actually done “alone.” Yes, we are connecting with another human being during a session; but we are often working in our own heads without professional connections to other mental health practitioners. The decisions we make, and the responsibilities we shoulder are our own, and are often constructed on our own using our own critical thinking about the issues. Ours is often an isolated profession-- unless we seek out consultation, supervision, networking and community-building opportunities with other psychologists. Many of us do seek out professional community-- but why do we so often stop short of advocacy?

Advocacy is the act of fighting for something, usually a cause felt to be significant. Unfortunately, advocacy at the level of our shared profession was not discussed much in our educational training. Perhaps we gained some skills or knowledge about advocacy through the needs that were brought to us by our clients (e.g., talking to a physician). However, it is only by advocating as a group that psychologists can gain power and influence on behalf of their profession.

In her keynote speech at the January Jubilee, new SGVPA President Dr. Stephanie Law spoke about the need for psychologists to be advocates, and noted that of the 17,000 licensed psychologists in California, only 4,000 belong to CPA--the only organization in the state that advocates legislation and policy on our behalf. Is this because we are a profession of loners? Or, do the majority of psychologists not see the need for advocacy on the macro issues affecting their practices?

The power of professional organizations at the state level has been abundantly demonstrated by the California Association of Marriage and Family Therapy (CAMFT).

With a huge membership of 30,000, the organization is influential in numerous legislative actions. California was the first state to pass licensure for Marriage and Family Counselors in 1963. California Counselors have also recently banded together and worked successfully to make additional licensing at the Masters Level a reality in California. On Jan 1, 2010, a Senate Bill (SB788) became law, instituting a license for Masters level counselors called the Licensed Professional Clinical Counselor (LPCC). A grandfather clause was built into the bill that allows Masters level practitioners who have specific qualifications to be grandfathered into this licensure. Thus, School Counselors, Rehabilitation Counselors, MFTs, and Behavioral Analysts scrambled to submit the necessary paperwork to the Board of Behavioral Services (BBS) by the December 31, 2011 deadline.

Although similar to the MFT, the LPCC is considered by some to be a more desirable licensure, because it is transportable and recognized by all 50 states. CAMFT got the warning signal from its members, and moved into action. Like psychologists, LPCCs provide individual and group counseling in all settings, and are recognized by all insurances. The VA is already one institution that recognizes this new level of licensure as highly desirable – even to the detriment of psychologists. As more independent providers enter the professional milieu, psychologists will have no choice but to shift and respond to the multitude of practitioners whose professional practices--if not training and experience-- can mirror our own.

We psychologists need to think about how we want to define and defend our role, rather than to allow our role to shift and diminish without our input. Now is the time that we need to learn to advocate on behalf of our profession and our own professional lives.

What issues would be important enough for psychologists to band together, 17,000 strong, and advocate for? The delivery of health services is changing, and we need to be able to answer the question of where we fit in. In order to begin this process we need to believe that advocacy is important to accomplishing our goals. For all of us, the first and most important step is to join CPA, and actively support its efforts on our behalf.

Dr. Audrey Ham can be reached at ah2139@nyu.edu.

(continued from p. 1)

Professionals Chair, and John Nelson, our Student Representative, as well as their respective committees, for organizing the Discerning Your Destiny Forum and Panel Discussion on January 26. With four esteemed panelists (Drs. Wayne Kao, Karen Miller, Paul Clement, and Melissa Johnson), and approximately 50 individuals in attendance, students and early career professionals were treated to a very rich and relevant discussion.

And finally, I want to introduce and welcome three new members to the Board of Directors. Kind, fun, and sincere, Dr. K.C. Bugg is our CLASP Chair. Authentic, friendly, and a sharp clinician, Dr. Ellen Miller-Kwon now fills the Diversity Liaison to CPA position. And finally, Dr. Melissa McMullin honors us by accepting her appointment to be the CPA Representative. Melissa has a sharp intellect, has a subtle sense of humor and is all things CPA! I welcome these three new stellar individuals to the hard working Board of Directors! With all the exciting and new things that continue to transpire, and the new folks on our Board of Directors, I am determined to continue to find ways to make SGVPA more relevant and more welcoming to you!

