

*Psychologists familiar with hurricane recovery*

## Gov. Tours Stormed-Ravaged Coastal Parishes in Hurricane Ida Aftermath

Gov. Edwards is visiting the storm ravaged parishes this week after Hurricane Ida made landfall at Port Fourchon, clocking in at a strong category four with wind gusts up to 172 mph sustained at 150 plus.

Port Fourchon is Louisiana's southernmost port, located on the southern tip of Lafourche Parish. Hit particularly hard were Lafourche, Terrebonne, St. John the Baptist parishes and parts of Jefferson Parish. Views of the coast show the brunt of the destruction with downed trees and poles, roofs torn off, and many buildings completely obliterated. Ida took

out power for over 1 million people, most who have been suffering in sweltering heat.

The storm was the third strongest in Louisiana history, coming in after the Last Island Hurricane of 1856, and Hurricane Laura, in second, a storm that made landfall last year in Cameron parish and all but leveled most of Lake Charles.

Many noted the irony of Hurricane Ida coming on shore the same day as Katrina. Sixteen years ago the highest storm surge ever recorded

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### Dr. Thomandra Sam Appointed by Governor to State Psychology Bd

On August 6, Gov. John Bel Edwards announced his appointment of Thomandra S. Sam, PhD of Zachary to the Louisiana State Board of Examiners of Psychologists. Dr. Sam is clinical supervisor for the Sexual Behavior Treatment Program within the Louisiana Office of Juvenile Justice.

Dr. Sam fills the July vacancy on the state board created as Dr. Amy Henke completed her five-year service.

Dr. Sam is from Baton Rouge and was licensed in 2015 in the specialty area of counseling according to her candidate statement. She is a Psychologist V/Office of Behavioral Health/Eastern LA Mental Health System. She earned her degree from Auburn University.

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*Suicide Prevention Month*

### Teen Girls Suicide Attempts up by 50%

According to a report from the CDC, suspected suicide attempts by teenage girls have increased by 51% during the COVID pandemic.

During the 2020 pandemic, emergency room (ER) visits for suspected suicide attempts began to increase among adolescents aged 12–17 years, especially among the girls.

The CDC collected data during February and March, 2021, and found that suspected suicide attempt ER visits were 50.6% higher among girls aged 12–17 years than during the same period in 2019. Among boys aged 12–17 years, suspected suicide attempt ER visits increased 3.7%.

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*Is psychology practicing systemic racism?*

### New Facts Point to Discrimination in National Exam, Selection Programs at State Boards

The debate over an additional exam for those applying for a state psychology license has shined the light on a nest of scientific problems originating at the Association of State and Provincial Psychology Boards (ASPPB).

The debate has unearthed new facts and a jaw dropping irony—the psychology profession, a discipline that preaches anti-discrimination to others, and that sets the bar for selection-testing, has been promoting racism at state licensing boards, and by all accounts doing it for the money.

These problems might start with the ASPPB, but legally and morally they land at the doorstep of every state psychology board. The situation hits Louisiana particularly hard. While only 4% of licensed psychologists nationwide are African-Americans, Louisiana has a 34% Black population, a group chronically underserved by mental health professionals. Louisiana is specifically in need of psychologists who understand the Black experience.

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# Editorial Page – Opinions

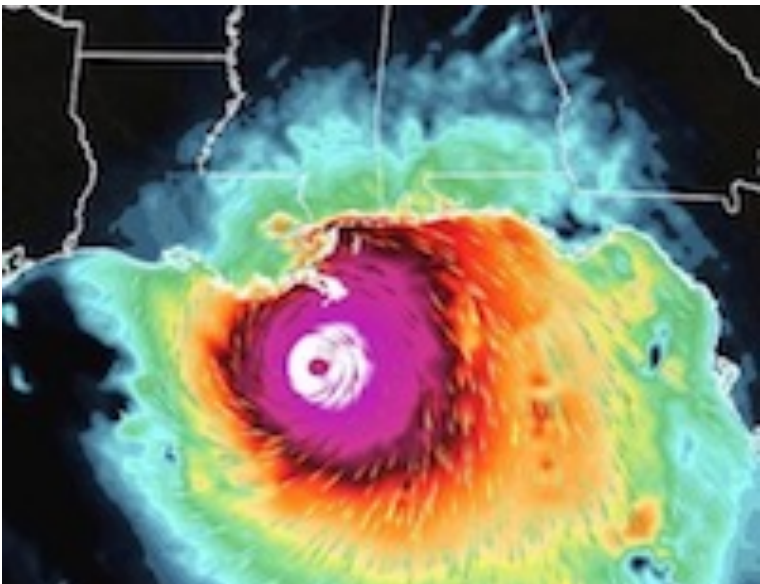
## Hurricane Stories Again

by Julie Nelson

Everyone in Louisiana has their hurricane story. Now it's Ida blowing down the coastal parishes. Last year it was Laura cutting a path through the state and all but leveling Lake Charles. Ask a New Orleans resident and they'll tell you their Katrina story. Ask someone from Alexandria, and you'll get a Rita story. Ask a Baton Rouge resident and you'll get a story about Gustav, or Andrew, or even Betsy.

Too late to evacuate and reasonably safe from falling trees, Archimedes and I wound up "riding out" Hurricane Sally last year at our vacation home in the Florida Panhandle. Thinking that she would go from a category one to a tropical storm, we were caught flat-footed when Sally rebooted to a category two in the middle of the night like an adolescent refusing curfew.

The only real consequence was the week long outage. No lights, no Internet, no television. We conserved battery power for our iPhones and computers, so modern life froze. My addictions failed me. No



access to work information or news or my favorite distractions—*Star Trek* and *Lucifer*.

By the third day Archimedes and I found ourselves in the undiscovered country. The noise and dizzy dancing of modern life quieted. Sally dragged in cool weather and we opened the windows. We drank coffee brewed over our campfire (gas stove). At sunset, sharing a bottle of Merlot, we watched the pink and blue sky fade. That's when Archimedes reminded me of his hurricane story.

He was 18 and happily working for "good money," \$2.20 per hour, on the oil rigs in the Gulf of Mexico, when Camille headed to shore in 1969.

Evacuation activities on the rigs were in turmoil and he substituted in as a welder's helper. With no safety equipment, he suffered flash burn to his eyes. He was blinded, in pain, and exhausted when his crew dropped him off at a coastline hotel to wait for a ride from his friend Vernon Whitfield (his real name), who had been working at the shoreline.

While the hotel owner and all the guests evacuated, Vernon finally arrived, and announced that they had no transportation, his car had given out.

Archimedes, exhausted and in pain, decided to settle in for some rest and to weather Camille at the hotel. But Vernon, typically reserved and unobtrusive, refused to leave without him. After several rounds of arguing, Vernon's dogged determination won out. The two hitchhiked to New Orleans, then caught a bus to Baton Rouge, the entire time Vernon leading Archimedes around by the hand.

Two weeks later, the young men were eager to return to work and retrieve Vernon's car. It took them a full day to reach the coast—the roads were gone, completely washed out. Barges were wrecked on the beaches. Dead cows were sprawled in the trees. Camille made landfall as a Category 5.

Archimedes looked at me across the twilight of the room, and I knew what he was going to say next. The story never loses its impact for me.

"The hotel I had been planning to stay in was gone," he said. "All that was left was the slab."

[Julie Nelson is a licensed psychologist, journalist, consultant, and publisher of the Times. She also holds other positions in the community. However, her opinions here are those of her own, and do not represent any group or association. She and the Times receive no compensation other than paid advertising. Email her at [drj@drjulienelson.com](mailto:drj@drjulienelson.com), —she welcomes feedback.]

## The Psychology Times

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## Corrections & Clarifications

No corrections were received for last month's issue. Please send your corrections to:  
[psychologytimes@drjulienelson.com](mailto:psychologytimes@drjulienelson.com)

State & National News

Gov. Appoints  
Dr. Sam, continued

In her statement, Dr. Sam wrote, "I am psychologist with a background working with diverse clinical presentations, demographics and within various settings from college counseling, community mental health, a pastoral center, domestic violence and homeless shelter, a marriage and family clinic and hospital settings. I am and have been licensed in various states and so I am keenly aware of how a variety of psychologists exist in different spaces both here in Louisiana as well as across our nation. I hope my unique experience adds an additional layer to an already highly qualified Board and staff."

"My desire to assist the Board comes from my graduate program's Social-Justice orientation and strong value to serve the profession and the general community. In this vain, one of my goals is to aide in creating spaces for Psychologists to feel more comfortable consulting with the Board to inquire about the best processes, best practice and most informed actions when engaging in all levels of their work; diminishing the fear of asking for guidance and increasing access to consultation, informal support or mentorship should be highly supported to create a more confident and effective psychological community. With this goal, there will also be times when someone's actions or decision-making may need to be reviewed in retrospect; with regard to what would be my role as a regulator in enforcing the Ethics Code, psychological standards and laws would require I act judiciously, timely and fairly accounting for context while balancing the protection of the public and the profession.

Dr. Sam wrote, "Additionally, I am Interested in ensuring that Louisiana is ahead of the curve with offering diverse platforms to diverse consumers from diverse Psychologists; yes, that is a lot of one word in a sentence but its message is necessary. As our society Is changing, it is important Louisiana is able to compete with the rest of the nation and attract bright minds to work and advance our state and practice; in doing so, we ensure we are at the cutting edge of service by creating a healthy Louisiana that recognizes the need for mental healthcare, has access to the care needed and is ultimately positively impacted by our profession toward higher levels of wellness and increased quality of life. Regarded as the father of individual psychology in some circles, Alfred Adler encouraged us to, 'Follow your heart but take your brain with you.' I think being an effective Board member requires a constant balance of both."

