THE MISSISSIPPI PSYCHOLOGIST

NEWSLETTER OF THE

MISSISSIPPI PSYCHOLOGICAL ASSOCIATION

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Keep up with MPA's Legislative Activity by reading the Governmental Relations Section!



MPA Members visit with Legislators and staff at MPA Day at the Capitol

From the President's Desk

Emily Johnson, Ph.D., BCBA-D MPA President

Making Psychology Standout - The third in a series of articles focused on further establishing the worth and applicability of psychologists in the state of Mississippi.

Taking Our Seat at the Proverbial Table

As part of the invited speakers at this past year's MPA Annual Convention, I had the honor of attending Dr. Katherine Nordal's talk, "Health Care Reform." As part of her presentation, Dr. Nordal presented information received by APA as they have worked with insurance companies and legislative initiatives to

insure appropriate reimbursement for services provided by psychologists. Dr. Nordal made the statement that, at the current time, "When people hear "behavioral health," people in health care organizations think "social worker."" This is something we, as a professional field, must work to change. Our initiative is to have "behavioral health" equate to "psychologist," not lesser trained professionals that work within the organizations.



The purpose of the Mississippi Psychological Association is to serve as the organized voice of psychology in Mississippi and "to advance psychology as a science and a profession by: contributing to scientific knowledge in psychology; disseminating this knowledge through education of the public as well as MPA's membership; and applying this knowledge through professional practice to promote health and human welfare." To be able to complete this task, we need the assistance of you, our members, working within and outside the organization. We currently have multiple positions open within our state organization to assist with community outreach, building community, and building relationships with our national leadership and federal government. With this submission, I am inviting you to contact me to become part of these initiatives.

The executive council has previously communicated the need to reach out to you, our membership, to actively seek positions of appointment within our state leadership that we, as psychologists, can serve on. I am doing so as part of this, my first newsletter submission as President. In reviewing appointed boards and committees and task forces within our state, it has become apparent that in multiple places where psychologists' knowledge bases are significantly needed - we are missing. Many of these positions are appointment by the governor's office and are open to self-nominations and nominations from MPA.

Should we as an organization work actively to get one (or more) of our members as active participants on all of these committees, our expectation is that "behavioral health" would be at that moment equated with "psychologist" in Mississippi. These are not the only available opportunities out there for psychologists to make a difference in the direction of the state, but just an initial list. Now is the time. We as an organization need to take a stand. Step forward. Many of these committees and boards meet less than 4 times a year. This is doable and potentially direction changing for Mississippi.

Join us in serving in leadership within our organization or outside our organization, but join us! As you take your seat at the table, we, as the current executive council, want to know. Please let our Executive Director, Amy Wilson (mpassoc@mpassoc.org), or myself, Emily Johnson (ETJPhD@gmail.com) know. If you should already be serving as part of these or other boards, committees, or task forces, and we have not mentioned you, please let us know so we can recognize your leadership. If you are interested in exploring further open positions, contact us. If you should have a chance as part of your work-related responsibilities to recommend members to similar boards and need potential nominees willing to serve, contact any member of the executive council and we will reach out to our membership to support this initiative and get individuals committed to psychology and the dissemination of our science in positions that benefit our communities and the citizens of the state of Mississippi.

Let's take our seats at the table. Let's show others what psychologists offer.

Currently identified committees and boards that relate to psychological practice at the state level include: Mississippi Leadership Council on Aging Mississippi Department of Archives and History Mississippi Arts Commission Athletic Commission Civil Rights Education Commission Mississippi Civil Rights Museum Advisory Committee

State Board of Health Holocaust Commission

Department of Human Services Board Mississippi Humanities Council Board of Mental Health (MPA's Dr. Jim Herzog currently services as a member) Mississippi Autism Advisory Committee Autism Task Force

This is just a small sampling of committees and boards that relate to psychological practice; for complete list click here and let us know where you are serving!

President Elect Message

My Service to MPA David Elkin, Ph.D.

