

THE MISSISSIPPI PSYCHOLOGIST

NEWSLETTER OF THE

MISSISSIPPI PSYCHOLOGICAL ASSOCIATION

In This Issue

[From the President's](#)

[Desk](#)

[MPA 2015 Convention](#)

[Convention Planning](#)

[Psychology and Law](#)

[Region 1](#)

[Region 2](#)

[Region 3](#)

[Region 4](#)

[Disaster Response](#)

[Network](#)

[Invited Submission](#)

[Submit an Article](#)

Summer 2015



***Focus on Success:
Our Profession and Beyond***

**MPA Annual Convention
September 16-18, 2015**

Hollywood Hotel and Resort
Bay St. Louis, Mississippi

**Earn up to 15.0 CE credits!
Including 2.0 Ethics hours.**

We hope to see you in Bay St. Louis for our 66th Annual Convention "Focus on Success: Our Profession and Beyond".

From the President's Desk

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



Making MPA Sustainable

As we have passed the halfway point my period as President, planning for the transition to someone new begins. As many of you are aware, we are currently in the process of closing out the nomination period and beginning the election process for the upcoming year. We appreciate those of you who responded during the nomination period, but have been disappointed that 95% of our membership did not respond to the call for nomination for our future leadership.

Concern has been expressed by members of the Executive Council regarding our ability to demonstrate applicability to our membership when we are failing to receive responses to our attempts to survey the membership regarding the current needs of practitioners and academics within our association.

We are also aware that if we are not talking about the needs of ourselves or interacting with each other as members, we lose touch with one another and also do not make an effort to bring others into (or back into) our association. For MPA to continue to push forward with our initiatives and to further our purpose to be the voice of psychology, we must find a way to sustain our organization, including how to keep current members and recruit new members.

Organizations such as MPA are sustained through member participation. MPA is primarily a volunteer organization. Although we have an Executive Director to assist in the day-to-day business of our organization, we need member participation to make a difference in our field and to provide a necessary service to psychologists within Mississippi. We need you!

At the regional level, we have elected 4 individuals to assist in speaking for our membership. However, these elected representatives cannot represent a membership that they do not hear from or receive responses from. In case you are unaware of your regional representative, here is a review of which counties are represented by whom and contact information:

Region 1: Tunica, DeSoto, Tate, Marshall, Benton, Tippah, Alcorn, Prentiss, Tishomingo, Coahoma, Quitman, Panola, Lafayette, Union, Pontotoc, Lee, Itawamba, Bolivar, Sunflower, Washington, Tallahatchie, Leflore, Yalobusha, Grenada, Montgomery, Carroll, Calhoun, Chickasaw, Monroe, Webster, Clay, Choctaw, Oktibbeha, Lowndes

Region 1 Representative: Phil Cooker (cooker@olemiss.edu)

Region 2: Sharkey, Humphreys, Holmes, Attala, Winston, Noxubee, Issaquena, Yazoo, Warren, Hinds, Madison, Rankin, Leake, Scott,

Neshoba, Kemper, Scott, Newton, Lauderdale

Region 2 Representative: B. Heath Gordon (Brian.Gordon2@va.gov)

Region 3: Claiborne, Jefferson, Copiah, Simpson, Smith, Jasper, Clarke, Adams, Franklin, Lincoln, Lawrence, Jefferson Davis, Covington, Jones, Wayne, Wilkinson, Amite, Pike, Walthall, Marion, Lamar, Forrest, Perry, Greene

Region 3 Representative: Sara Jordan (sarajordan@usm.edu)

Region 4: Pearl River, Hancock, Stone, Harrison, George, Jackson

Region 4 Representative: William "Bill" Martin (wlm1843@gmail.com)

Your regional representatives are needing to hear from you today regarding how MPA can better serve you and your professional activities. As we move forward as an organization, we want to step forward based on the needs of the members not based on guesses of what may be needed.

Finally, elections are opening. I am calling on each of you to respond to the ballot when it is received. We, as an EC, are very interested in the future of the association being determined by the majority of the membership and not a small number of members. As of today, we are not hearing from the majority. If we do not hear from the majority, we cannot grow the field of psychology in Mississippi. I know you all have opinions and care about your practice and psychology as a field. Therefore, I am calling on you at this time to actively express those opinions to the organization.