Governor Makes Other August Appointments

Gov. Edwards made appointments to several Louisiana boards and commissions during August, including:

Billy Joe Harrington of Natchez, Louisiana was appointed to the Louisiana Drug Control and Violent Crime Policy Board. Harrington is the district attorney in Natchitoches Parish. He was nominated by the Louisiana District Attorneys Association and will represent district attorneys from the middle area of the state.

The Louisiana Drug Control and Violent Crime Policy Board reviews the needs of the state and local governments to make recommendations of funding to the Louisiana Commission on Law Enforcement to support a broad range of activities to prevent and control drug trafficking, drug related crime, and violent crime.

Gail M. Hurst of New Roads has been appointed to the Capital Area Human Services District Governing Board. Hurst will represent Pointe Coupee Parish as a parent, consumer or advocate in the field of addictive disorders.

The Capital Area Human Services District directs the operation and management of community-based programs and services relative to public health, mental health, developmental disabilities, and substance abuse services for the parishes of Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee, West Baton Rouge, and West Feliciana.

Susan E. Nelson of Baton Rouge has been appointed to the Louisiana Rehabilitation Council. Nelson is an attorney and adjunct professor at Southern University Law Center. She will serve as a representative of the Louisiana Workforce Investment Council.

The Louisiana Rehabilitation Council listens to the concerns of those with disability issues, reviews, analyzes and evaluates the state rehabilitation program, collaborates with other state agencies, organizations and consumer groups.

Jill M. Hano of River Ridge has been reappointed to the Louisiana Developmental Disabilities Council. Hano will serve as an individual with developmental disabilities and serve on the executive committee of the Council.

Nicole L. Banks of Houma has been reappointed to the Louisiana Developmental Disabilities Council. Banks will represent an individual with developmental disabilities and serve on the executive committee of the Council.

The Louisiana Developmental Disability Council's mission is to lead and promote advocacy, capacity building, and systemic change to improve the quality of life for individuals with developmental disabilities and their families.





*Suicide Prevention Month*  
***Teen Girls Suicide Attempts up by 50%, continued***

The findings are based on data for ER visits for suspected suicide from the National Syndromic Surveillance Program, which includes about 71% of the nation's emergency rooms in 49 states.

Earlier data reported by the CDC showed that the proportion of mental health-related ER visits among children and adolescents aged 12 to 17 years had increased by 31% during 2020 compared with 2019.

The results of the most recent study were published in the June 11 issue of the CDC's *Morbidity and Mortality Weekly Report*.

"Young persons might represent a group at high risk because they might have been particularly affected by mitigation measures, such as physical distancing (including a lack of connectedness to schools, teachers, and peers); barriers to mental health treatment; increases in substance use; and anxiety about family health and economic problems, which are all risk factors for suicide," the authors said.

The findings also suggest there has been "more severe distress among young females than has been identified in previous reports during the pandemic, reinforcing the need for increased attention to, and prevention for, this population," the CDC authors wrote.

These new findings underscore the "enormous impact the COVID-19 pandemic is having on our country's overall emotional wellbeing, especially among young people," the *National Action Alliance for Suicide Prevention (Action Alliance)* said in a statement.

"... the findings from this study suggest more severe distress among young females than has been identified in previous reports during the pandemic, reinforcing the need for increased attention to, and prevention for, this population."

Dr. Blauvelt, licensed clinical psychologist in private practice in Baton Rouge, said, "Researchers have proposed many hypotheses for the increase in suicide ideation and attempts among adolescents: social media use, increasing social isolation, academic pressure, suicide contagion, and mental health problems. There is no easy to understand reason for the increase, but there are many things we can do to respond to this epidemic."

Dr. Blauvelt serves as the project director for The Fisher Project, a statewide suicide prevention program funded by a COVID-19 Emergency Response to Suicide Prevention SAHMSA grant. In this role she provides clinical supervision to peer support specialists, monitors adherence to evidence-based program protocols, and intervenes in emergency situations.

"Talking openly about suicide with adolescents can be a powerful intervention," said Dr. Blauvelt, "and it does not need to be done by a licensed mental health professional. Programs like Talk Saves Lives and SafeTALK teach people to recognize warning signs of suicide, to engage a person who is having thoughts of suicide, and to help connect them with appropriate resources. Just listening is a powerful first step in suicide prevention."

"Many teens who die by suicide have never participated in mental health services. [...] There is a lack of mental health staff in schools, and a lack of training for school staff to essentially be gatekeepers when they encounter students displaying warning signs for suicide."

"There is elevated risk for Black, LGTBQ, and trans youth. These populations experience trauma, violence, and discrimination in excess of other populations." She also explained, "... restricting access to lethal means prevents suicide. Teens who live in a home with a firearm are significantly more likely to die by suicide. Research consistently shows that firearms are implicated in more suicides than homicides each year. In Louisiana, there is a gun ownership rate of about 53%."

Dr. Blauvelt earned her PhD is from Louisiana State University. The Louisiana Psychological Association named her for its Psychology in the Public Interest award.

**Over \$1.5 Million in Grants  
Awarded to LSU Pennington  
Biomedical Research Center**

U.S. Congressman Garret Graves (South Louisiana) announced on August that the U.S. Department of Health and Human Services (HHS) is funding two research projects at LSU Pennington Biomedical Research Center. The \$1,578,543 in funding will support research efforts for breakthrough obesity treatments and will help design a pilot program demonstrating the role diet can play to slow aging and add years to the time a person is in good health.

"Pennington Biomedical is one of the best facilities with some of the best research efforts and proven capabilities to bring about life-changing impacts in our community and the country. This funding will help build on that record of success and will support research efforts for breakthrough obesity treatments and will help design a pilot program demonstrating the role diet can play to slow aging and add years to the time a person is in good health. Providing resources to help Pennington Biomedical expand their current work benefits our entire community, region and country," Graves said.

Grant Information: Project: Metabolic Changes: Connecting temperature sensing neurons to sympathetic adipose tissue stimulation. Amount Awarded: \$506,307

Grant Information: Project: A planning project to pilot test and optimize dietary approaches to slow aging and design a long-term trial. Amount Awarded: \$1,072,236

**The Fisher Project  
Suicide Prevention Program**

The Mental Health Association for Greater Baton Rouge is operating a COVID-19 Emergency Response for Suicide Prevention Project in Louisiana funded by SAMHSA. In partnership with the Louisiana Department of Health, Office of Behavioral Health and other agencies, we are offering comprehensive suicide follow-up and recovery support services. Mental health concerns have increased considerably during the COVID-19 pandemic. Louisiana has been affected by high rates of infection and deaths, and many of our communities are more vulnerable to trauma and increased risk for mental health problems. The services we provide are culturally affirming and trauma-informed. We invite you to utilize our services to better serve your patients. There is no cost to participate.

- Clients enrolled will receive 6 months of care:
- Screening for suicide risk at every appointment
    - Safety planning and means restriction
    - Discharge planning
  - Warm hand off(s) to treatment or community organizations

Services are available via telephone and video telehealth.

To Enroll or Refer a Patient

Call the Fisher Project 225.960.6800  
or email [sblauvelt@mhagbr.com](mailto:sblauvelt@mhagbr.com)

Eligible participants are: Age 25 and over and · Have an increased risk for suicide in past 3 months

All services are provided by a certified peer specialist and supervised by a licensed clinical psychologist.



# Hurricane Ida Aftermath

## Psychologists familiar with hurricane recovery

continued

swept away the lives of 1,833 people, 1,577 of them in Louisiana. Upon the human losses was piled \$150 billion in property damage, the burden falling primarily on individuals and communities.

Those in psychology have given their efforts and voices to recoveries, and continue to do so, helping Louisianians cope with and adjust to the new environmental conditions that affect our planet and our state.

In 2016, Dr. Mark Crosby rolled up his sleeves to help those in his Watson community, one of the areas with the most damage from the bizarre weather now being called the Flood of 2016. At the peak of the disaster, the Red Cross reported that there were 10,000 people in 50 shelters.

"Watson was at ground zero," he said at that time. "Ninety percent of everything went under water – houses, schools, businesses. People are still in shock. We are just trying to find places where the children can attend school, school's started, and there's no space that wasn't affected."

Dr. Crosby has a doctorate in Family Psychology and has a background in Pastoral Counseling, and is Senior Pastor at Live Oak United Methodist Church in Watson (LOUMC).

He worked at the center of the crisis. "The volunteers—many who were evacuees—quickly went into crisis mode, he explained, "helping those who were wet and scared—some in shock—to get settled with a warm blanket and cup of coffee."

After Katrina, Dr. Darlyne Nemeth and colleagues developed a set of interventions called Wellness Workshops, aimed at supporting the emotional recovery of those dealing with loss and trauma. Nemeth also co-authored a book, *Living in an Environmentally Traumatized World: Healing Ourselves and Our Planet*.

Dr. Nemeth said, after the 2016 Flood, "What is especially unfortunate is that many people, who moved here post Katrina, are now being re-traumatized. They are having anniversary reactions."

In Nemeth's work she and co-authors point to six stages in recovery, which begin with *Shock*. The next is *Survival Mode*, followed by *Assessment of Basic Needs*, when people need food, clean water, shelter, and safety.

