

CCPA NEWS

The Contra Costa Psychological Association Newsletter

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President's Message

Dear Colleagues,

I hope you have all had a great start to the year. It is difficult to believe that we are already in spring. It was great to see those of you who attended the annual meeting and presentation on the Changing Landscape of Psychedelics at JFK University. Dr. Presti was extremely knowledgeable and I know I learned a lot about this topic. It really is a

wonderful time to see some familiar faces as well as meet some

new ones. I would like to thank Dr. Scanlin for putting together the wonderful event. I hope more of you will be able to come to our events such as our quarterly CE dinners, First Fridays at Scott's and the upcoming mixer/social with local psychiatrists. I know the CCPA board would love to meet more of you at our events. All of these events are excellent opportunities for networking.

I am sorry to say that since our last newsletter, we have had more young lives lost in the tragedy in Florida. I know gun control and its intersection with mental health is yet another topic that has our country divided. While it is an important topic I do not want to focus on it at this time. However, what is well worth talking about is the bravery of the students who have felt called to action. It is an

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YOUNTVILLE TRAGEDY

Along with a post from the CPA President Paul Marcille, Ph.D., CPA hosted a free webinar on March 21st for providers who treat Veterans - "Responding to the Yountville Shooting: Taking Care of Your Patients and Yourself after Tragedy" with Sonya Norman, Ph.D. and Patricia Watson, Ph.D.

honor to watch these young people's passion and determination to stop further loss of life. Regardless of which side of the gun control debate you are on I hope you have had a chance to listen to these students who I believe whole heartedly will teach us adults something. THEY will make the changes THEY want to see in their country.

On a personal note, I wanted to share with you all that I recently closed my private practice. The decision to leave private practice was a very difficult one. Initially, I did not think it was worth a discussion in the newsletter, but a dear colleague encouraged me to do so and share my thoughts about this

major change of direction in my professional life as midcareer psychologist. One of the realities of private practice these days is working with insurance companies. Overall, this was really a difficult experience both in terms of the low reimbursement rates and the amount of time lost trying to communicate with them. It was not an empowering situation for me, which led me to do some soul searching. I realized that I was always a happier and better employee than I was as a professional in private practice/business owner. I realized I truly missed being a member of a clinical team. However, early in my job search, I found that hospital and clinic based facilities did not see my private practice experience as an asset. They preferred to hire someone who was coming directly from another organization who had been part of a team and reported to a supervisor. They were seeking an applicant who was a team player and easy to supervise. While I believed I had both of those qualities, it was not something that was coming across on the resume based on my last few years of private practice experience. My ego took a hit as I began to feel that I had to prove myself once again. I was not expecting that being in private practice would be a disadvantage. As a first step, I decided to accept a contract position with a correctional facility. Hence, I transitioned to the public sector. It was something that was not my

UPCOMING EVENTS

April 6, 2018 – 6:00pm

First Friday Happy Hour

Scott's 1333 N. California Blvd, Walnut Creek

April 10, 2018 – 11:30-1:00

CCCPA Board Meeting

April 18, 2018 – 6:00-9:00

CE Event—Recognizing Adult ADHD and What to Do About It

Lafayette Park Hotel

3287 Mount Diablo Blvd

Lafayette, CA 94549 (Register by April 15th)

May 4, 2018 – 6:00-9:00

Special First Friday Happy Hour Meet and Greet with Psychiatrists

Deer Hill Vineyards

6 Lois Lane, Lafayette, CA 94549

first choice but somehow felt right as a new beginning. As it turns out it was a great decision. I love being a member of the team at the California Health Care Facility, in the inpatient psychiatric unit, in Stockton. I am very energized by being a team member. I began to see how isolating private practice had been. I love seeing psychologists have a major role within the treatment team. While psychiatrists are part of the team, I feel it is us psychologists who have “ownership” of the clinical cases. It is a very sad environment and given the demographics of the inmates, I see first hand many of the social justice issues I have always been active in talking about. Everyday I get to see the role poverty, race, lack of access to mental health, and substance abuse have in the lives of incarcerated individuals. That is in itself turning out to be a very important experience. It is difficult to see that the rehabilitation of the inmates is not happening in the most productive way. As difficult as this work is, I feel lucky to have access to a part of society that I would never have gotten to see. The inmates are a forgotten segment of society. That has made it necessary

for me to redefine what it means for me to have impact on the lives of those I work with. In this short-term inpatient setting, impact can be limited to making a patient simply feel heard and understood as longer term treatment is not provided. Lastly, I don't mind acknowledging the importance of a steady income, which I feel, is lacking for those who are not yet established in private practice. As psychologists we do have a difficult job yet we often feel guilty about wanting to be rewarded adequately.

Interestingly, many of the younger clinicians at the facility talk about leaving to start a private practice. The bottom line one really has to think about is which professional path is a better fit given an individual's personality and not just think that the "grass is greener on the other side". This is a great time to remind you all about the hard work Dr. Smith Baumann has been doing with our Early Career group. This group provides support to psychologists who are establishing themselves in their careers.