Let me start by thanking everyone for their support of MPA and for their trust in me in the coming years. I am humbled to serve as your President-Elect, and will do my best to live up to the high standards that you all expect and deserve. I will only be able to accomplish this with you feedback and by standing on the shoulders of those who have mentored me in this role. I want to thank Molly Clark and Emily Johnson for showing me how to lead as servants. I hope to continue the example set by them of organizational competence, fiscal responsibility, and advocacy for our profession. As many of you know, we face a new world of mental health delivery, one in which we actively partner with other professions. This is a good model, and one that has national commendation. But that does not mean that we can dilute what it means to be a psychologist. We will need to be ever-vigilant about our profession at the state and local level. We also need to make this organization the go-to voice for all psychologists in the state. My predecessors have done a fantastic job of this, and I will continue their work for the good of us all. To that end, we will be doing much more individual "selling" of MPA to all practitioners of psychology in the state, so that our profession can have a united voice. We will need to recruit the next generation of psychologists to see MPA as their home, and to join us. In order to do that, we need to position MPA as not only relevant but also necessary for psychologists in Mississippi. As we walk this path together, I would beg that all members feel free to offer suggestions for improvement in accomplishing our goals. Please feel free to email me at delkin@umc.edu with any comments. In closing, I look forward to carrying on the tradition of MPA and pushing us toward even greater good.

David Elkin

MPA 2015 Annual Convention

Mark Your Calendars and make your reservations for Wednesday, September 16 - Friday, September 18, 2015!

In addition to cutting edge CE Workshops and Conference programming, we hope you make time to enjoy this charming coastal community, golf at The Bridges or deep sea fishing!!

Hollywood Resort & Casino \$65 room rate \$35 golf package, including CART! 800-946-2442



Check <u>www.mpassoc.org</u> and your emails for developing information.

Government Relations: MPA Working for You

Penni Smith Foster, PhD Government Relations Officer

MPA Day at the Capitol 2015



The Mississippi Psychological Association successfully hosted our annual event, MPA Day at the Capitol, at the Mississippi State Capitol on January 7, 2015. It was a cold day in Jackson and only the second day of the 2015 legislative session. Psychologists who attended this event provided breakfast foods for state legislators and their staff. We visited with many

legislators from the Senate and the House of Representatives. We discussed the profession and practice of

psychology and communicated the importance of psychologists in our state's health care system. Our state legislators were excited to hear from us and welcomed our dialogue. Some of these legislators included:

Sen. Hob Bryan (Dist. 7-Itawamba, Lee, Monroe)
Sen. Videt Carmichael (Dist. 33-Clarke, Lauderdale)
Sen. Hillman Frazier (Dist. 27-Hinds)
Sen. Tommy A. Gollott (Dist. 50-Harrison)
Sen. Dean Kirby (Dist. 30-Rankin)
Sen. Will Longwitz (Dist. 25-Hinds, Madison)
Rep. Alyce Clarke (Dist. 69-Hinds)
Rep. Eugene Hamilton 9 (Dist. 6-DeSoto)
Rep. Stephen Holland (Dist. 16-Lee)
Rep. Ken Morgan (Dist. 100-Jefferson Davis, Lamar, Marion)
Rep. Bill Pigott (Dist. 99-Lamar, Marion, Pike, Walthall)
Rep. Bobby Shows (Dist. 89-Jones).

I would like to extend my gratitude to the many dedicated psychologists who made this event a success. Because of their attendance and support of MPA Day at the Capitol, the profession of psychology was well represented. We appreciate the following MPA members for participating:

Dr. Mardi Allen, Dr. John Askew, Dr. Pamela Banks, Dr. Molly Clark, Dr. David Elkin, Dr. Natalie Gaughf, Dr. Heath Gordon, Dr. Angela Herzog, Dr. Jim Herzog, Dr. Emily Johnson, Dr. Julie Radico and Amy Wilson, Executive Director

Thank you all for a job well done. We look forward to the same success at MPA Day at the Capitol 2016. The date for next year's event will be identified at a later time, but stay tuned for that announcement. I hope to see you all next year at this highly important interaction with our state legislators.