In *Awareness of Loss* people survey their losses and begin to gain perspective. Then, *Susceptibility to Spin and Fraud*, is the stage where others can take advantage of them.

The last stage is *Resolution*. "Resolution can take a long time," she said, "from many months to many years. The beginning of the resolution phase is marked by an anniversary reaction."

For those who lost loved ones, or major possessions, traumatic grief can result. Dr. Marilyn Mendosa is an expert in grief, and



*In 2015 psychologists and colleagues worked to prepare for the 10th Anniversary Wellness Workshops for those who remained strongly affected by Katrina. From top, left of center, clockwise: Ms. Kerritt Saintal, Drs. Kim VanGeffen, Darlyne Nemeth (standing), Gig Costello, Lucinda DeGrange, and Joseph Tramontana. Drs. Fernando Pastrana, Lauren Robinson, and Gail Gillespie not fully shown.*

writes a blog for *Psychology Today* on the topic.

"This type of loss can generate intense feelings of shock, anger, guilt, anxiety, depression, despair and hopelessness," Mendosa said. "People are overwhelmed. They are stunned and disoriented and have difficulty processing information. They have lost their sense of safety and order to their lives. In addition to the emotional turmoil, many will also develop physical illnesses."

Dr. Mendosa is the author of *We Do Not Die Alone* and Clinical Instructor at Tulane Medical School Dept. of Psychiatry, an expert in trauma, bereavement, spiritual and women's issues.

Dr. Katie Cherry has studied how different people are impacted by disasters and who may be the hardest hit, is a Louisiana State University psychology professor, and executive director of the LSU Life Course and Aging Center.

She has authored *Traumatic Stress and Long-Term Recovery: Coping with Disasters and Other Negative Life Events*, and also *Lifespan perspectives on natural disasters: Coping with Katrina, Rita and other storms*, both published by Springer. Her most recent book is *The Other Side of Suffering: Finding a Path to Peace after Tragedy*, published by Oxford University Press.

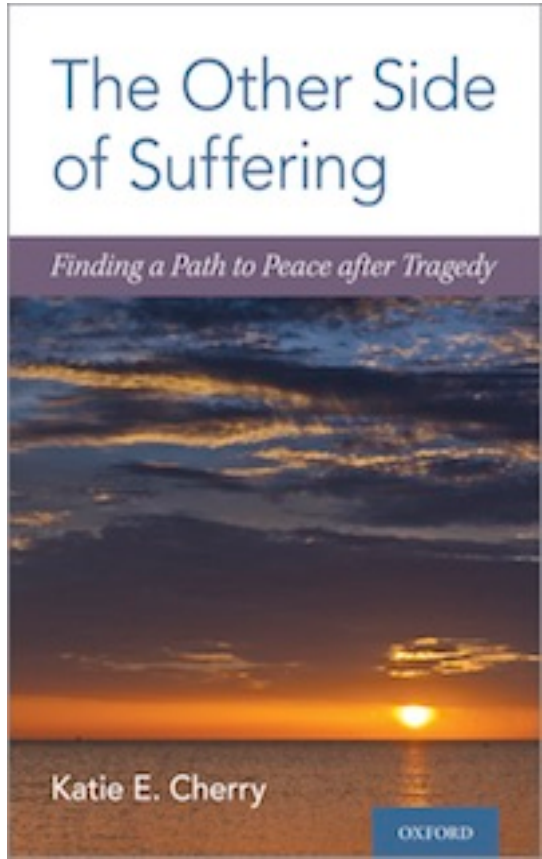
In one of her studies, "Survivors from the Coastal Parishes," Cherry and co-authors discovered patterns in how different groups cope with disaster. Her team looked at coastal residents with severe property damage from the 2005 Hurricanes Katrina and Rita, and those with exposure to the 2010 Deepwater Horizon oil spill.

She found that those who experienced recent and severe trauma related to natural and technological disasters were found to be at risk for adverse psychological outcomes in the years after

these events. Individuals with low income, low social support, and high levels of non-organizational religiosity are also at greater risk. She and her team found a 51% rate of reported symptoms of depression in fishers along the coast.

Executive Coach and organizational consultant, Dr. Laura Wolfe responded to one crisis by offering free coaching sessions to those affected.

"For business," she explained, "the main issues right now are welfare of employees and business continuity. Uncertainty about the future is stressful both at the organizational level and the individual level," she said. "Self-care is especially important as recent research finds that taking care, recharging, and recovering are related to sustaining and building resilience."







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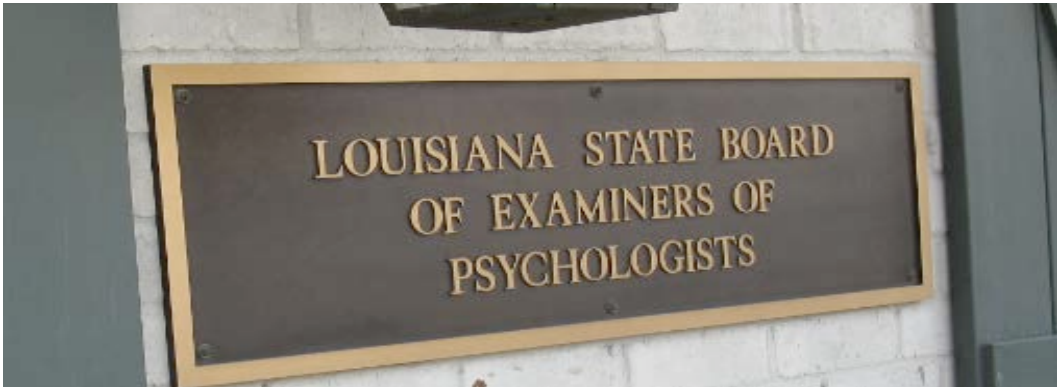
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# *From the Minutes*

## Selected Items from June & July 2021

### Minutes of the Louisiana State Board of Examiners of Psychologists (LSBEP)

Friday, June 11, 2021

"RESOLUTION OF APPRECIATION AND COMMENDATION," [offered by Dr. Gormanous]  
Dr. Henke’s contributions and dedication are 'beyond expectations' in recognition of her extraordinary time commitment during the corona virus pandemic; and [...] *Whereas* Dr. Henke’s initiatives in aligning policies, procedures, processes, internal forms, and practices ensured significant progress in the efficiencies and effectiveness of the Board’s functioning; and [...] *Whereas* Dr. Henke’s stewardship during the pandemic minimized delays in processing applications and issuing licenses; investigating and adjudicating complaints; and meeting other related operational challenges; and *Whereas* Dr. Henke, as Chairperson, exhibited unwavering leadership and navigated complex legislative hurdles with her professional, authentic, and direct communication in order to promote financial stability and sustainability to Board operations through the passage of House Bill 477 [...] *Be it further resolved* that Dr. Henke is extended the heartfelt appreciation and gratitude of fellow Board members [...]

1. LSSP Committee Nomination for upcoming vacancy - Ms. Monic reported that one licensed specialist in school psychology had submitted their name for consideration for this committee. Dr. George Hebert and Dr. Katherine Chenier reviewed the credentials and statement and recommended the nominee [...] Dr. Gormanous moved in favor of appointing Ms. Kelley Pursell to serve [...] motion passed by unanimous roll call vote [...]

2. Proposal to amend and repromulgate the LAC: Title 46:LXIII.Ch7. Supervision related to qualifications of supervisors. (M. Moore) – Dr. Moore moved that the Board reconsider the requirement that a supervisor be licensed for 1 year prior to engaging in supervision. Dr. Moore presented that all APA Accredited programs offer education and train graduates on how to be supervisors. The Board discussed this requirement and the need to review Chapter 3 to ensure individuals applying from Non-APA Programs were receiving equivalent training in the provision of supervision. Dr. Gormanous moved to review section 303 to consider language that is consistent with the APA Commission on Accreditation’s Implementing Regulations concerning profession wide competencies. The Board discussed this motion. The motion passed by unanimous roll call vote [...]

This discussion lent itself to consideration of resolving issues such as this by recognizing only APA programs for health service providers, and an alternate route for general applied non-healthcare providers.

3. Proposal to promulgate Telesupervision Guidelines (M. Moore) – Dr. Moore presented the Board with the current telepsychology guidelines that she and Dr. Harness minimally revised in order to posture current guidelines for formal rulemaking. The Board discussed the revisions. Dr. Gormanous moved in favor of initiating rulemaking for Telepsychology/Telesupervision as proposed by Dr. Moore. The Board discussed this motion. The motion passed by unanimous roll call [...]

3. LSBEP CPD offering by Dr. Antonio Puente on diversity, multicultural issues, etc. (finalizing organizing/arranging details including board goals & objectives, title, topical content, day/date, time, fees, marketing, etc.) - The Board discussed moving forward with this opportunity in light of HB477 being submitted to the Governor for signature. The Board discussed objectives to offer quality continuing education relative to broad services provided by the Board; generate good will and board visibility; generate revenue and engage stakeholders. The board discussed goals of facilitating this program in late September 17th or 24th or October 29th, Noon, Central Standard time zone.

Friday, July 23, 2021

Supervised Practice toward Licensure in Louisiana by Medical Psychologists not licensed with the LSBEP —  
Dr. Moore presented this discussion item explaining that recently she had reviewed supervised practice plans for applicants requesting a provisional license under the jurisdiction of the LSBEP but whose supervisors were not licensed with the LSBEP, which she did not believe to be appropriate.

