# THE MISSISSIPPI PSYCHOLOGIST

### **NEWSLETTER OF THE**

### MISSISSIPPI PSYCHOLOGICAL ASSOCIATION

In This Issue

From the President's

**Desk** 

**Call for Programs** 

**President Elect** 

MPA Day at the Capital

**Disaster Resources** 

**Doggie on the Airplane** 

Region 1

Region 2

Region 3

Region 4

**Submit an Article** 

### Winter 2016



#### From the President's Desk

Molly Clark, Ph.D., ABPP

**MPA President** 

I am excited about recent developments within and for our guild organization. Our Annual Day at the Capitol was a huge success! Being visible leads to inclusion; and being included at the table where important decisions are made, impacts our profession. I



discussed at our Annual Convention that being an active member whether it be in your promotion of MPA, your financial support and/or participation in MPA activities advances our profession forward. Therefore, your behavior matters! Our Executive Council has been extremely active on our member's behalf and have begun efforts to increase our membership, include our membership in important task forces and committees and continue to monitor legislative activities and practice that impacts us all. I am thankful to serve in the role as President and as always welcome any suggestions or questions about how MPA is working for our profession.



### **Call for Programs**

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

**GENERAL INFORMATION** 

The 2016 Annual Convention of the Mississippi Psychological Association (MPA) will be held at the

Hollywood Casino Gulf Coast from Wednesday, September 14th through Friday, September 16th, 2016. The convention will provide a variety of opportunities for sharing scientific and practice presentations, and for earning continuing education (CE) credits. We hope you will join us for an exciting meeting by submitting your proposed program or presentation for consideration, and by registering to attend.

#### DUE DATE

Proposals for poster presentations, panel discussions, and research presentations/symposia will be considered for inclusion in the program if they are postmarked by June 1st, 2016. The deadline will not be extended. Submissions received after this date will only be considered on a space-available basis.

#### **PARTICIPATION**

MPA Members and Non-Members are welcome to submit a proposed program or presentation for consideration. Program submissions are encouraged from individuals and groups who work in various settings. Reports of empirical research, diagnostic and treatment techniques, intervention strategies, and program experiences are welcomed. Preference for acceptance will be given to programs that include specific instruction related to taking research results and applying them to the practice setting. We also strongly encourage students and faculty from colleges and universities to submit proposals and to be actively involved in the convention. All presenters must register for the convention.

FOR COMPLETE CALL FOR PROGRAM ARTICLE - Click Here



#### **MPA President Elect**

## Ruth M. Shoemaker, Ph.D. President Elect

I've developed a new appreciation for the members of the Executive Council of MPA. Their work and dedication to the members and the field of psychology as a whole is evident in the hours of work they put into



their various positions. Since our MPA Convention in September we've had two hour-long teleconferences and two face to face meetings in Jackson. I regret that I was not involved sooner in this process of supporting our profession and hope that you all will let it be known to one of us if are interested in participating at this level.

Much of the work that MPA does involves legal/ethical issues relating to our practice. In this regard I want to share highlights from an interesting article by Eric Harris, J.D., Ed.D., that was published in the November, 2015 issue of the National Psychologist, pertaining to pitfalls in doing counseling/psychological testing with children and adolescents whose parents are divorced and divorcing. He states that custody cases,

particularly high conflict cases, present the highest risk of disciplinary complaints. Additionally he states that a good percentage of risk calls come from psychologists working with children whose custody has been decided long ago, but the conflict over the children continues. Here are three recommendations for establishing parameters that will increase the odds of successful treatment for minors and reduce the odds of a successful complaint.

As part of informed consent at the outset of treatment, it is important to have permission of both parents before evaluating or treating a minor child. Initiating treatment on the request of one parent without consulting with the other creates risk to the therapist and to the treatment. Dr. Harris's firm advice is that we adopt a policy of not working with a minor child without consulting with or attempting to involve the non-presenting parent and at least securing non-objection to the treatment unless the presenting parent can demonstrate that he/she has sole legal custody, or sole medical decision-making authority. Examination of the custody agreement and consultation about its contents may be required; however, it is not necessary if the presenting parent is willing to allow consultation with the other parent.