Penni Smith Foster, PhD FAC/Government Relations Officer

Legislative Update

Each legislative session, the Mississippi Psychological Association (MPA) monitors proposed legislation relevant to the practice of psychology and the health care of the citizens of the state of Mississippi. The MPA advocates to protect the public welfare and to ensure the competent and appropriate delivery of health care practices in our state.

Even before the session started on January 6, 2015, the Executive Council members met with elected officials and conferred with MPA lobbyist, Chip Reno, in preparation for our association to collaborate with state legislators on important bills and provide a voice regarding psychological practice and principles. MPA Government Relations Officer, Dr. Penni Foster, Mr. Reno and other Executive Council members are closely monitoring the following bills. Please review this proposed legislation and contact me or your Executive Council members if you would like to provide input.

We will continue to update our members on the efforts of MPA on behalf of the profession through email communication.

SENATE BILL NO. 2102

http://billstatus.ls.state.ms.us/documents/2015/pdf/SB/2100-2199/SB2102CS.pdf

AN ACT TO AMEND SECTIONS 41-21-67, 41-21-69, 41-21-71 AND 1 41-30-27, MISSISSIPPI CODE OF 1972, TO

INCLUDE LICENSED NURSE PRACTITIONERS AS MANDATORY EVALUATORS FOR CIVIL COMMITMENT AND TO INCLUDE LICENSED PROFESSIONAL COUNSELORS, LICENSED CLINICAL SOCIAL WORKERS AND LICENSED MARRIAGE AND FAMILY THERAPISTS AS POTENTIAL SECOND EVALUATORS FOR CIVIL COMMITMENT

SENATE BILL NO. 2581 http://billstatus.ls.state.ms.us/documents/2015/pdf/SB/2500-2599/SB2581CS.pdf

AN ACT TO REQUIRE INSURANCE COVERAGE FOR AUTISM RELATED TREATMENT; TO PROVIDE FOR THE LICENSURE AND REGULATION OF THE PRACTICE OF APPLIED BEHAVIOR ANALYSIS; AND FOR RELATED PURPOSES.

HOUSE BILL NO. 868 http://billstatus.ls.state.ms.us/documents/2015/pdf/HB/0800-0899/HB0868CS.pdf

AN ACT TO CREATE THE MENTAL HEALTH TASK FORCE TO UNDERTAKE A COMPREHENSIVE REVIEW OF THE STATE'S MENTAL HEALTH SYSTEM

Early Career Update

Julie Radico, PsyD Early Career Chair



Identifying Your Professional New Year's Resolutions For 2015

As we ring in a new year, we often think of ways in which we would like to better ourselves. Along with

our personal lives, it is important to reflect upon our professional goals. It is a time to think of patterns we have created in our careers and behavioral changes that may enhance our achievement and sense of professional fulfillment throughout 2015.

In our professional roles we often encourage others to engage in self-reflection. Similarly, it is important to take note of our professional behaviors and relationships and evaluate their importance and utility.

I encourage you to take the next 15 minutes to read through the following list of questions and identify goals, action plans, potential barriers, and solutions to remain focused on your professional success.

- Am I maintaining ongoing relationships with colleagues, as well as former supervisors, advisors, and professors? Can I dedicate 10 minutes a week to maintaining these relationships?
- Am I frequently behind in meeting my professional goals? Why?
- What financial strategies have I put in place to pay back my student loans? Are these strategies effective? Should I consult a professional for financial advice?
- Are my time management strategies effective?
- How can I stay on task at work and avoid self-created distractions?
- What strategies can I use to avoid multitasking at work?
- How do I change my schedule so I dedicate time for scholarly writing and reading?
- What projects am I thinking of completing this year? What is stopping me from submitting for IRB approval to enhance my chances of publishing work I want to complete anyway?
- What will I do each day and each week to engage in self-care and help avoid burnout or compassion fatigue?
- Am I sitting too much at work? How can I incorporate more activity (e.g. standing, walking) into my work day?
- What is stopping me from sharing an article/thoughts/questions on a national or state list serve?
- How can I advocate on behalf of my clients/patients? (e.g. within place of employment, locally, nationally, etc.)
- Is my voice being heard by my state legislators and representatives?
- Where do I want to be in my career in 5 years? 10 years? 15 years?