Dr. Comaty offered comments particularly related to Opinion #12, and the fact that the Board accepts supervision from other licensing jurisdictions. Dr. Moore clarified that the Board does not pre-approve supervised practice plans for individuals who are applying from other jurisdictions and individuals who are not located in Louisiana are not eligible for a provisional license under the jurisdiction of the LSBEP. For out-of-state licensees, the supervisor submits documentation of the completed experience and the LSBEP determines if it meets the criteria for licensure. Dr. Moore further discussed that although the current regulations acknowledge that a Licensed Medical Psychologist could provide appropriate supervision, which is not disputed, for those Medical Psychologists that are not licensed with the LSBEP, as stated in Opinion #12, it is clear that LSBEP does not have regulatory control over supervisors not licensed with the LSBEP and therefore those supervisors have no accountability in providing supervision according to LSBEP’s regulations; because the supervisor is legally responsible for the practices of their supervisee, it does not appear to fall under the purview of the LSBEP to have oversight over the relationship or issue a Provisional License to an individual for which it could not effectively regulate; more appropriately, LSBME has oversight over the supervisory relationship between a Medical Psychologist and their supervisees. This would not prohibit an individual who received supervision under a Medical Psychologist from submitting documentation following the completion of the supervised experience in the same manner as a Licensed Psychologist from another state provides documentation. Additional discussion was had about the lack of a cooperative endeavor agreement between the LSBEP and LSBME, related to investigating individuals with dual licenses, which agreement was terminated by LSBME sometime prior to 2015. Dr. Gormanous moved to seek general legal counsel concerning the jurisdiction of the LSBEP to oversee the practice of psychology by Medical Psychologists not licensed by LSBEP but who are providing supervision to an applicant for license; and also concerning the issuance of a Provisional License under the LSBEP’s jurisdiction when supervision is provided by a Medical Psychologists not licensed by LSBEP. The Board discussed the motion. The motion passed by roll call vote as follows: In favor: (5) Gibson, Gormanous, Moore, Harness; Against: (0); Abstained: (0); Absent: (2) McNeely, Henke

b. The matter Richard Marksbury vs. LSBEP – the Louisiana 1st Circuit Court of Appeals denied Marksbury’s Motion to Dismiss LSBEP’s appeal and converted LSBEP’s to a Writ, which will be heard by the circuit court.

Continuing Professional Development Report  
a. CPD Committee Report on Renewals – Dr. Harness and Dr. Gibson reported on the review and approval of CPD extensions, exemptions and approvals. Dr. Harness also raised the question on the ethics requirement and why service on a board or professional association would not count as the ethics requirement. The Board discussed this topic with the consensus being that every CPD activity has some component of ethics in the activity however the two-hour requirement for ethics that is expressly carved out of general professional continuing education activities for psychologists that is accepted toward this requirement is expected to be solely in the area of ethics and/or forensics; such activity should be clearly labeled as an ethics activity/training.  
b. Updates on LSBEP CPD offering by Dr. Antonio Puente on diversity, multicultural issues, etc. (finalizing organizing/arranging details including board goals & objectives, title, topical content, day/date, time, fees, marketing, etc.) – The Board discussed the upcoming Continuing Education Offering to be sponsored by the LSBEP.  
i. Dr. Henke confirmed September 17, 2021 from 11:00 a.m. – 1:00 p.m. CST as the date agreed on by Dr. Puente.  
ii. Dr. Gormanous moved in favor of requiring \$17.50/hour of CPD. The Board discussed the motion. The motion passed by roll call vote as follows: In favor: (5) Gibson, Gormanous, Moore, Harness, Henke; Against: (0); Abstained: (0); Absent: (1) McNeely  
iii. Dr. Gormanous moved to delegate and empower authority to Drs. Gibson, Harness and Moore to purchase a platform and implement the design, platform and registration to facilitate the CPD Offering. The Board discussed the motion. The motion passed [...]

# Hughes' Act 322 Changes Statute of Limitations in Crimes Against Children

Representative Jason Hughes HB 492 was signed into law by the Governor, removing the time limits for crimes against children.

According to the legislative digest, prior law (R.S. 9:2800.9) provided that prescription on an action against a person for sexual abuse of a minor or for physical abuse of a minor resulting in permanent impairment, permanent physical injury, or scarring commenced to run from the day the minor attained majority and was suspended for all purposes until the minor reached the age of majority, subject to any exception of peremption provided by law.

The new law provides that such an action does not prescribe, notes the digest.

New law provides that an action against a person convicted of a crime against a child, as defined by existing law, does not prescribe and may be filed at any time following conviction.

The existing law (Ch.C. Art. 603) is retained by the new law, and defines "crime against the child" as the commission or attempted commission of any of the following crimes against an unemancipated minor:

- (1) Homicide.
- (2) Battery.
- (3) Assault.
- (4) Rape.
- (5) Sexual battery.
- (6) Kidnapping.
- (7) Criminal neglect.
- (8) Criminal abandonment.
- (9) Carnal knowledge of a juvenile.
- (10) Indecent behavior with juveniles.
- (11) Pornography involving juveniles.
- (12) Molestation of a juvenile.
- (13) Crime against nature.
- (14) Cruelty to juveniles.
- (15) Contributing to the delinquency or dependency of children.
- (16) Sale of minor children.
- (17) Human trafficking.
- (18) Trafficking of children for sexual purposes.
- (19) Female genital mutilation.

The new law provides that a party whose action under prior law was barred by liberative prescription prior to the effective date of the Act may file such an action against a party for a period of three years following the effective date of the Act.

# Act 353 Requires Training to Recognize Childhood Trauma

Sen. Katrina Jackson's measure, now Act 353, requires the State Board of Elementary and Secondary Education (BESE) to develop and adopt guidelines for in-service training in recognizing the signs and symptoms of adverse childhood experiences and the utilization of trauma-informed educational practices to address student needs resulting from these experiences. Requires BESE to consult with the Louisiana Department of Health.

The new law requires that, beginning with the 2021-2022 school year, all public and approved nonpublic school teachers, school counselors, principals, and other school administrators for whom the training is considered beneficial by BESE shall annually participate in at least one hour of in-service training on recognizing adverse childhood experiences and the utilization of trauma-informed education. Further provides that the in-service training required shall be provided on a day that other types of in-service training will be provided in accordance with the school calendar adopted by each public school[...].



# Act 394 Changes Laws for Aspects of Restraining Orders

Act 394 was signed into law from Rep. Aimee Freeman's HB 55.

Prior law required that a petition requesting the issuance of an ex parte temporary restraining order pursuant to the Domestic Abuse Assistance Act contain an affidavit signed by each petitioner that the facts and circumstances contained in the petition were true and correct to the best knowledge, information, and belief of the petitioner.

Act 394 provides that the petition shall contain a written affirmation, rather than an affidavit, signed and dated by the petitioner before a witness who shall sign and print his name. New law further explicitly provides the same for a complainant seeking protection from domestic abuse, dating violence, stalking, or sexual assault.

Existing law (R.S. 14:123) provides that perjury committed in a civil action shall be punished by a fine of not more than \$10,000 or imprisonment at hard labor for not more than five years, or both. New law retains existing law.

Prior law further provided that any false statement under oath contained in the affidavit accompanying a petition requesting an ex parte temporary restraining order pursuant to the Domestic Abuse Assistance Act constituted perjury and was punishable by a fine of not more than \$1,000 or by imprisonment with or without hard labor for not more than five years, or both.

New law repeals prior law and provides that the affirmation provided by new law is subject to perjury pursuant to existing law (R.S. 14:123).

Existing law provides that a temporary restraining order shall be granted without notice when:

- (1) It clearly appears from specific facts shown by a verified petition or by supporting affidavit that immediate and irreparable injury, loss, or damage will result to the applicant before the adverse party or his attorney can be heard in opposition.
- (2) The applicant's attorney certifies to the court in writing the efforts which have been made to give the notice or the reasons supporting his claim that notice should not be required.

New law retains existing law and provides that a temporary restraining order shall also be granted when an affirmation as provided in new law shows the specific facts required by existing law.



# Dr. Laurel Franklin Named 2021 Recipient for Contributions in Psychological Science

Dr. Laurel Franklin, Assistant Chief, Psychology Service, Southeast Louisiana Veterans Health Care System and Clinical Associate Professor, in the Department of Psychiatry and Behavioral Sciences at Tulane University School of Medicine was recently honored with the Louisiana Psychological Association's 2021 award for *Contributions in Psychological Science*.

"This award is given to an individual who has significantly increased knowledge of psychological concepts via research and dissemination of research findings," said program officials. "This year we are recognizing Dr. Laurel Franklin.

"Dr. Franklin's program of research focuses on the assessment, diagnosis, and treatment of trauma- and stressor-related disorders, namely posttraumatic stress disorder (PTSD), as well as the extension of evidence-based psychotherapies (EBPs) for PTSD to veterans living in rural and underserved areas throughout Louisiana. She has published over 40 peer-reviewed manuscripts, books, and book chapters and received over 1.2 million in grant funding throughout her career."

Dr. Franklin is also the Site Lead, for South Central VA Healthcare Network Mental Illness Research, Education, and Clinical Center.