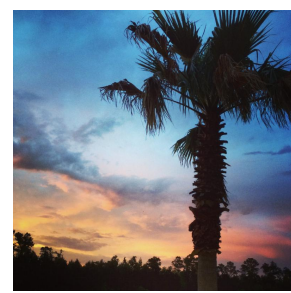
I look forward to receiving your responses to the election and making an announcement during convention on the choice of the majority of our membership!

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 www.mpassoc.org and your emails for developing information.

MPA 2015 Convention Planning

Molly Clark, PhD, ABPP
Past President and 2015 Convention Chair



Dear Members,

I look forward to seeing you again or meeting you for the first time in Bay St. Louis, MS, for our 66th Annual Convention "Focus on Success: Our Profession and Beyond." We have a variety of continuing education opportunities that were designed with you all in mind. While I could write for days on all of the exciting events that we have planned, I just want to highlight a few.

First, let me invite you personally to join me for our annual **Poolside/Lazy River Reception**. This is a great way to end a day of pre-conference workshops or to kick off convention by socializing with new and established colleagues, while enjoying appetizers and drinks. Our regular convention starts on Thursday with the **Opening Address by APA Presidential Candidate, Dr. Puente**, who will speak to us about why your voice is important to psychology's future. Come have lunch with us and learn how **MPA's Government Relations** Committee and Executive Council has been working for you in Mississippi.

Close out Thursday with a trip over to **The Bridges Club House** (transportation provided) for more food and fun at the Poster Session and Silent Auction. We are set to have door prize giveaways, while you support students and colleagues from around Mississippi presenting their research. This year's silent auction proceeds will go to the MPA Government Relations fund, which assists our organization have a presence on the state legislative level through its government relations initiative.

Finally, MPA will have our open **Membership Meeting** and Friday sessions and workshops that are too good to let them pass you by. Go to

our website at <http://mpassoc.org/convention-ce-events/> to register for convention and get hotel information. Again, I look forward to seeing you all there!

Psychology and Law

Gilbert S. Macvaugh III, PsyD, ABPP **Chair, Psychology and Law Task Force**



Civil Commitment Training for Psychologists

Colleagues:

As a follow-up to a previous issue of this newsletter, and as Dr. Molly Clark has announced in several recent posts to the MPA listserv, the Mississippi Board of Psychology's civil commitment certification training will be offered during the 2015 MPA Annual Convention in Bay St. Louis on Friday, September 18, 2015, from 9:00 a.m. to 2:00 p.m. As the consulting instructor for the Board of Psychology's civil commitment workshop, I would like to encourage practicing psychologists who are not currently certified, and especially those with an interest in the specialized practice of forensic psychology, to consider signing up for the training at this year's Convention. I also would like to highlight four different reasons why psychologists should consider registering for this important annual training opportunity sooner rather than later.

First, the Board of Psychology's upcoming civil commitment training will mark the first time that this particular workshop has been held at the MPA Convention in several years. Although there seems to have been less demand for the training and fewer psychologists who have pursued the civil commitment certification in recent years, the specific reasons for this remain less clear at the present time. In several discussions on the MPA listserv pertaining to civil commitment issues over the course of the last few months, some of our colleagues have expressed legitimate concerns as to the overall value of obtaining the civil commitment certification. These concerns have included questions regarding the time commitment and cost of the certification training, questions related to the amount of time that is generally required to complete these types of court-ordered evaluations (and to provide the associated court testimony that may be needed), as well as other types of questions surrounding the type of compensation that is typically provided to psychologists who perform these services for the courts. Yet, others with significant experience in conducting civil commitment evaluations in Mississippi also have posted useful information on the MPA listserv regarding psychologists' involvement in these types of proceedings (such as Dr. Steve Ellis, whom I would like to personally recognize and thank for his thoughtful and very helpful posts to the listserv regarding these issues). Notwithstanding the lingering concerns that have been raised by some of our colleagues, one thing remains certain: the need for qualified psychologists who hold the