After reflecting on and choosing which of these questions to answer it will be important to identify realistic goals and

specific steps to work toward their achievement. Identify the type of goal (e.g. short term, long term, life-long) and each step that will be required in working toward its achievement. Many strategies can be used in mapping out steps toward this achievement. Sometimes it is helpful to work backwards from the goal to think about the resources and actions needed to reach that goal. For example, if the goal is to become more active in legislative advocacy, this might be defined as having a face-to-face meeting at the state capitol with your representative. In working backwards, you might think about that meeting and that you will need a topic for your advocacy, this may lead you to identify a personal interest or reach out to your state psychological association to find out if they have an organized Day at the Capitol and how you can participate.

Overall, I wish you great success and perseverance with achieving your professional goals in 2015.

FREE MEMBERSHIP

One-year first-time student membership

If you are interested, complete and mail the membership application found at http://mpassoc.org/membership-renewal/.

Be sure to include the name of your school, name of your program, and name of your department chair.

Contact Julie Radico, PsyD with questions. jradico@umc.edu

Disaster Response Network Update

Emily Thomas Johnson, Ph.D., BCBA-D

APA's Disaster Response Network began in 1991, when APA signed a Statement of Understanding with the American Red Cross (ARC). APA agreed primarily to help Red Cross develop and implement a disaster preparedness program to address mental health needs of disaster survivors and Red Cross workers, advise the development of a training course, and develop a network of trained, licensed psychologists to be mobilized in times of disaster.

Although psychologists do not offer therapy at disaster sites, they can help people build upon their own internal strengths to begin the process of recovering from the disaster. Psychologists help those in disastrous circumstances to build their skills of resilience to move from feeling hopeless to having a more long-term, realistic perspective. This process can include taking small steps toward concrete goals and connecting with others as they learn to cope with a disaster's logistical and emotional challenges.

MPA's Disaster Response Network (DRN) was developed to assist in this purpose. We continue to actively seek psychologists within our state to serve as volunteers. As I transition from the coordinator position this month, I want to express my deep appreciation for the members that have served diligently and those that have been open to considering deployment with the multiple events that we have experienced within our state.

As we transition to a new coordinator, it is time again to update the current roll and to invite more licensed psychologists to join our efforts. To join MPA's DRN, we require that a volunteer be a licensed psychologist within the association and meet the ARC requirements of response. All members of the DRN must have attended (in person or via webinar) the American Red Cross's Disaster Mental Health Fundamentals (DMHF) training (currently 3.0 hours) (or an equivalent training) prior to serving at a disaster site with ARC. This training is offered to our members that are interested in joining the DRN or updating training without charge.

To be eligible as a Disaster Mental Health (DMH) volunteer for either local or national relief operations through our partnership with ARC, an individual must have an active, unencumbered, and unrestricted state license issued by the state or U.S. territory licensing board overseeing the state or territory in which the individual lives. Additionally, the individual must (a) have an independent license (license to practice without supervision) and master's degree as a clinical social worker, psychologist, professional counselor, marriage and family therapist, psychiatric nurse, or psychiatrist OR (b) have a state license or state certification and master's degree as a school psychologist or school counselor issued by

a state board of education OR (c) have a state license and a bachelor's degree (BSN) as a registered nurse and American Nurses Credentialing Center (ANCC) certification for psychiatric and mental health nursing to include RN-BC or PMHNP-BC or PMHCNS-BC. DMH professionals are expected to work within their areas of competence when serving the American Red Cross. The licensing of mental health professionals is determined by individual states or U.S. territories whose regulations must be followed by the Red Cross.

As mentioned above, we are updating our roll. I encourage all MPA members to contact the DRN coordinator at mpadrn@gmail.com (1) if you already a member of the DRN, to confirm that you would like to continue to participate but have not received a direct e-mail; (2) if you are already a member of the DRN but, at the current time, you are no longer interested or unable to assist; OR (3) if you are not a member, but wish to be. Also, if you know of a colleague that is interested or that should be interested, feel free to let me know and we'll attempt to recruit.