Her first author contributions include "The overlap between OCD or PTSD: Examining self-reported symptom differentiation," published in *Psychiatry Research*;

"No trauma, no problem: Symptoms of posttraumatic stress in the absence of a Criterion A stressor," published in *Journal of Psychopathology and Behavioral Assessment*;

"Using the Clinician Administered PTSD Scale for *DSM-5* to examine overlap of PTSD criteria D and E," published in *Journal of Nervous and Mental Disease*;

"Examining various subthreshold definitions of PTSD using the Clinician-Administered PTSD Scale for *DSM-5*," published in *Journal of Affective Disorders*; and

"27 ways to meet PTSD: Using the PTSD-Checklist for *DSM-5* to examine PTSD core criteria," published in *Psychiatry Research*.

Dr. Franklin has joined with colleagues to investigate and many other areas of her major topics, including "Examining the relationships between perfectionism and obsessive-compulsive symptom dimensions among rural Veterans," published in *Journal of Cognitive Psychotherapy*; Anxiety sensitivity and posttraumatic stress symptoms: Associations among female veterans with a history of military sexual trauma, in *Military Psychology*, and "Anxiety sensitivity and substance use: Differential levels across individuals primarily using opioids, cannabis, or stimulants," in *Addictive Behaviors*.

Franklin and Dr. G. Manguno-Mire co-authored the book chapter, "Posttraumatic Stress Disorder," In R. A. Carlstedt (Ed.) *Integrative Clinical Psychology, Psychiatry and Behavioral Medicine: Perspectives*,

*Practices and Research*, by Springer Publications.

Along with K. E. Thompson, Franklin authored the book, *The Post-Traumatic Insomnia Workbook: A Step-by-Step Program for Overcoming Sleep Problems After Trauma*, by New Harbinger Publications.

She and Drs. Raines, Boffa, Goodson, and Schmidt, have this year authored a treatment manual, *An All-Encompassing Approach to Treating Affective Disorders Via Identification and Elimination of Safety Aids: A Therapist Guide*, a South Central VA Mental Illness Research, Education and Clinical Center publication.

Dr. Franklin, along with Drs. Corrigan, Chambliss, Repasky, Uddo, Walton, and Thompson, authored another treatment manual, with a 2019 second edition, *Stress Less: Relaxation Enhancement Group Veteran and Therapist Manual*, a South Central VA Mental Illness Research, Education and Clinical Center Publication.

She and Drs. Thompson and Hubbard, authored *PTSD Sleep Therapy Group: Training Your Mind and Body for Better Sleep*, a South Central VA Mental Illness Research, Education and Clinical Center Publication.

She has been awarded numerous research grants including:

Local Site Investigator (PI: Kehle-Forbes, S.) Comparative effectiveness of trauma-focused and non-trauma-focused treatment strategies for PTSD among those with co-occurring SUD (COMPASS). PCORI Award. \$4,997,116.

2019 Co-Investigator (PI: Ennis, C.). Evaluating the utility of a group-based brief cognitive-behavioral therapy for suicide prevention. Central MIRECC Pilot Study Program Award: \$50,620.

2019 Co-Investigator (PI: Boffa, J.) All about PTSD: A guide to understanding, managing, and treating symptoms of traumatic stress. South Central MIRECC Clinical Educator Award: \$2,600.

2018 Co-Investigator: (PI: Raines, A.M.) An All-Encompassing Approach to Treating Multiple Affective Disorders via Identification and Elimination of Safety Aids. South Central MIRECC Clinical Educator Award: \$3,750.

2018 Clinical Consultant: (PI: Raines, A.M.) Evaluating the Utility of a Brief Computerized Anxiety Sensitivity Intervention for Opioid Use Disorders: A Pilot Investigation. South Central MIRECC Pilot Study Program Award: \$38,161.

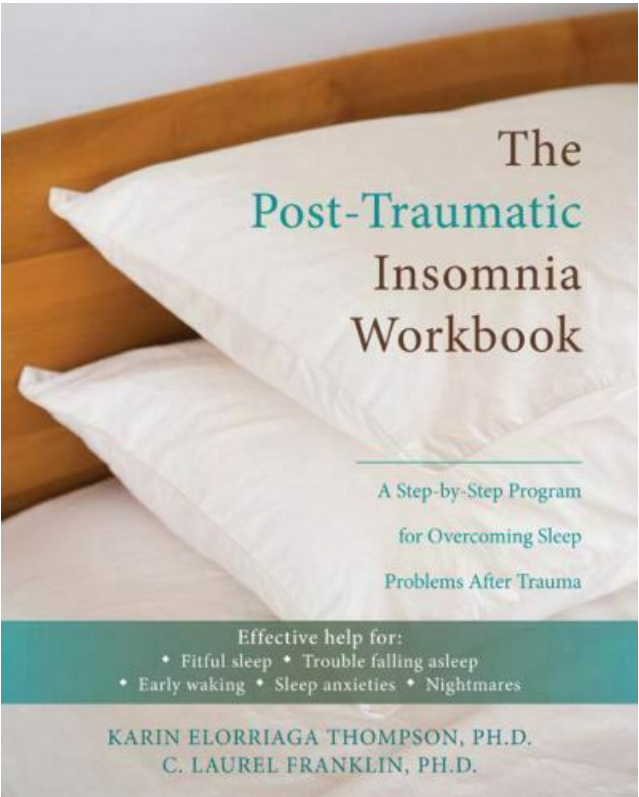
2017 Co-Investigator: (PI: Raines, A.M.) Improving Access to Evidence Based Care Among Rural Veterans using a Transdiagnostic Treatment Approach. VA South Central MIRECC Pilot Study Program Award: \$35,911.

Her editorial appointments include the *Journal of Trauma & Dissociation*, *Professional Psychology: Research and Practice*, and *Journal of Psychological Trauma* (formerly *Journal of Trauma Practice*).

She is an invited reviewer for many journals including: *The American Journal of Psychiatry*, *Anxiety and Depression*, *Anxiety, Stress, & Coping*, *Cognitive Therapy & Research*, *Clinical Psychology & Psychotherapy*, and *Crisis: Journal of Crisis Intervention and Suicide Prevention*

Dr. Franklin has not only contributed to building scientific evidence, she has many specialized professional experiences including: VA Certified Cognitive Processing Therapist (CPT), VA Evidence Based Psychotherapy Initiative; VA Certified Prolonged Exposure Therapist (PE), VA Evidence Based Psychotherapy Initiative; Prolonged Exposure Consultant, National Center for PTSD, Evidence Based Psychotherapy Initiative; Submission Reviewer, Division 56 (Trauma Psychology), American Psychological Association Conference; Forensic Examiner, New Orleans Criminal Court; Psychological Examiner, Military Entrance Processing Station (M.E.P.S.), as just a few examples.

Cover of Dr. Franklin's and Dr. Thompson's 2010 book, The Post-Traumatic Insomnia Workbook.





People

Dr. Amy Henke Earns Service Award for Advocacy on Behalf of Early Career Professionals & Students

The Louisiana Psychological Association (LPA) recently named Dr. Amy Henke as the 2021 recipient of the award for *Distinguished Service in Psychology*.

The officials noted that the award is given to an individual who has made significant contributions to the professional field of psychology in Louisiana and beyond by their professional service, particularly in the area of diversity, or demonstrated community involvement in support of less privileged or oppressed groups.

"... we are recognizing Dr. Amy Henke," noted officials. "Dr. Henke has represented psychology by testifying [...] on behalf of our profession, she is staunch advocate for the LGBTQ+ community, and been a voice for the ASPPB to take a deeper look at the EPPP2 and how it may serve as a barrier to practice for groups that are underrepresented in our field," LPA officials explained.

In 2016, the Association of State and Provincial Psychology Boards (ASPPB) announced the EPPP2 exam. Objections mounted, mostly from student and early career psychologist organizations. Dr. Henke, then a Director on the Executive Council of the LPA and Co-Chair of the LPA Early Career Psychologists Committee in LPA, put forth a Resolution to oppose the test for Louisiana, which passed unanimously.

Her resolution stated that multiple checks on competency already exist. "Trainees are already held to high standards through a variety of benchmarks, including but not limited to: APA approval of doctoral programs, multiple practicums where competency is repeatedly assessed, completion of formal internship training (also approved and regulated by APA and APPIC), and supervised post-doctoral hours obtained prior to licensure. There is no evidence to suggest this is not sufficient for appropriate training," noted her resolution.

Since then, Dr. Henke has served on the state board and has been opposing the expansion, and particularly the mandatory installation, of the exam by ASPPB.

What have been her most recent efforts to cause ASPPB to take a deeper look at the EPPP2?

"As a recent past LSBEP Board member and LSBEP Chair," she explained, "I had the opportunity to participate in numerous ASPPB meetings with member jurisdictions. In addition to ASPPB's annual and semi-annual meetings, Board Chair meetings are also held. This is an opportunity for Board Chairs to bring up concerns in their jurisdictions, share information, and discuss regulatory changes/trends. These meetings have been a place for significant discussion of the EPPP-2 and Louisiana has been active in this discussion.

"Currently, the EPPP-2 is no longer a required test but instead is being optionally adopted by jurisdictions. This was very important to Louisiana and other member jurisdictions because different states have different needs and different avenues for changing statutes related to licensure. While LSBEP is pleased

that the exam is now optional for jurisdiction adoption, we advocated during my tenure on LSBEP that ASPPB allow any qualified candidate for licensure (this is a different definition from someone who simply applies for a license) in any jurisdiction to gain admittance to the EPPP-2. [...]

"While LSBEP does not currently require this exam, during my tenure it was important for me to emphasize that we also did not want our candidates restricted from taking it if they so choose and have been qualified to do so [...]