Secondly, we need to clarify the confidentiality parameters of the children's treatment information. By signing an agreement, parents waive their right of access to the child's treatment records. General information about the status of treatment can be given. It should be explained that therapy is most effective when a trusting relationship exists between the psychologist and the patient. Privacy is especially important in securing and maintaining that trust. One goal of treatment is to promote a stronger and better relationship between children and their parents. However, it is often necessary for children to develop a "zone of privacy" whereby they feel free to discuss personal matters with greater freedom. This is particularly true for adolescents who are naturally developing a greater sense of independence and autonomy. If the child is a serious risk of harming him/herself or another, parents are informed. A parent-child confidentiality agreement template is available at Trustinsurance.com/resources.

A final recommendation to help avoid being dragged into court to testify is to develop a clear contract about court testimony with the parents before treatment starts. The best rationale for such an agreement is protecting the child from having his or her therapeutic narrative become a weapon to be used by one parent against another. Parents should be informed that if a psychologist is subpoenaed, he/she is ethically prohibited from providing a professional opinion on custody, visitation, or parenting capacity either in court or to a custody evaluator or guardian ad litem.

I have developed an informed consent form for parents of divorced children and have it on my website under "Downloadable Forms" if you'd like to take a look (AnchorPsychology.com). Please send comments to me at anchorpsychology@aol.com or to the list serve.

Eric Harris, J.D., Ed.D., is a lawyer and psychologist in Massachusetts who provides risk management training for the American Insurance Trust.



### **MPA** Day at the Capital

# Penni Foster, Ph.D. Government Relations Officer

MPA Day at the Capitol 2016 was a success! The Mississippi Psychological Association honored Senator Dean Kirby (R-Rankin) with the Distinguished Legislative Achievement Award for his dedication to protecting the healthcare of residents of Mississippi and



serving as an advocate for public health. MPA also honored Dr. Angela Herzog with the Distinguished Practitioner Award for her many years of service as a psychologist providing superb and compassionate care to the many citizens of our state. Congratulations, Senator Kirby and Dr. Herzog!

Our MPA representatives spoke to many legislators and talked about the practice of psychology and our role as psychologists. I would like to extend my gratitude to the people below who attended Day at the Capitol, provided donations for the big event, and represented MPA so well. The day was a success because of you. Thank you.

Dr. Mardi Allen

Dr. John Askew

Dr. Pamela Banks

Dr. Molly Clark

Dr. Phil Cooker

Dr. Natalie Gaughf

Dr. Heath Gordon

Dr. Angela Herzog

Dr. Jim Herzog

Dr. Emily Johnson

Dr. Sara Jordan

Dr. Bill Martin

Dr. Keith Noland Dr. Amee Patel

Dr. Ruth Shoemaker

Dr. Monica Sutton

Amy Wilson, MPA Executive Director

Chip Reno, MPA Lobbyist





**Recognizing Your Own Needs When Providing Disaster Mental Health Services** 

# Amee Patel, Ph.D. Disaster Resource Coordinator

When providing disaster mental health services, psychologists may find themselves overwhelmed by the needs of the individuals they serve and be susceptible to secondary trauma or compassion



fatigue. This can be particularly prevalent when the disaster also affects the psychologist or his or her family. Warning signs of secondary trauma and/or compassion fatigue include the following:

- Feelings of being overwhelmed, drained, exhausted, or burned out
- Difficulty detaching from work experiences or feeling related to clients and their situations
- Loss of pleasure of anhedonia
- Social isolation or withdrawal from intimate relationships.
- Feelings of guilt or shame, particularly guilt for not having experienced trauma
- · Overidentification with the client
- Hopelessness, pessimistic thoughts
- · Low self-efficacy or self-worth
- Altered thoughts, particularly related to safety, trust, esteem, power/control, and intimacy
- Overworking
- Perfectionism/rigidity
- Substance use
- Intrusive throats
- Uncontrollable maintaining boundaries with clients
- Sleep distrubance

Future newsletter articles will address coping strategies for incorporating self-care into professional practice. In the meantime, if you are experiencing a high level of distress or any of the above symptoms, it may be worthwhile to seek professional consultation or guidance or access mental health services.

Information adapted from "Self-care for trauma psychotherapists and caregivers: Individual, social, and organizational interventions" by Donald Meichenbaum, Ph.D.