Volunteering to serve within the DRN does not commit you to becoming activated should a disaster occur. As a volunteer, you would be contacted in the event of a disaster, but as a volunteer you always have the option of deciding then if you could participate and to what extent you could participate. Volunteering really means a commitment to preparing oneself for future contingencies.

If you have not taken the required ARC course, you can still submit an application to the DRN. That step would put you on

the list of those needing the Disaster Mental Health Fundamental course and assist us in knowing who needs to be contacted as this next session is planned.

Please feel free to contact the MPA DRN Coordinator (mpadrn@gmail.com) or Amy Wilson (amy.wilson@mpassoc.org) with any questions or comments.

Psychology & Law

Gilbert S. Macvaugh, III, Psy.D. Chair, Psychology & Law Task Force

The Role of Psychologists in Civil Commitment Proceedings

Psychologists play an important role in civil commitment proceedings, not only here in Mississippi, but also in other jurisdictions throughout the country. In some jurisdictions, for example, appropriately qualified psychologists may serve as evaluating and testifying experts in a range of different types of civil commitment proceedings, including civil commitment proceedings for sexually violent predators; civil commitment proceedings for prisoners who are in need of inpatient psychiatric treatment in a hospital setting; and civil commitment proceedings for persons who are in need of involuntary treatment for substance-related disorders.

In the sections below, I have attempted to outline what I hope will be useful information for psychologists to know about civil commitment in Mississippi - and why I believe psychologists can and should continue to play a significant role in these types of legal proceedings in our state.

Where Can Psychologists Find the Civil Commitment Law in Mississippi?

How Do Psychologists Differ from Other Professionals in the Civil Commitment Context?

Future Directions for Psychologists in Mississippi Civil Commitment Proceedings

FOR COMPLETE ARTICLE AND REFERENCES, click here.

Gilbert S. Macvaugh III, Psy.D. Clinical & Forensic Psychology Services, Inc. Greenville, MS

APA Council Representative Report

Angela Herzog, PhD

APA Council Representative

Outcome of Council's Mega Issue Discussion on Health Care Reform

*Below is a portion of the important report, please click the link at the bottom of this section for full report

In February, APA's Council of Representatives engaged in its first mega issue discussion on health care reform. In advance of the meeting, Council members received the mega issue question, which focused on identifying the opportunities for psychologists in health care reform and the gaps that need to be closed to support APA's work. Council members were also asked to identify APA's highest priorities and the implications for APA's strategic direction at a macro level. The comprehensive, staff-prepared background document also included information about APA's strategic plan and its health-related goal and strategic initiatives, an overview of the Affordable Care Act and APA's legislative priorities, highlights of APA and APA Practice Organization (APAPO) activities related to health care reform, and implications of health care reform across key areas for psychology, together with an appendix listing APA's health-related policies.

At the Council meeting, members convened in small groups to delineate the opportunities and gaps that need to be filled (e.g., new policies) for both the field of psychology and for psychologists as a whole - as health care providers, educators, and researchers. The preliminary analysis of the mega issue responses is attached. The summary of responses, which Council also received, is presented below.

Summary of Council Responses

Opportunities for Psychology - About half of the Council respondents pointed to the need to clarify our identity related to primary care and advance the skills for which we are uniquely qualified.

Gaps for Psychology - Three significant gaps received the highest endorsement. These related to the need for public education of psychology's contributions, a paradigm shift to health care, and incorporation of science and data into our health care activities, including program evaluation and team effectiveness measures.

Opportunities for Psychologists - About a fourth of respondents pointed to the need to demonstrate the impact on health care outcomes and costs related to behavioral interventions. Endorsement was more or less evenly distributed across the other opportunities identified.

Gaps for Psychologists - About a third of respondents noted the need to increase our involvement in interprofessional training, including a focus on health psychology and team-based treatment approaches; and 20% stressed the need for public education about the roles and contributions of psychologists to health care.