"Of importance," Dr. Henke said, "this issue has been held to a vote during an ASPPB Board Chair meeting in the 2020-2021 year. There were approximately 30ish jurisdictions present for this vote, which represents about half of all voting jurisdictions. The vote was 100% unanimous that ASPPB should allow admittance to the EPPP-2 for qualified candidates from all jurisdictions, not just those jurisdictions that have chosen to adopt the EPPP-2," Henke said.

"Unfortunately, the ASPPB Board and staff have pushed back on both the vote and the formal request. For instance, despite this unanimous vote, ASPPB's Board has not acted on the clear wishes of the member jurisdictions. Instead, they have decided to individually poll each jurisdiction with a survey that I felt was misleading and biased.

"This is frustrating because it feels like a stall tactic to wear down (or outlast the terms of!) the Board members across the United States and Canada who feel strongly about this issue. It is also redundant given that the issue has been thoroughly discussed, debated, and voted upon at multiple Board Chair meetings over the last year. This parallels ASPPB's unilateral actions with the original implementation of the EPPP-2, where they have proceeded with all aspects of test design, development, and implementation without a formal vote by their own members."

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Is psychology practicing systemic racism?

# New Facts Point to Discrimination in National Exam, Selection Programs at State Boards, continued

by J. Nelson

For this report we look at current facts, core problems and underlying causes of how organized psychology is failing its students, the public, and its own goal of fighting systemic racism.

**"Adverse Impact" found in psychology license examination program**

The psychologist license exam is called the Examination for Professional Practice in Psychology or EPPP. After finding racial differences in the New York state pass–fail rate on the EPPP scores, Dr. Brian Sharpless has now found similar problems in Connecticut.

Dr. Sharpless studied 642 applicants to the Connecticut State Board of Examiners of Psychologists. In his article, "Pass Rates on the Examination for Professional Practice in Psychology (EPPP) According to Demographic Variables: A Partial Replication," he reported significant differences in failure rates based on ethnicity.

Whites had a 5.75% failure rate, Blacks had a 23.33% failure rate, and Hispanics had a 18.6% failure rate.

In a much larger study in New York, Dr. Sharpless discovered an even greater impact by race. He reported his findings in "Are Demographic Variables Associated with Performance on the Examination for Professional Practice in Psychology (EPPP)?"

Dr. Sharpless gathered data on 4,892 New York applicants and first-time EPPP takers. He obtained records of all doctoral-level psychology licensure applicants from the past 25 years and looked at their EPPP scores.

He found that Blacks had a failure rate of 38.50% and Hispanics had a failure rate of 35.60%. Whereas, Whites had a failure rate of 14.07%.

"Adverse impact" is the term used to describe differences in scores. An exam has adverse impact if minority candidates fail to pass at at least 80% of the majority race candidates' rate. The results in New York classify as adverse impact and the Connecticut results clear the bar only by a hair.

Title VII of the Civil Rights Act of 1964 makes it illegal to discriminate against someone on the basis of race, color, religion, national origin, or sex. When state psychology boards deny a license based only the EPPP scores, they must prove that the test is being used in a fair and unbiased manner.

Selection–testing and design of selection programs is most often a subspecialty in industrial–organizational and business psychology. State boards primarily deal with healthcare practitioners, and are composed of clinicians. So, expertise in selection testing is unlikely to be involved in all or most states.

"If two states have found adverse impact, it is probable that all or most states will also find adverse impact. It is typical for knowledge tests to have adverse impact anyway, and this must be handled in the overall selection program," said one expert.

One Black candidate told the *Times*, "We've known for a long time that the test discriminates—we learned it in graduate school. But there's nothing we, as students, can do about it."

According to one source at the Louisiana State Board of Examiners of Psychologists (LSBEP), the board makes no effort to study their procedures for adverse impact.

Critics of the national exam have gained momentum, fueled by the ASPPB's effort to install yet another, second examination, called the EPPP2.

Dr. Jennifer Callahan sounded the alarm as lead author in her article, "The enhanced examination for professional practice in psychology: A viable approach?" published in the flagship journal for psychologists, *American Psychologist*.

The EPPP2 has not been evaluated for its intended purpose, Callahan said. "For jurisdictions implementing the EPPP Part 2, failure to gather and report the evidence required for use of a test in a forensic context may also open the door for legal challenges."

Dr. Sharpless had also been pointing to legal risks. "... given the ethnic performance discrepancies and limited validity evidence, [...] it will remain open to charges of being a potentially arbitrary barrier in an already protracted path to professional independence..."

Industrial-organizational psychologist Dr. William Costelloe, who works in the private sector, agrees. There is no other choice these days, he told the *Times*, "... predictive validation studies *must* be conducted."

Another business psychologist said that in the private sector the ASPPB's approach would not be accepted. "Business owners would not take the risk of having adverse impact. We would be adjusting cutoffs and adding unbiased tests to the overall selection program, so that our clients could avoid adverse impact."

Criticisms have been mostly dismissed by officials at the ASPPB. In an answer to Callahan, also published in the *American Psychologist*, Drs. Matthew Turner, John Hunsley and Emil Rodolfa defended their decisions. "The standards emphasize that licensure/credentialing examinations are built from a content validation framework, and this framework is used for licensure examinations across professions," they said.

Dr. Turner is employed by ASPPB and in charge of the exam services. He was previously employed by the Georgia school systems. Both Hunsley and Rodolfa have also worked with and provided consulting services for the ASPPB examinations.

Callahan and coauthors replied, "...Turner et al. remain narrowly focused on defense of content validity and a reliance on outdated standards that fail to meet contemporary expectations for assessment of health care professionals. [...] ASPPB's methods demonstrably foster linguistic biases and systemic racism that constricts licensure of diverse individuals as psychologists."

Callahan urged ASPPB to take "drastic corrective action."

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Is psychology practicing systemic racism?

# New Facts Point to Discrimination in National Exam, Selection Programs at State Boards, continued

Experts point to serious issues with how states use cutoff scores on the national test, especially since there is no criterion related research to help set the cutoff.

"A 50th percentile cutoff score, that automatically fails the bottom half of a sample, all who are highly qualified already, does not make sense," said one business psychologist. "This is exactly the way you drive up adverse impact. You're basically having a bunch of PhDs compete against each other and then flunking half of them. Is your hypothesis really that half are incompetent?"

Sharpless had earlier noted problems with the cut off scores, typically set at the 50th percentile by state boards. "Additional empirical attention should be devoted to the cut score..." he said. "...the determination of the 'passing' score is one of the most important, yet difficult, psychometric tasks in testing ..."

ASPPB acknowledges the exam limitations. On their webpage officials state, "There is no suggestion that people who do better on the EPPP will be better practitioners."

The connection between test score and job performance would require predictive validity research, which ASPPB does not conduct.

Dr. Costelloe, explained "... predictive validation studies *must* be conducted." For instance, "... you infer that a candidate with a high Extroversion score will make more sales than a candidate who has a high Introversion score," Costelloe said. With a predictive study, "... you realize that your inference was not only completely wrong but backwards. Why? The sales personnel are interacting with mechanical engineers who must make the decision to switch over these new valves. They don't want to relate. They want specific engineering facts and data and they are introverts."

Michael Cunningham, PhD, Professor of Psychology, Africana Studies and Associate Provost at Tulane, points to potential problems with item development.

"Like all standardized exams, people with the highest pass rates tend to very similar in racial and ethnic backgrounds as the test developers," he said. "For many standardized tests, experts examine items for bias when there is an adverse impact of a question for males or females. In these cases, when bias still exists after an item analysis, the question is

excluded. I don't think similar considerations are done for racial/ethnic or SES backgrounds."

ASPPB seems unconcerned with the scientific criticisms and standards. In April 2018, then ASPPB CEO, Dr. Stephen DeMers, met with members of the Louisiana State Board of Examiners of Psychologists and representatives of Louisiana Psychological Association (LPA).

About the meeting, Dr. Kim VanGeffen, Chair of LPA Professional Affairs, said, "Dr. DeMers acknowledged that, currently, there is not really any research on the validity of the EPPP-2. There do not seem to be any plans to obtain predictive validity nor does the EPPP2 committee believe that establishing this type of validity is necessary," she said.

Dr. Marc Zimmermann, past LSBEP board member, also attended. "He [Dr. DeMers] stated that there is no predictive validity," said Zimmermann. "He also threw in that none of the national tests had predictive validity. He reported that content validity was the accepted standard because a test with predictive validity could not be constructed," said Dr. Zimmermann. "... DeMers had the temerity to try to sell us something that does not meet the standard that psychological tests being published are expected to have."

**Is more regulation needed? Safety estimates for psychologists are very good**

One of the arguments that critics mention is the consistently high safety ratings for psychologists, based on the low number of disciplinary actions nationwide.

"There is no evidence that the public is facing some sort of previously unheard of crisis in terms of safety from currently practicing psychologists," said Dr. Amy Henke, who spearheaded a Resolution opposing the EPPP2 while serving as a director for the LPA.

"Trainees are already held to high standards through a variety of benchmarks," Dr. Henke wrote in the Resolution, "... including but not limited to: APA approval of doctoral programs, multiple practicums where competency is repeatedly assessed, completion of formal internship training (also approved and regulated by APA and APPLIC), and supervised post-doctoral hours obtained prior to licensure."