Respectfully,
Stephanie Law, PsyD
President

Membership Corner

By Kelley Vandewalle, PhD Candidate
Membership Coordinator



I would like to reiterate my gratitude to the Membership Committee, and to all of you that contributed by volunteering your time and efforts to creating the Fourth Annual January Jubilee! The event was a huge success, and

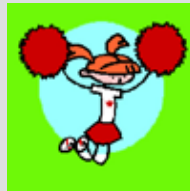
it was great to see so many of you gather there. The final membership numbers from the event are: 24 new members joined SGVPA, and 78 current members renewed their memberships!

If you still have not yet renewed your membership for 2012, now is the time. You can download an application from the website, or contact me directly.

There are so many wonderful benefits SGVPA offers members, including: the SGVPA Listserv; discounted CE credits at the monthly luncheons; our award-winning bimonthly newsletter; personal invitations to the many educational and enjoyable events during the year; continuous networking opportunities; SIG (Special Interest Group) meetings; and, the upcoming new website and online directory!

I look forward to hearing from you, and seeing you all at upcoming luncheons and events this year!

*Kelley Vandewalle can be reached at 310.467.1833, or
kelley@kelleyvandewalle.com.*



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Stacy Spencer, MSW

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Psychology and Family Law

Judicial Bias in Family Court

By Mark Baer, Esq.



It is generally agreed that a person involved in a lawsuit has the right to have their case decided by a judge who is capable of applying the law in a fair and objective manner. In fact, according to the California Code of Judicial Ethics, “A judge

shall perform judicial duties without bias or prejudice.”

To that end, a retired judicial officer has commented, “...Judges are trained to be sensitive to problems of bias.” He continued, however, stating, “...One does not undergo an instantaneous transformation from whatever one may have thought or believed as an attorney just by being sworn in as a judge or commissioner.”

Kenneth Cloke, a noted expert in conflict resolution, adds that in fact, “[t]here is no such thing as genuine neutrality when it comes to conflict. Everyone has had conflict experiences that have shifted his or her perceptions, attitudes, and expectations... Nor are there any genuine neutrals in courts, including judges, CEO’s, managers, and human resources representatives, all of whom have biases and points of view... Judges have the most intractable bias of all: the bias of believing they are without bias.” [emphasis added]

With the divorce rate as high as it is, virtually everyone has been touched in some way by divorce, or custody and support issues. And if you took a poll of all those who have been through the system, you would likely find that nearly everyone felt that the decisions rendered in their case had in some way been unfair--i.e., they received too little, had to give up too much, were not given due consideration, etc. Psychologists and other mental health professionals routinely hear such laments from people who have suffered or been outright traumatized by the actions of the court in their very personal lives. And while it would be misleading to say that all of these were caused by judicial biases, it is unfortunately accurate to conclude that many of them were.

Despite ethical exhortations to objectivity, it’s fair to say that each and every judicial officer in family law court has personal biases. Attorneys therefore try to determine whether the judge assigned to a particular case is biased for or against their clients. They select custody evaluators they hope are biased in favor of their clients. The same exact case might have incredibly different results from one

judge’s court to the next. Bias impacts the judge’s factual findings, which is the great discretion they are given, and how they opt to apply the law. Opportunity for bias exists in no other area of law to this extent. No amount of bias elimination training can educate a judge to forget about their life experiences, assumptions, personal beliefs, and opinions. Thus, I do not think anyone can argue or dispute the fact that judicial bias in family law litigation is a serious concern.

On a Monday, an expert witness could be testifying on behalf of a husband before a judge who is known to be biased against husbands, and she will notice that the judge pays very little attention to her testimony (i.e., because the judge was inclined to rule in favor of the wife regardless). That same expert witness can return to the same courtroom on Tuesday, on a completely different case, and notice that the same judge will pay very close attention to her testimony this time, because now she happens to be the expert for the wife in the case (i.e., because the judge wants to understand the testimony that will allow him to rule in favor of the wife). In short, if a lawyer happens to have a case before a judicial officer who is intrinsically biased in his client’s favor, the outcome is almost certain, and it would take a pretty inept attorney to botch such a case. Thus, the most effective family law litigators are those who are best able to take advantage of the inherent flaws in the system for the benefit of their clients.

Given the essential defects in the litigation system, people need to remember they have the alternative of resolving their family law matter through mediation, or collaborative divorce. By their very nature, these systems do not rely on the inherently-biased decision making processes of a single person. Otherwise, to those who simply default to the court system, I must regretfully say, “let the buyer beware.”

Mark Baer, Esq. can be reached at (626) 389-8929 or by email at Mark@markbaeresq.com.

Obsessive Ruminations

“I’m Stabbing You Right Now!”