*Click the link below for complete information on the following:

Three Key Themes and Challenges that Emerged from the Council Discussion:

- Issue #1 Identity of Psychology/Psychologists
- Issue #2 Education and Training
- Issue #3 Science

Immediate Outcomes of Council's Discussion Subsequent Actions Taken by the Board of Directors Recent and Ongoing APA and APAPO Activities Related to Council's Discussion



structure and initiatives of our APA Center for Psychology and Health and will guide APA's future strategic planning efforts.

Click here to download and view entire report.

Angela Herzog, Ph.D., APA Council Representative

Continuing Education Online

John Askew, PhD Continuing Education Chair

CONTINUING EDUCATION UPDATE

It's that time again - by June 30th 2015, Psychologists licensed by the Mississippi Board of Psychology must show evidence of a minimum of twenty (20) clock hours of Board-approved of continuing education (CE) activities during the biennial period of reporting period that began on July1st, 2013. Continuing education activity is reportable only in clock-hours, and a minimum of two (2) of these twenty (20) clock-hours involve topics in professional ethics or legal issues in the delivery of Psychological services. We bring this deadline to your attention now so that you can review your accrued activities to date and develop a plan to complete the required CE activities without experiencing any "CE at the last minute" angst to meet the June 30th deadline.

Continuing Education encompasses a wide range of training designed to provide or update knowledge and skills. The Board defines acceptable continuing education activities as (1) formally organized and planned instructional experiences offered by an American

Psychological Association approved (APA-approved) or Board approved provider, with objectives compatible with the professional continuing education needs of practicing psychologists, or (2) registered attendance at psychological or interprofessional conferences or conventions.

There is no limit on the number of clock-hours that may be applied toward satisfying the continuing education requirement during a biennium for activities offered by APA-approved sponsors or Board-approved providers. These clock-hours may include home study activities such as online courses. If a psychologist registers for and attends psychological or interprofessional conferences or training programs not offered by APA-approved or Board-approved providers, but directly related to the practice of psychology and lasting one full day or longer, the Board will accept three (3) clock hours for each such conference or training program. During a biennial reporting period the Board will accept a maximum of twelve (12) clock hours from such conferences or training programs toward satisfying the continuing education requirement. Such credit requires no advance approval; however it may be helpful to retain evidence of conference registration and program information to demonstrate that the activity meets the "directly related to the practice of psychology and lasting one full day or longer" standard.

Remember that CE activities must be obtained from an American Psychological Association approved (APA-approved) or Board approved provider. These providers must meet standards that guarantee the quality and appropriateness of the programs they offer. A list of Board-approved providers may be obtained from the Board office and is available on the Board website (link at end of article). However, the Board is also aware that there are many professional education experiences and programs that are of excellent quality and appropriateness, even though they might not be sponsored by an APA- or Board-approved provider. The Board will, on a case by case basis, review and potentially approve a meritorious program provided that a written request for approval is made prior to the scheduled program. The request must be received in sufficient time, preferably one month or more, for the Board to review the program for content and appropriateness, insuring that the program has objectives compatible with the professional continuing education needs of practicing psychologists. Remember, prior approval is a requirement - CE activities that are not provided by APA or Board approved providers, regardless of their quality or appropriateness will not be accepted after the fact and will not count toward the required 20 hours in the reporting period.

The Board will perform a random audit of no less than five (5) percent of the CE reports submitted by licensed

psychologists; therefore, each licensee should retain corroborating documentation of their continuing education participation. Corroborative documents include certificates of completion that include a statement of APA- or Board-approved provider, receipt of registered attendance or roster of attendance at professional conferences, or other unequivocally clear evidence of the number of hours of CE and provider status. Although corroborating documentation is not routinely required as part of the licensee's CE report submission, the Board may, at its discretion, request such documentation.

For the complete text of "Rule 12 - Continuing Education" please refer to the RULES AND REGULATIONS OF THE MISSISSIPPI BOARD OF PSYCHOLOGY at:

http://www.psychologyboard.state.ms.us/Psy%20Documents/Rules_Regulation_20130225.pdf.

A list of current Board-approved CE providers is at: http://www.psychologyboard.state.ms.us/Psy%20Documents/BOARD_APPROVED_CE_PROVIDER.pdf.