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*A consistent critic of the test expansion has been Dr. Amy Henke.*

*First as a director in the state association and then as a member of the State Board she has voiced the need for ASPPB reforms.*

*Here Dr. Henke (on right) is serving at the State Board with then chair Dr. Darla Burnett.*





Is psychology practicing systemic racism?

# New Facts Point to Discrimination in National Exam, Selection Programs at State Boards, continued

However, Dr. Emil Rodolfa, then a program developer at ASPPB, questioned if these standards are enough, saying that supervisors have “... difficulty providing accurate evaluations of their supervisees to others who may have to evaluate the supervisee’s competency.”

The facts are on Dr. Henke's side. Data from their own *ASPPB Disciplinary Data System: Historical Discipline Report* show rates of disciplinary actions for psychologists to be consistently low. For an estimated 125,000 psychologists in the US and Canada, the disciplinary rates remain around 1–2 per 1,000.

For 2016–2020, the total reported disciplinary actions across the U.S. and Canada ranged from 139 to 186.

Using a conservative estimate of 10 clients per psychologist per year, this translates to a safety problem of one or two per 10,000 service events.

Louisiana’s rate is similar to the national average. For the year 2019–2020 there was one disciplinary action, for 2018–2019 there were two, for 2017–2018 there were also two, for 2016–2017 there were three, in 2015–2016 there was one, and in 2014–2015 there was also one.

**ASPPB's plans for doubling the size and cost of licensing exam**

Several sources suggest that profit motives may be the main reason for the cutoff and the extra test. The current EPPP costs candidates \$600 plus administration fees. The test contains 225 items, with a four-hour time limit. To compare, physicians pay \$605 for an eight-hour exam and social worker candidates pay about \$250 for a 170-item exam. The EPPP2 would increase cost from \$600 to \$1200.

Some years ago, ASPPB appears to have embraced a more aggressive corporate strategy. An insider told the *Times*, “In 2010 or somewhere around that time they

[ASPPB] were in New Orleans and they implied that they would be making a lot of money on the new test.”

In 2012, ASPPB acquired the rights to the exam, taking over from Professional Examination Service (PES). In 2013 ASPPB wrote the boards that their contracts with PES were being “... replaced with a contract between your jurisdiction and the Association of State and Provincial Psychology Boards.”

In that letter, ASPPB officials said, “ASPPB and PES have agreed that it would be simpler and more appropriate for ASPPB to contract directly with the 64 psychology regulatory agencies that are members of ASPPB.”

ASPPB said the change would be “... mutually beneficial because ASPPB can now provide a simplified agreement that is more specific to the needs of psychology licensure boards. In addition, the renewal of contracts is expected to be more efficient...” At the same time, ASPPB increased candidates’ exam fees from \$450 to \$600.

One insider thinks the corporate objective for ASPPB is to be a central source for regulation of psychologists. “They want to ultimately do all the licensing and regulating for psychology,” said the insider. “They want to regulate all the telepsychology.” And, “They want to be the Walmart.”

In 2013 ASPPB officials were instrumental in conducting and designing the 5th International Congress on Licensure, Certification, and Credentialing of Psychologists, held in Stockholm. The invitation-only conference was primarily funded by ASPPB. Dr. Emil Rodolfa, Chair of the Implementation Task Force for the EPPP 2, facilitated at the Congress.

ASPPB officials have gone through several roll-out efforts for the EPPP2, first to persuade member jurisdictions to

accept the new test, and then to force the new exam on states.

In 2016 the firm announced the EPPP2 and told its members, licensing boards across the United States and Canada, that the use of the new test would be "optional."

However, after criticisms mounted, ASPPB did an about face in late 2017 and announced in a surprise move that the new exam would be mandatory after all, and combined with the tests. And, the price would increase from \$600 to \$1200.

In July 2018, Dr. Amy Henke, then serving on the Louisiana State Board of Examiners of Psychologists (LSBEP), and LSBEP members sent a blistering letter to the ASPPB Board of Directors, to the ASPPB members, and to the administrators of state psychology boards across the US and Canada.

Following this, in August 2018, ASPPB President Sharon Lightfoot, PhD, announced that the ASPPB Board of Directors voted to rescind the mandate.

However, shortly after that, ASPPB decided to use a carrot and stick approach. According to an October 24, 2018 letter from Lightfoot, if Louisiana, or other jurisdictions, chose to decline the use of the new additional test, then student candidates in those jurisdictions would be prohibited from taking the test. Sources at the Louisiana state board considered this to be punitive, because many students wished to prepare for licenses in other states, which might require the second test.

Dr. Henke said that at a recent meeting of the member jurisdictions, representatives voted 100% to allow qualified candidates from any jurisdiction to take the EPPP2.

"Unfortunately," Henke told the *Times*, "the ASPPB Board and staff have

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Psychologists have a consistently high safety rating, based on a low rate of errors resulting in disciplinary actions.

# ASPPB Disciplinary Data System: Historical Discipline Report

*Reported Disciplinary Actions for Psychologists: 1974 – 2020*

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Total Number of Reported Actions in the ASPPB Disciplinary Data System: 6,807

**Disciplinary Actions Taken Per Year (Past 5 Years)**

Type of Sanction	2020	2019	2018	2017	2016
Total Reported Actions	139	186	186	182	168
Revocations	14	14	17	16	14
Suspensions	15	30	26	16	16
Probations	36	52	38	37	40
Reprimands	32	44	35	40	30

Note: Each disciplinary action could contain multiple sanctions including other sanctions not listed such as supervision, mandatory continuing education, etc. Therefore, the total number of sanctions reported above does not equal the total number of disciplinary actions reported.



Is psychology practicing systemic racism?

# New Facts Point to Discrimination in National Exam, Selection Programs at State Boards, continued

pushed back on both the vote and the formal request. For instance, despite this unanimous vote, ASPPB's Board has not acted on the clear wishes of the member jurisdictions. Instead, they have decided to individually poll each jurisdiction with a survey that I felt was misleading and biased."

**ASPPB's non-profit & financial status**

The ASPPB is a private, non-profit, 501(c) 6, tax-exempt corporation located in Tyrone, Georgia.

The IRS notes that the 501(c) 6 "... may not be organized for profit to engage in an activity ordinarily carried on for profit (even if the business is operated on a cooperative basis or produces only enough income to be self-sustaining)."

The corporate mission is to "Facilitate communication among member jurisdictions about licensure, certification, and mobility of professional psychologists." The "members" are the 64 or so regulatory boards from across the United States and Canada.

These boards pay dues to ASPPB. LSBEP records note they paid \$2,660 in 2020 for annual ASPPB dues.

ASPPB's net assets for 2018 (the most recent year available due to delays from Covid) totaled \$9,137,930. GuideStar estimates their assets at \$11,013,348.

Total revenue for 2018 was \$6,505,651. Revenue for 2017 was \$6,645,731 and \$5,933,473 for 2016.

ASPPB's main income producing product is the national exam. The exam and related services generated \$6,137,348 in 2018. This accounted for 94% of the Association's 2018 income. Exam income was \$5,378,524 in 2017, and \$4,916,406 in 2016.

While they paid \$1,302,603 to Pierson Vue Minneapolis for exam administration in 2018, most other expenses claimed on their tax reports are for employees and employee related expenses.

They report a total of \$2,278,482 for compensation of key employees, other salaries and wages, contributions to pension plans, employee benefits and payroll taxes.

In 2018, the CEO, M. Burnetti-Atwell, received pay and benefits of \$255,936. In 2017, Dr. Steven DeMers, then CEO, received \$270,784.

Assn Executive Officer Dr. Matthew Turner received pay and benefits of \$171,174 in 2018. He has four employees reporting to him for exam services.

Assn Executive Officer Janet Orwig received pay and benefits of \$158,142 in 2018. Ms. Orwig has 12 employees reporting to her for member services.

The ASPPB website lists other staff, including a business manager, financial officer, two directors of professional affairs, and an administrative associate.

"With a lot of cash sitting on the balance sheet, the strategy is to maximize expenses," said an MBA in reviewing the information for the *Times*. "The extra profits are likely to go into perks rather than price cuts," he said.

Examples of this appear to include items like travel, which includes travel for spouses or companions. The organization spent \$949,483 on travel in 2018 and \$1,169,743 on travel in 2017.

Other examples are \$336,175 on "technology," \$188,256 on conventions, \$123,053 for "item writers and exam consultants," \$144,000 on bank fees, \$60,610 on advertising, and \$55,946 on dues and subscriptions.

It is not clear how oversight is established at ASPPB. The *Times* asked one CPA to look over the information and he said, "Of course there is influence and COI (Conflict of Interest)."

**Conclusions**

ASPPB appears unable to constructively answer the criticisms and mounting evidence that their exam program, marketed to the captive customers through state boards, is scientifically deficient and discriminatory.