Board of Psychology's civil commitment certification currently appears to be at an all-time high, especially in certain counties around the state. The lack of certified psychologists to perform civil commitment evaluations in certain parts of the state may also have led to recent proposals to amend the Mississippi civil commitment statute during a previous legislative session. As you may recall, the proposed amendments to our civil commitment law were designed to allow licensed, non-doctoral level mental health professionals (LPCs, LMFTs, LCSWs) to serve as court appointed evaluators and testifying experts in civil commitment cases. These proposed amendments also sought to make nurse practitioners "mandatory" examiners in civil commitment cases. Therefore, the timing is right for psychologists to step up and take advantage of an opportunity to distinguish themselves from other licensed health care providers who may have far less training and expertise in rendering valid diagnostic conclusions regarding the presence or absence of major mental diseases and defects and in conducting scientifically sound violence and suicide risk assessments in a manner consistent with best practices in the field of forensic mental health assessment. This unique opportunity for psychologists to set themselves apart from other licensed mental health professionals within the eyes of the courts is also particularly ripe in that psychologists are currently the only professionals in the state who receive additional training and certification by a state licensing board specifically in the area of conducting court-ordered civil commitment evaluations and in providing expert witness testimony in civil commitment hearings.

Second, the Board of Psychology's civil commitment certification training and examination procedures have been recently updated and significantly revised. Many of the changes to the previous training and certification model will be described in a one hour panel discussion that will be held at this year's MPA Convention, which will be presented by Dr. Mardi Allen, Dr. Jim Herzog, and myself on the topic of psychologists' role in civil commitment proceedings. The panel presentation is scheduled to take place on Thursday, September 17th from 10:20 a.m. to 11:20 a.m. The panel presentation, which is free to all who register for the MPA Convention, also will include a discussion of recently collected data that were obtained by the Board of Psychology from chancery courts throughout Mississippi pertaining to psychologists' involvement in civil commitment proceedings in a number of different jurisdictions across the state. (For additional details regarding the panel discussion that will be held at the MPA Convention on the day prior to the Board of Psychology's civil commitment workshop, please see the convention agenda on the MPA website: <http://mpassoc.org/wp-content/uploads/2015/06/2015-CONVENTION-AGENDA-Amended-6.26.15.pdf?8dcff4>.)

Third, I am especially pleased to report that, for this year only, the Board of Psychology is offering the civil commitment certification training at an unprecedented low fee of only \$50.00 (reduced from \$300.00), which is only being charged to registrants simply to cover the cost of the supplemental reference text that will be distributed to all practicing psychologists who register for the workshop. Adding to the value of the civil commitment training, the Board of Psychology will also be awarding

those psychologists who successfully complete the entire certification training and examination process with a total of 5 hours of continuing education credit (for attending the workshop, passing the written examination, and successfully completing the performance sample requirement of the certification, which will be scheduled in Jackson at a later date). Of note is that only the workshop and written examination components of the certification will be offered at the MPA Convention; those psychologists who attend the workshop and pass the written examination offered at the MPA Convention immediately following the workshop will then be invited to complete the performance sample requirement, which is the final component of the certification process. There is no study or special preparation required prior to attending the Board of Psychology's workshop at the MPA Convention (that is, beyond reading this newsletter article, of course!).

Fourth, I am pleased to report that also starting this year, the Mississippi Board of Psychology has agreed to allow doctoral level psychology students, pre-doctoral interns, and post-doctoral trainees to attend the civil commitment workshop (for educational purposes only) at no charge. Psychology trainees also must register with the Board of Psychology but will not be provided with a copy of the supplemental reference text. However, all trainees are certainly encouraged to purchase the reference book on their own, if interested. In addition, the Board of Psychology has agreed to award psychologists who are already certified but wish to retake the workshop as a refresher with 3 hours of continuing education credit for attending the workshop. Those psychologists who have been previously certified but wish to enroll in the revised workshop will be provided with a copy of the supplemental reference text but will not be required to retake the written examination or to again complete the performance sample component that is required for those seeking the certification for the first time.

Finally, I am also very pleased to announce that, as of mid-July, the Board of Psychology reported having nearly a dozen registrants who have already signed up for the upcoming civil commitment workshop. As best as I can tell, the list of registrants thus far represents an interesting mix of attendees, which consists of psychologists who have never previously been certified, psychologists who are currently certified and are retaking the workshop as a refresher, and psychology trainees who are interested in learning more about civil commitment work. It is noted that there is still some time remaining and a few slots available for any additional psychologists and/or doctoral level psychology trainees who have yet to register but are contemplating doing so. So, for those of you who may be interested, I would like to invite you to come join the 2015 inaugural class of the Board of Psychology's newly revised civil commitment training and certification program, which I hope will prove to be a valuable training experience for both practicing psychologists and trainees alike, as well as one that will hopefully be of some benefit not only to chancery courts throughout the state but also to the respondents who are the primary focus of these interesting and often challenging types of cases. Registration with the Board of Psychology for all types of attendees is