For more detail about CE credits from non-approved providers, visit: http://www.psychologyboard.state.ms.us/Psy%20Documents/CE_CREDIT_NON-APPROVED_PROVIDERS.pdf

Question or concerns? Contact me at john.askew@va.gov

John Askew, PhD Continuing Education Chair

Region 2

Heath Gordon, PhD Region 2 Representative/Website Chair

Region 2 Counties:

Sharkey, Issaquena, Warren, Humphreys, Yazoo, Hinds, Holmes, Madison, Rankin, Attala, Leake, Scott, Winston, Neshoba, Newton, Noxubee, Kemper, Lauderdale



Greetings to all my colleagues in Region 2, and thank you for re-electing me to serve as your representative on the Executive Council. I enjoy being a contributing member of the leadership for our association, and I have learned a great deal over the past few years by just getting involved. While my mentors in graduate school always encouraged involvement in professional associations, only a few encouraged participation in state and/or local organizations. I am grateful to those who did and for those prior experiences as that framework led me to become involved with MPA when I returned to my home state.

I since have witnessed the value our state association has toward maintaining the integrity of our profession, and more specifically, toward protecting our right and privilege to practice as psychologists here in Mississippi. We all know healthcare is evolving in many ways; some are beneficial, while some are undesirable. MPA serves as our voice when there is question and/or opportunity for input in areas that affect our practice. Being a member of MPA gives us strength in number and provides the Executive Council and other volunteers with the financial support to do the work.

More importantly, and perhaps naïvely, I was totally unaware that this changing landscape is promoting competition among closely associated fields in those areas for which state regulations provide us license, such as psychotherapy,



Board of Psychology but have learned otherwise. Over the past term, I witnessed that MPA is both the leader and forerunner in promoting our profession, protecting our license to practice, and most importantly, guarding our livelihoods. MPA does work closely with the Board when possible, but the two are distinctly different in ways I was not aware until becoming actively involved in leadership.

We all make a difference by just being a member of MPA but also through helping in small ways. For example, you may already know that legislative advocacy on our professional behalf is now necessity in our changing healthcare system. But, like me, you may not know that MPA's legislative advocacy efforts are an ongoing process that needs financial support and volunteer assistance year-round. I can assure you that a number of the current (and past) MPA Executive Council members dedicate a great deal of their time to and are skilled in the art of political advocacy. They are a joy to watch at MPA Day at the Capital each year. I, most assuredly, am not. But, I can wear a suit, and my "ice bag busting" and "toting things from Angela's car" skills are in the High Average range or higher, perhaps even better than last year although I have no reliable rate of change index and its mostly subjective impression. I did get a few encouragers though from those trained in the art of encouragement.

So, as I begin this new term, I hope 2015 year will include establishing new collegial relationships with those of you who allow me to represent our region again, and I welcome any opportunity for you to contact me and share your professional interests or concerns. Specifically, I would like to know what you are involved with in our region that is making a difference in your community and/or the lives of others. What are you excited about within your professional world? What is MPA doing that you like? How might MPA better serve your needs and interests in 2015 and beyond? I look forward to hearing from you.

Heath

Email: webadministrator@mpassoc.org

Region 3

Sara Jordan, PhD Region 3 Representative

Online Resources for Working with Children and Adolescents: A Follow-Up to Dr. Albano's Convention Workshop on Child Depression



The final day of the September 2014 MPA Convention, an additional afternoon CE Workshop was offered led by Dr. Anne-Marie Albano workshop on child depression. For those who attended, I trust you found it well worth your time! During the workshop, Dr. Albano referred to a number of online evidence-based resources relevant to treating children with depression. The first website she mentioned was www.effectivechildtherapy.com. As I mentioned in the July newsletter, this website offers information for both parents and professionals regarding evidence-based treatments for a variety of mental health concerns of children and adolescents, and was developed largely by APA Division 53, the Society of Clinical Child and Adolescent Psychology. Dr. Albano also mentioned some public domain assessment instruments and treatment manuals that are available online. I have compiled a list of links to these resources in the event you may find

them useful in your work with children and adolescents.