A Case Transcript - The “Bad” Self Transformed

By Alan Karbelnig, PhD, ABPP



One of the major theorists in the history of psychoanalysis, WRD Fairbairn, astutely observed that persons abused by their parents unconsciously develop negative self-images to preserve their parents as God-like figures. This “moral defense” renders such persons “bad,” and consequently their parents’ rejection of them makes sense. Fairbairn also stressed how psychotherapists must compete with the relationship that patients fiercely maintain with their own internal “objects.” Giving up these “internal families” leaves patients feeling psychologically orphaned.

I recently observed a dramatic example of this process in a case I was supervising. The patient, Ms. A, a highly intelligent, attractive 40 year-old woman, sought psychoanalysis for treatment of chronic depressive symptoms. She was the second of three children, and the only daughter. Her father, a constitutional attorney often away at work, was critical and self-centered. Her mother, a thoracic

surgeon, seemed to compete with her from infancy. She overtly rejected her, calling her “stupid,” “ugly,” and “foolish.”

Ms. A’s mother practiced with another prominent surgeon, a male who molested Ms. A first at ages four and five, and then again at age 14 when he attempted to rape her. The mother, who was having an affair with this same medical colleague, defended him. She insisted that Ms. A had fabricated the sexual assault. The evolution of the chronic mental pain in Ms. A, the extreme feelings of emptiness, emotional insecurity, and terror of intimacy, was unusually obvious. Equally so was her terribly negative image of herself, a self-valuation that contributed to her tendency to choose abusive romantic partners.

What follows is the transcript of a critical juncture in the psychoanalysis, conducted by my supervisee. This particular interchange occurred about two years into the psychoanalysis, after many layers of defense had been penetrated, and the transference was being intensely scrutinized.

Ms. A: If you continue to move that close to me, to follow me so well, to know me, I will hurt you.

Dr. B: How?

Ms. A: I’m thinking of that dream I had, of the glass window with the wooden frame around it. And I am on a grass field, lying down, covered by it. Remember?

Dr. B: Yes.

Ms. A: Now I imagine nothing but the glass. The frame is gone. As I try to stand, the glass shatters. You are there, trying to help me up, but the shards of glass are pointing towards you. [Ms. A began sobbing uncontrollably at this point].

Dr. B: And you fear I will be hurt.

Ms. A: Not hurt, bloodied and killed.

Dr. B: But I’m right here, with you, hearing you, looking at you. And I’m not hurt.

Ms. A: [Entering a semi-psychotic state and becoming agitated now]. You’re not getting this. It’s not a metaphor. It is real. I’m stabbing you right now. [She sobs again]. The glass is cutting you up.

Dr. B: [Silence, and then:] You feel like your being itself is dangerous, like you will kill me.

Ms. A: Because I will.

Dr. B: You are so open and vulnerable right now, so defenseless. And I’m right here with you.

Ms. A: [Seeming as if she did not hear what Dr. B just said]. No, I will poison you for sure, and you won’t see me anymore. You will vanish. You will not have me as a patient.

Dr. B: [More silence, and then]: Ms. A, we are here, together, at the core of your open wound. You had no mothering and little fathering. You think you caused it. [More silence]. And you are convinced your trauma will recur, that I will abuse and abandon you, and all because of you. And yet here I am, uninjured, right next to you.

Here is a true moment in time, a feral, transformative encounter between two people that clearly exemplifies Fairbairn’s key ideas. Dr. B guided the relationship to an extremely regressed point, one in which Ms. A experienced herself, in the anguished present, as the bad infant deserving of criticism and neglect. She successfully competed with Ms. A’s attachment to her “internal objects,” entering the space they previously occupied.

By staying so closely attuned to Ms. A, Dr. B was able to offer a different, healing emotional experience. Ms. A’s depression lifted for several weeks. If Dr. B and Ms. A are able to re-enact these encounters at such depth and intensity – “shattering” describes them appropriately – it can be expected that the chronic depression will resolve and, to use Fairbairn’s own words, the “bad” self will be “exorcised.”

Dr. Alan Karbelnig can be reached at AMKarbelnig@gmail.com.

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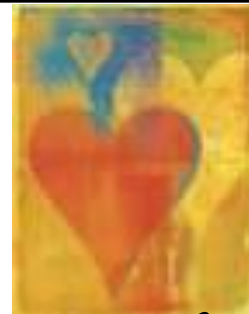
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