required by August 6, 2015. To register for this year's civil commitment training, please contact Ms. Hy Crocker with the Board of Psychology via email at helenedwards@bellsouth.net or by calling the Board of Psychology at 1-888-693-1416 or 662-716-3934. Please also feel free to contact me at my office (662-378-3526) or by email at gmacvaugh@gmail.com, should you have any additional questions or need any further information about the training and/or examinations at any point prior to Convention. I look forward to seeing you in Bay St. Louis!

Gilbert S. Macvaugh III, Psy.D., ABPP

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, PhD
Region 1 Representative



Member Spotlight: Dr. Karen A. Christoff



. . . in recognition and deep appreciation of her 33 years of dedicated service to the Department of Psychology and the University of Mississippi. These are the beginning words from the citation presented to Dr. Karen A. Christoff by Chancellor Dan Jones at the University of Mississippi Commencement ceremonies, May 9, 2015.

Known to virtually all of us, Karen Christoff joined the Psychology Department at Ole Miss in 1982 directly after receiving her doctorate in clinical psychology from the APA-accredited program at West Virginia

University. Fortunately, she decided to stay a while. In addition to serving several years as the Director of Clinical Training and teaching a variety of graduate and undergraduate courses, Karen directed over 30 dissertations with an untiring commitment to her students. As a faculty member, she has also provided valuable service to the university as a member of key committees, including the university's IRB, and as the department representative to the Faculty Senate.

Away from the university, Karen has a current appointment to the Mississippi Board of Psychology (where, it should be added, she has served before) that runs through 2016, now as the board's Executive Secretary. As many, if not all, of us are aware, Karen has held a number of offices in our Mississippi Psychological Association, but it should be noted that she has also contributed to the profession in a broader sense as a reviewer for a number of well-recognized journals and as a task force and committee chair many times over, as examples. Most recently, Karen will be traveling to Boston to receive investigator training in service of the psychology board.

Prior to her retirement from the university, Karen expressed some concern of how she would handle leaving a place where she spent a major portion of her professional life. Probably one thought that persisted had to do with how to fill all the time that suddenly becomes available. The answer to that question came fairly quickly. In a recent conversation, Karen related that APA had contacted her about conducting an accreditation site visit in Texas. So now add that to her September calendar that already has her off to a board meeting, the MPA convention in Bay St. Louis, and the afore-mentioned investigator training.

Just in case you wondered, there is also a life outside psychology. If you are a regular viewer of Mississippi Public Broadcasting, you may have seen a video spot of Karen and Tom espousing the benefits of MPB and encouraging viewer support.

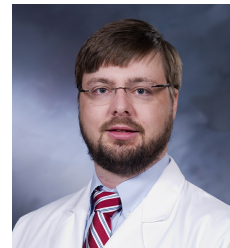
The citation presented at Commencement closed with these words: The faculty and students at the University of Mississippi, both present and former, affectionately and with great respect recognize Professor Christoff for her invaluable academic leadership and for her contributions to the life of the Department of Psychology. We wish her well in her retirement. As do we. Happy trails.

662-801-1664
cooker@olemiss.edu

Region 2

Heath Gordon, PhD
Region 2 Representative/Website Chair

601-368-4116
Brian.Gordon2@va.gov



Region 3

Sara S. Jordan, PhD
Region 3 Representative

sarajordan@usm.edu



Region 4

Bill Martin, PhD
Region 4 Representative



As the Region 4 Representative, I know of nothing happening of significance within the Region. Could be that no one tells me anything or it could be that nothing of significance is happening. I'm feeling a bit like the Maytag repairman who was never needed. I'm not sure that this newsletter actually gets much attention from our members and would like to test that hypothesis. If you have read this far, please send me an email (wlm1843@gmail.com) announcing that. I'd really love to hear from someone.

Bill Martin

228 369.4602
WLM1843@gmail.com

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.

Disaster Response Network

Amee Patel, PhD

Disaster Response Network Coordinator



How does disaster mental health differ from traditional psychological services?