Assessment/Screening Tools Children's Depression Rating Scale (CDRS) - clinician scored measure of depression in youth ages 6-12 based upon depression-specific clinician interview https://student.lifewiseac.com/pdfs/012696.pdf

Moods and Feelings Questionnaire (MFQ) - child self report screen for depression for ages 7 to 18

https://depts.washington.edu/hcsats/PDF/TF-

%20CBT/pages/1%20Assessment/Standardized%20Measures/Moods%20and%20Feelings%20Questionnaire%202.08.pdf

Patient Health Questionnaire for Adolescents (PHQ-A) - 9 item adolescent self-report screening measure for depression http://www.uacap.org/uploads/3/2/5/0/3250432/phq-a.pdf

Treatment Manuals

Several therapist manuals and teen workbooks developed by Greg Clarke and Peter Lewinsohn and colleagues as part of 2+decades of treatment outcome research on adolescent depression are available free of charge for download. The STEADY manual and workbook, specifically mentioned by Dr. Albano, is designed for individual treatment and corresponds to the fourth intervention in the table, "Brief Individual CBT Program". http://www.kpchr.org/research/public/acwd/acwd.html

*I also ran across a rather extensive*list of screening tools and rating scales for a range of child mental health concerns. (Note: This list includes a mixture of free, downloadable and copywrited/published measures.) http://www2.massgeneral.org/schoolpsychiatry/screeningtools table.asp

Region 4

Bill Martin, PhD Region 4 Representative



This has been a busy period for MPA's Executive Committee with a number of professional guild issues pending with the legislature and with continuing efforts to streamline policies and

procedures in the governance and management of MPA itself. The legislative issues are discussed in detail elsewhere in this newsletter but I wanted to share with Region 4 psychologists just how impressed I have been with the due diligence and professionalism I have seen among your MPA leadership. Discussions, many of which occur within very tight timelines, have been open, well considered and mature with conscientious attention to protecting both psychology and the consumers of psychological services within Mississippi. The research into these issues and the simple effort of sharing and debating have demanded very considerable commitments of time and resource from those few who are representing our profession in the state. I encourage each of you to find some opportunity to personally thank those who have been willing to serve in the demanding leadership roles so essential to the future health of our profession. I also encourage each of you to consider how you might become more involved, investing in our chosen profession and contributing to the collective voice of psychology here in Mississippi.

MPA continues to be very active in supporting the efforts of the Coalition of Healthcare Organizations for Resiliency Training (COHORT). The infrastructure of the COHORT is in place with an active Steering Committee overseeing implementation and program evaluation. Train-the-Trainer programs have been conducted for MPA, MS Counseling Association, MS Public Health Association and OCH Regional Medical Center (Starkville) and we now have a cadre of resiliency trainers ready to conduct the five-part resiliency workshop series: (1) Stress and Trauma, (2) Managing

Depression, (3) Managing Anger, (4) Communicating with One Another and (5) Helping Children Cope with Change.

I'll end with a call for action. With the start of the New Year, and with the above accomplishments in place, this is the time to become active in getting this public education effort out to our communities. I encourage each of our MPA trainers to reach out to host groups in their communities to advocate for and to then deliver the resiliency series. This is a Win-Win opportunity. Not only do we make available basic resiliency and coping resources to the public, we help define and promote the profession of Psychology, increasing our visible profile and helping the public more clearly understand what value psychologists add to the community.

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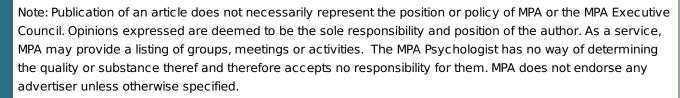
Submit an Article

Natalie W. Gaughf, PhD, ABPP

Communications Chair

The Mississippi Psychologist is the Mississippi Psychological Association's (MPA) newsletter for its members, associates, and friends of psychology.

If you are a member of MPA or have an interest in psychology in the state of Mississippi, we invite you to submit an article. Please contact the Communications Cair for submission guidelines.



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