### Who Let That Doggie On The Airplane?

Most people enjoy dogs and find great pleasure in having them around. All of that is fine, but there is a growing trend among those who want to be with their dogs that should be of particular concern for psychologists. Psychologists are frequently being asked by their patients to attest to their need for an Emotional Support Animal (ESA) for mental health purposes, which allows that animal to be present in what previously would have been a restricted environment.

Theoretically, the presence of the ESA has positive psychological impact on the owner and reduces the impact of a diagnosed psychological disability from which the owner suffers. In order for an ESA to be classified as such, a mental health professional must write a letter stating that presence of the pet mitigates symptoms of that disability.

Most mental health professionals do not know the complexity of this area of regulation. Yet, many seem more than happy to certify their patients as being in need of an ESA. Under the law, ESAs are not the same as psychiatric service animals and they do not require the training that is necessary to certify an animal as an American's with Disabilities Act (ADA)-compliant service animal.

However, ESA status does allow the animals to be in otherwise restricted areas such as aircrafts and housing that otherwise prohibit pets. The Air Carrier Access Act (ACAA, 14 CFR 382, 2003) specifically requires airlines to allow service animals and ESAs to accompany their handlers in the main cabin of an aircraft at no charge.

While appropriate documentation from a psychologist does not allow the ESA access everywhere, it requires waiving a no-pet rule and also any related damage deposit in housing that does not otherwise allow pets.

FOR COMPLETE WHO LET THAT DOGGIE ON THE AIRPLANE ARTICLE - Click Here



Your Region Representatives would like to hear from you! Let them know how they can represent you or assist you with MPA related needs.

### **Region 1**

Philip G. Cooker, Ph.D. Region 1 Representative

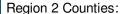


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### **Region 2**

Heath Gordon, Ph.D.

Region 2 Representative/Website Chair



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



Dear Region 2 Members,

As we begin 2016, I am seeking feedback from MPA members in Region 2 in effort to identify any needs or goals for our region's future. I attempted to solicit this information in the last newsletter but did not receive any responses. I recognize the holidays are a busy time and hope to garner greater interest and participation through this second effort. Please feel free to send me a quick email and share any of the following: What is going well within MPA and/or our region professionally? What would you like to see different? Are there any goals you would like for us to consider

as a region and/or association? Are there any professional collaborations we might consider? I welcome any thoughts and suggestions and look forward to hearing from you.

Thank you in advance.

Heath

Email: webadministrator@mpassoc.org

### **Region 3**

Sara S. Jordan, Ph.D. Region 3 Representative

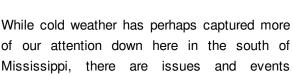


Sara S. Jordan

Sarajordan@usm.edu

### **Region 4**

### Bill Martin, Ph.D. Region 4 Representative





occurring within the Legislature about which we should be informed and where you as individuals may want to communicate your thoughts directly to our elected officials. These issues, described elsewhere in this Newsletter, do impact both the practice of Psychology and the scope of practice of other professional groups. They are worthy of your attention.

That being said, I can tell you that a hard core of our MPA colleagues have been and continue to be vigilant and active. They are working closely with MPA's Lobbyist, Chip Reno, and with members of the Legislature in maintaining a visible, recognizable presence and in influencing legislation sustaining high standards of education and practice among practitioners offering services to the public.

This not inconsiderable work load falls disproportionally on a relative few. Trying to cite names would invariably leave someone out, but these individuals are nevertheless quite recognizable even within this Newsletter. I urge each of you to find the opportunity to personally and professionally express your appreciation. Without their efforts, I assure you the practice of Psychology in Mississippi would not be the same. And by the way, they sure could use your help, your active participation, if you can spare the time and energy.

Bill Martin

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# FREE MEMBERSHIP

One-year first-time student membership

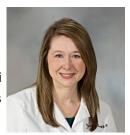
If you are interested, complete and mail the membership application found at <a href="http://mpassoc.org/membership-renewal/">http://mpassoc.org/membership-renewal/</a>.

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

#### **Submit an Article**

### Natalie W. Gaughf, Ph.D., 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 Chair for submission guidelines.

Note: Publication of an article does not necessarily represent the position or policy of MPA or the MPA Executive Council. Opinions expressed are deemed to be the sole responsibility and position of the author. As a service, MPA may provide a listing of groups, meetings or activities. The MPA Psychologist has no way of determining the quality or substance thereof and therefore accepts no responsibility for them. MPA does not endorse any advertiser unless otherwise specified.

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