A "disaster" can be any situation that results in the disruption of basic needs and activities of daily living; this can include the more readily imagined large-scale natural disaster, such as a hurricane or tornado, or a more personal disaster, such as a household fire or flood. The role of a psychologist in disaster response settings draws upon the same skills utilized by most psychologists in more traditional clinical settings; however, there are key differences between managing the needs of an individual who has recently gone through a disaster and the needs of a typical client. If you find yourself in a situation in which you are assisting someone immediately following a large-scale or individual-level disaster, here are some guidelines to keep in mind:

- Disaster mental health is similar to crisis counseling. Mental health providers may utilize a more directive, problem-solving approach than more traditional clinical settings. Moreover, they may help with decision-making and priority-setting based on the individual's values and take an active role in creating and implementing an action plan.
- The immediate needs, such as finding clothing, medication, shelter, missing loved ones, and financial resources (to name a few), must be managed before attempting to address longer-term emotional distress. Counseling and emotional support can be given while helping with these practical tasks.
- Most individuals have internal coping mechanisms for short-term management of stress. Whereas these coping strategies (e.g., denial, helping others) may be counterproductive in the traditional therapy setting, they serve an important role in the phases of disaster response. Any interventions should match the individual's "phase" of recovery from the disaster.
- Providing resources and support while encouraging the client to take an active role in seeking out resources and building connections will promote resilience, empowerment, and recovery.
- Psychologists may need to draw upon both clinical and administrative knowledge and skills to work with local or national recovery organizations and help clients find needed resources. A good understanding of local resources and local culture is useful in reducing client frustration in working with overburdened and underfunded systems.
- Even after a disaster, some individuals will struggle with recognizing and reaching out for mental health support. The stigma of "being crazy" after a disaster may overshadow emotional needs.
- Individuals may be struggling with (a) feeling helpless and hopeless

about their situations, (b) grieving over lost loved ones or a lost way of life, (c) trauma-related fear or intrusions, and (d) frustration as they reconstruct their lives. Brief interventions focused on immediate emotional control, communication, and goal-setting may help individuals manage these emotions in constructive ways.

- Helping individuals engage in community and social support is key. Individuals may feel too overwhelmed by the necessary practical tasks to respond to outreach or believe that others "are worse off" and reject assistance. Psychologists can help restructure maladaptive thoughts about accepting help and safety that can serve to facilitate community re-engagement.
- Identification of a more severe mental health disorder or exacerbation of a pre-existing disorder will likely require referral for longer-term services. The role of the mental health provider in a disaster setting is not to provide treatment for these disorders, but to recognize them and provide the appropriate referrals.

If you are interested in getting involved with MPA's Disaster Response Network or learning more about working with disaster mental health services, please contact us at mpadm@gmail.com.

Invited Submission

Patrick H. DeLeon, PhD, JD

SLOW DOWN, YOU MOVE TOO FAST

Give An Hour:

This spring we had the unique opportunity to attend Give an Hour's national conference highlighting their "Campaign to Change Direction" in the way that the nation talks about mental health. First Lady Michelle Obama was the inspirational keynote speaker. Other speakers included psychologists Barbara Van Dahlen, Founder and President of Give an Hour; Norman Anderson, Art Evans, and Randy Phelps. Most memorable were the testimonials from veterans who had personally experienced the anxiety, depression, and suicidal ideation of PTSD. Over 50 organizations were engaged that morning; the number now being in excess of 100.

Barbara: "Give an Hour's work these last 10 years has taught us a very important lesson. The greatest barrier to ensuring proper mental health support for those who serve and their families is not a shortage of appropriately trained mental health professionals or the lack of effective treatments for specific conditions and concerns. The greatest barrier to effectively addressing the mental health needs of those who serve is the same barrier that prevents civilians with mental health concerns from receiving proper care. It is the same barrier that leads to 39,000 suicides each year in America, including the deaths of 22 veterans each day. The

greatest barrier to ensuring the mental health well-being of all of our citizens, civilians and military, is our culture itself. The manner in which we view and respond to mental health prevents service members and their families, just as it prevents civilians, from recognizing and acknowledging the suffering that we see in ourselves and others. Until we change our culture so that mental health is viewed in the same way we view physical health - as one of many important elements of being human - we will continue to fail those in need." Mrs. Obama rhetorically asked: "Should not mental health be viewed in the same manner as cancer, diabetes, and other physical ailments?" Barry Anton points out in his May Monitor Presidential column that 70 percent of primary-care visits stem from psychosocial factors.