I would like to take this opportunity to thank our board for their commitment to CCPA. It would not be possible to keep CCPA going without the hard work of Dr. Scanlin, Dr. Mann, Dr. Komori-Stager, Dr. O'Grady, Dr. Peterson, Dr. Pojman, Dr. Middlebrook, Dr. Sadur, Dr. Schuman, Dr. Smith- Baumann and Dr. Chan. We have several unfilled board positions. If you have a small amount of time to contribute and are interested, please contact one of us for further information. We would love to talk to you about the positions! As always, please know that I would love to hear from you regarding any suggestions you might have for CCPA and how it might serve its members best. In particular, if you have suggestions for events, speakers or opportunities for community engagement please contact any of us.

Regards,

Hengameh Maroufi, Ph.D.,

CCPA President

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May 4, 2018 – 6:00-9:00
Special First Friday Happy Hour Meet
and Greet with Psychiatrists
Deer Hill Vineyards
6 Lois Lane, Lafayette, CA 94549

APA's Clinical Practice Guideline for the Treatment of PTSD

In Fall 2017, APA released Clinical Practice Guideline for the Treatment of Posttraumatic Stress Disorder (PTSD) that have received a lot of critique and created controversy both within and outside of APA. Recent CCPA forum emails have circulated a petition to make revisions to the guidelines and highlight the dangers about service accessibility and availability based on these guidelines. Whether you agree or disagree with these guidelines, it is important to stay informed about publications from our field. Trauma is so prevalent for our clients, as a nation, and across the world. With such easy access to information, it is important to know what information our clients may come across. ✦

The Changing Landscape of Psychedelics by David Presti, Ph.D.

CE Presented January 2018

Psychedelics are among the most interesting and poorly understood psychoactive substances. They produce a variety of complex effects on the brain and mind, including intensification of thoughts and feelings, alterations of sensory perception, and loosening of psychological defenses. Because of these effects, psychedelics are powerful probes of the connection between brain physiology and consciousness, perhaps the most deeply mysterious question in contemporary science. In their plant and fungal forms, psychedelics have been used for millennia for medicinal and spiritual purposes. Modern scientific research with psychedelics has taken place for more than a century and was one of the driving forces in the early days of biological psychiatry. The widespread popular use of some of these substances in the 1960s contributed to legal regulation that closed down human research. However, after 25 years of quiescence, human clinical research with psychedelics has now returned to

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mainstream science. Clinical studies are underway investigating MDMA in the treatment of PTSD and psilocybin in the treatment of anxiety and depression. Another related area is the recent attention to the use of ketamine in the treatment of depression. In addition to PTSD, anxiety, and depression, also underway are clinical studies addressing addiction and social anxiety associated with autistic spectrum conditions. Critical to the use of these medicines in a psychotherapeutic context is careful preparation before a session, guidance throughout, and integration thereafter. Concurrent with clinical psychotherapeutic studies, human neuroscience research in the United States, Europe, and South America is investigating physiological mechanisms of these remarkable substances. In no small part because of its prominence in the media and in clinical and scientific literature, this is a body of research and therapeutic application that is of substantial relevance to all clinical practitioners of psychotherapy.

David E. Presti is Teaching Professor of Neurobiology, Psychology, and Cognitive Science at the University of California, Berkeley, where he has taught for 27 years. Between 1990 and 2000, he worked as a clinical psychologist in the treatment of addiction and PTSD at the Department of Veterans Affairs Medical Center in San Francisco. For 10 years (1999-2010) he was a core faculty member in the California School of Professional Psychology / Alliant University graduate program in psychopharmacology. And since 2004 he has been teaching neuroscience to Tibetan monastics in India, and more recently in Bhutan. He is author of **Foundational Concepts in Neuroscience: A Brain-Mind Odyssey** (2016, W.W. Norton).

Emotional Support Animals?

Have any of your clients asked for documentation for an emotional support animal? If it has not happened yet, it is likely to happen some day. Here is some information from the ADA about emotional support animals versus service animals.

Here are some definitions from the ADA article:

- According to Title II and Title III of the ADA “A service animal is a dog *trained* to do work or perform tasks for the benefit of an individual with a disability.”
- Service animals are limited to dogs.
- “Emotional support animals, comfort animals, and therapy dogs are *not* service animals under Title II and Title III of the ADA. The work or tasks performed by a service animal must be directly related to the individual’s disability. It does not matter if a person has a note from a doctor that states that the person has a disability and needs to have the animal for emotional support. A doctor’s letter does not turn an animal into a service animal.”

Your New Newsletter Editor

Greetings CCPA! I am excited to introduce myself as the new newsletter editor. I joined CCPA back in June 2017 and was warmly welcomed by various members at various events. I look forward to serving CCPA as the newsletter editor, getting to know more members, and keeping everyone updated with the newsletter.

I am currently in private practice in Concord providing individual and couples therapy. Through various experiences and trainings I have come to specialize and enjoy working with depression and grief. Once I am more established I hope to start a therapy group specific for individuals who have lost someone to suicide.



I was most recently working at Humboldt State University’s Counseling and Psychological Services providing therapy to university students. As much as I loved working with students, I was ready to branch out into private practice where I could serve both students and community members. I look forward to growing my practice, connecting with CCPA and the larger Contra Costa community.

Representative and
Representative.

If you are interested in becoming more involved there are a few open positions on the Board: CPA Government Affairs; Treasurer; and CARE

Wishing you all well and looking forward to meeting you at future CCPA events and around the community.

Catherine Chan, Ph.D.

www.drchancounseling.com