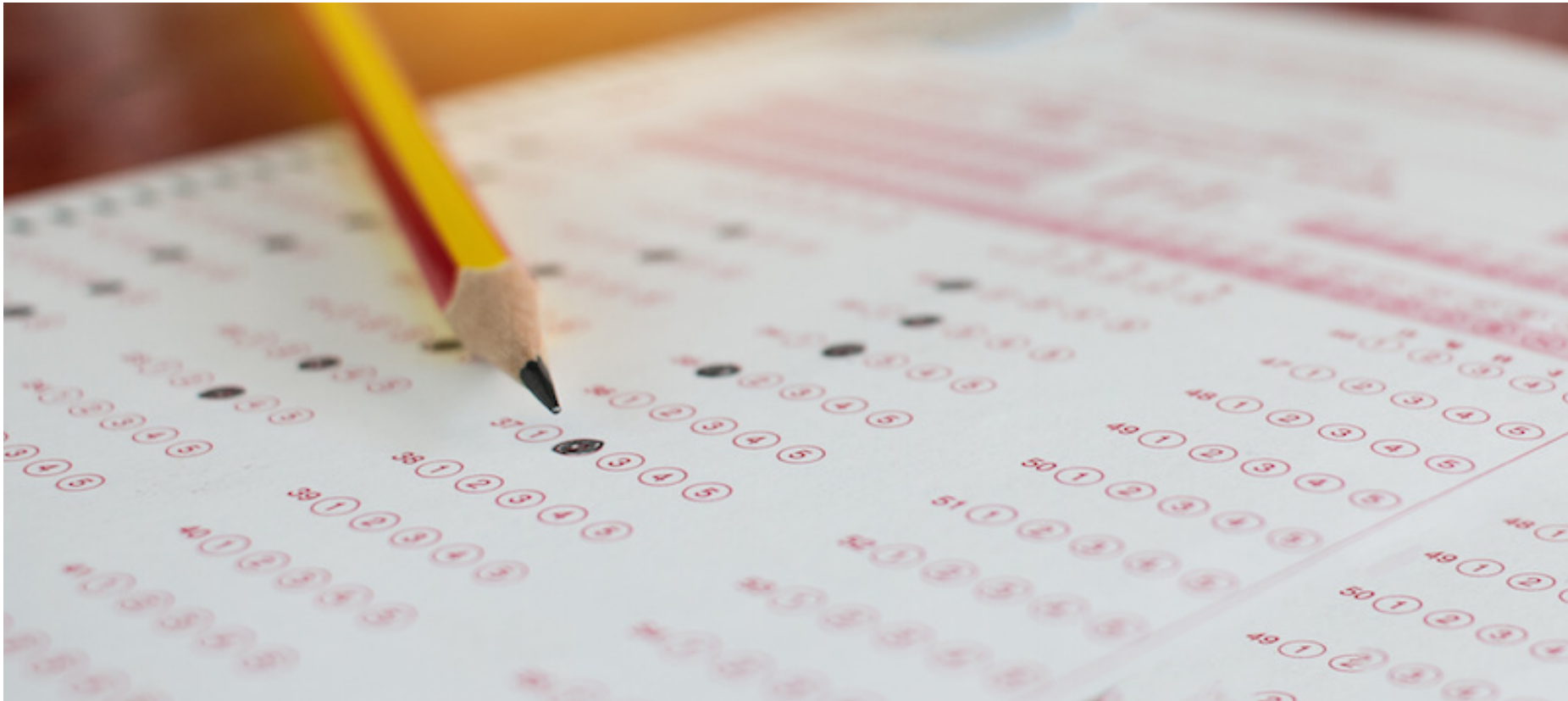
The state boards have bought into a mess, but do not appear able to deal with the bureaucracy at ASPPB. Since state boards are typically composed of clinicians, and rarely have the hands-on experience needed for high-stakes selection testing, they may lack the knowledge to fight the problem.

Ignorance does not fly as an excuse for discriminatory practices in the private sector, so it's ironic that it is found in the public and quasi-governmental agencies of psychology.

ASPPB appears too busy feeding off of the exam revenues, and building their bureaucracy on the backs of psychology license candidates, perhaps especially racial minorities, to wake up. State psychology boards must not ignore the problem any longer. Callahan's call for "drastic corrective action" is on point. But it is the members of ASPPB who need to take action, with or without ASPPB bureaucrats.

In September 2020, the American Psychological Association (APA) called for "... true systematic change in US culture." Zara Abrams reported in a *Monitor* article, APA "... is working to dismantle institutional racism over the long term, including within APA and psychology."

Before preaching anti-discrimination to others, APA needs to start in their own backyard.





[Congratulations to Dr. Burstein for his second place in Best Column at the 2021 Louisiana Press Association Awards!]

# A Shrink at the Flicks

## PIG A Review

by Alvin G. Burstein, PhD

This is a film you should see. Don't be put off by its eponymous title or by its starring Nicholas Cage, with his predilection for operatic excess and personal foibles. I am not going to say much about the movie's content, because it is a film to experience directly and to savor. You can find it on Amazon Prime.

It was directed by Michael Sarnoski, his first feature film. Along with Vanessa Block, he also co-wrote the script. The movie is organized into three sections: Rustic Mushroom Tart; Mom's French Toast & Deconstructed Scallops; A Bird, a Bottle, a Salted Baguette.

So now you know that cuisine plays a role. Cage, in the role of Rob Feld, is a one-time celebrity chef in Portland. After his wife's death Feld has dropped out of the hustle, into a ten-year hiatus as a recluse deep in the forest. The hiatus is interrupted by a home invasion that includes a beating for Feld and the kidnapping of the ex-chef's truffle hunting pet pig. What ensues is an account of Feld's determined attempt to recover his pig.

I recognize that my formulation is likely to evoke a snicker. Accept my assurance that the filmic experience will not evoke a shred of amusement or of snark. It is an account of loss and love, one that approaches C. S. Lewis's *A Grief Observed*. You

Guest Columnist,  
Dr. Alvin Burstein

Burstein, a psychologist and psychoanalyst, is a professor emeritus at the University of Tennessee and a faculty member of the New Orleans-Birmingham Psychoanalytic Center with numerous scholarly works to his credit. He is also a member of Inklings, a Mandeville critique group that meets weekly to review its members' imaginative writings. Burstein has published flash fiction and autobiographical pieces in e-zines;

*The Owl*, his first novelette, is available at Amazon. He is, in addition to being a movie fan, a committed Francophile, unsurprisingly a lover of fine cheese and wine, and an unrepentant cruciverbalist.



courtesy photo



may recall that, because of its raw and personal nature, Lewis intended his account to be published under a pseudonym, an intention that was derailed by a proofreader's recognizing the author's corrections to the proof.

*Pig* will surprise you over and over, taking turns that avoid bathos and defy expectations. As a work of fiction, the movie avoids Lewis's concerns about publicity and becomes pure art. The film has a mythic feel, with overtones of concerns about personal authenticity and a critique of "civilization." One of its tropes is the utilization of "Euridice" as the name of an upscale restaurant that Feld visits in his quest to recover Pig. In Greek mythology, of course, Euridice is the beloved wife of Orpheus. When she dies, the musician goes on a quest to Hades to recover her. Clearly Sarnoski's cue for what we should be looking for in this opus and of its potential meaning.

Cage's performance is one for the ages. I found myself thinking that, given some of his past stumbles, this role, one for which he will be remembered, would be a remarkable point at which to bow out. The culinary focus of the film brought Charlie Trotter to my mind. Trotter was a celebrity chef in Chicago. He won numerous awards and brought Michelin stars to the city. In 2012, at the height of his fame, Trotter closed his restaurant, announcing his intention to study philosophy. Two years later, at the age of fifty-four, he died.

I doubt that Cage will, or, really, should, retire. And I hope we all get to see much more of that of which Sarnoski has given us a taste.



# *New Office for State Americans with Disabilities Act (ADA) Position Established by Act 452*

Act 452 creates the office of the state Americans with Disabilities Act (ADA) coordinator, referred to hereafter as the "office", within the division of administration. Provides that the office shall be administered by an executive director who shall have the title of state ADA coordinator.

The new law provides that the office shall have the following functions, powers, and duties relating to the ADA:

(1) To serve as the coordinating body for ADA compliance for all state agencies within the executive branch of state government.

(2) To assist state agencies in updating, strengthening, and enhancing the scope of self-evaluation and transition plans to ensure compliance with the ADA mandate.

(3) To provide reports and recommendations to the legislature for the adoption of legislation to facilitate compliance with the ADA.

(4) To offer subject matter expertise for all matters relating to the ADA.

(5) To conduct general and customized training on ADA topics for state agencies.

(6) To provide informal technical assistance about the ADA to the general public and collaborate with local ADA support systems.

(7) To increase public awareness of the ADA for the purpose of helping more citizens to understand the letter and the spirit of the law.

# Measure by Rep. Paula Davis Creates La. Domestic Abuse Fatality Review Panel in LDH

Rep. Pauls Davis's measures was signed into Act 320, creating the La. Domestic Abuse Fatality Review Panel within the La. Dept. of Health (LDH).

Members of the review panel are to include: the state health officer or his designee, secretary of LDH or his designee, secretary of the Dept. of Children and Family Services or his designee, assistant secretary of the office of behavioral health of LDH or his designee, and others.

Also included are a sheriff appointed by the Louisiana Sheriff's Association, a police chief appointed by the Louisiana Association of Chiefs of Police, executive director of the Louisiana Coalition Against Domestic Violence or his designee, executive director of a community-based domestic violence service organization or his designee, and others.

The functions of the review panel shall include the following:

(1) Identify and characterize the scope and nature of domestic abuse fatalities in this state, (2) Research and review trends, data, or patterns that are observed surrounding domestic abuse fatalities, (3) Review past events, (4) Research and revise, as necessary, operating rules and procedures for review of domestic abuse fatalities, (5) Recommend systemic improvements to promote improved and integrated public and private systems serving victims of domestic abuse, (6) Recommend components for prevention and education programs. (7) Recommend training to improve the identification and investigation of domestic violence fatalities that occur in Louisiana.

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