"At the core of the campaign - and the cultural movement it is inspiring - is a plan to educate all Americans on the five signs of emotional suffering. Just as we recognize the signs that someone may be having a heart attack, we can learn the signs that may indicate that someone we know is in emotional pain and needs our help. And if we recognize these signs in others, we reach out, we connect, we offer to help. By creating a common language and the recognition that we can all pay attention to our mental well-being, we have the opportunity to reduce suffering and build healthy communities (Barbara)." Visit www.changedirection.org. A truly impressive vision, one which highlights the importance of psychology becoming integrated into primary care, for both the profession and our clients.

Another Exciting Vision:

The former chief academic affiliations officer for the Department of Veterans Affairs (VA), Malcolm Cox, chaired the recent IOM report Measuring the Impact of Interprofessional Education on Collaborative Practice and Patient Outcomes. His report notes that much has changed over the past decade, necessitating new thinking. Innovators then stressed the importance of patient-centered care; today, they think of patients as partners in health promotion and health care delivery. Patients are now to be integral members of the care team, not solely patients to be treated; and the team is recognized as comprising a variety of health professionals. This changed thinking is the culmination of many social, economic, and technological factors that are transforming the world and forcing the fields of both health care and education to rethink long-established organizational models.

The VA has a very impressive record of integrating education and clinical care. Under Robert Zeiss's leadership (2005-2013), and continuing today under Kenneth Jones, psychology's post-doctoral training thrived with the annual number of funded positions increasing from 52 to 402, and with a significant increase being projected for future years. However, efforts to reform education of the health care workforce and redesign practice in the health care system need to be better aligned because change in one of these interacting systems inevitably influences the other. Efforts to improve Interprofessional Education (IPE), or collaborative practice, independently have fallen short. The IOM

Committee felt that widespread adoption of a model of interprofessional education across the learning continuum is urgently needed. An ideal model would retain the tenets of professional identity formation, while providing robust opportunities for interprofessional education and collaborative care. Such a model would differentiate between learning outcomes per se and the individual, population, and system outcomes that provide the ultimate rationale for ongoing investment in health professions education. With a refreshing global perspective, the Committee proposed that once tested, such a model could be adapted to fit the particular needs of higher- and lower-resource settings around the globe. "It is no longer acceptable to think of either health or education in isolation. The final model must accommodate the reality of today's globalized community."

The Committee further noted that coordinated planning among educators, health system leaders, and policy makers is a prerequisite to creating an optimal learning environment and an effective health workforce. Educators need to be cognizant of health system redesign efforts; while health system leaders need to recognize the realities of educating and training a competent health workforce. Joint planning is especially important when health systems are undergoing rapid changes, as they are across much of the world today. IPE is particularly affected by the need for joint planning because the practice environment is where much of the imprinting of concepts such as collaboration and effective teamwork takes place. Despite calls for greater alignment, however, education reform is rarely well integrated with health system redesign. After an extensive literature search, the Committee concluded that it was currently unable to find any model that sufficiently incorporated all of the components needed to guide future efforts. A cautionary note: "Although there is widespread and growing belief that IPE may improve interprofessional collaboration, promote team-based health care delivery, and enhance personal and population health, definitive evidence linking IPE to desirable intermediate and final outcomes does not yet exist." Thus, the fun and excitement of becoming personally involved in the health care public policy process.

The First Signs of Spring:

At this year's inspirational State Leadership Conference (SLC), former APA Board member Josephine Johnson and I reflected upon how SLC is one of the highlights of APA. "I've learned so much about advocacy and its importance - something we didn't learn in graduate school." Fittingly, the focus was Practice Innovation. Katherine Nordal: "Innovation involves new ideas and processes, change, upheaval, and transformation. To be innovators we need to **shake off** some old ways of thinking about traditional practice models. We also need to **shake off** the negative attitudes some of our colleagues have about what's happening in health care. This world is changing. And health care is moving ahead - with or without psychology. Too many psychologists are stuck in the traditional 50-minute therapy box. And that box is way too confining. We need to think creatively about where psychology can best influence our evolving health care system... how we practice... where we practice... and what we

practice." All is groovy. Aloha,

Pat DeLeon, former APA President - Division 18 - June, 2015

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 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.

nwgaughf1@umc.edu