

special report

## An Ounce of Prevention

by J. Nelson

The third reason for death in the U.S. is unintended outcomes of medical treatment. A study by Martin Makary, MD, then a professor of surgery at Johns Hopkins University School of Medicine, found that medical errors—comprise the third leading cause of death in the U.S.

“It boils down to people dying from the care that they receive rather than the disease for which they are seeking care,” Makary said to *The Washington Post*.

We know about some of these problems. When the specialists go on vacation the mortality drops. For the one out of 1,000 women saved by mammo-graphy, up to 10 healthy women will be treated needlessly. A third of FDA approved drugs have been found to later have safety issues.

However, in a comparison of age-adjusted deaths from all causes, the World Health Organization ranks the United States last in similar countries. At the same time, Louisiana ranks 50 of all the states.

For this report, we look at the barriers to providing prevention,



Adobe

rather than the expensive and dangerous treatments now provided by the medical and pharmaceutical industries.

Consider an example from mental health. Imagine that a patient with psychosis is given nutrients. She improves her quality of life to such a degree that she no longer needs yearly hospitalizations, which, along with other expenses, amounted to \$500,000 of costs over a five-year period.

Dr. Bonnie Kaplan, Professor Emerita in the Cumming School of Medicine at the University of Calgary, in

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## Dr. Erin Richard Helps with Novel School Design

by James Glass

Dr. Erin Richard, Associate Professor in the School of Leadership & Human Resource Development and Louisiana State University (LSU) has helped pave the way for two traditional elementary schools in the East Baton Rouge Parrish School System to transform into magnet schools.

Superintendent Sito Narcisse has proposed converting two Baton Rouge elementary campuses into health care and environmental education programs. These two programs would be backed by Baton Rouge General Medical Center and LSU, according to a report in *The Advocate*.

Dr. Richard, who holds a PhD in Industrial and Organizational Psychology from LSU, has applied her expertise and conducted evaluation workshops on the teachers being brought on board to launch the new program in the East Baton Rouge Parish School System.

The two schools being proposed are Park Elementary and Polk Elementary.

Superintendent Narcisse's proposal noted that Park

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Guest Column:

## Our WWII Mothers & Sisters in the Military

by Rodney R. Baker, PhD  
VA Psychology Historian

The reference to WWII mothers and sisters in the military in this commentary is quite accurate. Many do not realize that women did in fact directly serve military positions during WWII and have been doing so since the Revolutionary War. I began my VA psychology historian role in the 1980s while still a chief of psychology at the VA Medical Center in San Antonio. In that historian role, I first became interested in collecting stories about women in the military while working on a research project I published with two Vietnam nurses about the military nurse experience in Vietnam. My collection of stories continued when I

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Nurses at Normandy (Courtesy of Nimitz National Museum of the Pacific War in Fredericksburg, Texas.)

# Editorial Page – Opinions

## Letters to the Editor

**Re: The Psychology Times, news for the psychology community**

November 1, 2023

Dear Julie,  
I am writing just to let you know how much I enjoy reading *The Psychology Times*. Here in California, no professional psychology newsletter or publication parallels the interest your articles incite. I look forward to the next, and the next. Thank you for what you do!

Warm Regards,

Mary C. Lamia, Ph.D.  
Kentfield, CA

## The Psychology Times

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## Publisher of *National Psychologist* Remembers Tommy Stigall

November 3, 2023

Hi Julie:

I just read about the passing of Tommy Stigall in *The Psychology Times*. I remember meeting him with Connie at an APA Convention sometime in the 1980s. At that time, my father (Henry Saeman) was the executive director of the Ohio Psychological Association. Connie was his counterpart in Louisiana. I remember my father and Connie went off to a presentation together and Tommy and I went for coffee or a soda. We sat and chatted for about an hour regarding an array of topics. He was so pleasant and knowledgeable about many topics. We spoke about psychology related issues, our families and an array of other areas of mutual interest.

When we began *The National Psychologist* (newspaper) in 1991, Tommy (and Connie) were both trusted friends and confidants of my father. Tommy wrote an article or two for us in those early years. In recent years, I often thought about contacting him but figured he might have been "out of the psychology field" for a decade or more. I should have trusted my instincts and contacted him. Now I deeply regret not doing so.

Marty Saeman  
*The National Psychologist*  
=====

Please let Connie know I'm thinking about and praying for her and send my sincerest condolences to her and their family.

## WWII Fathers Article

November 19, 2023

The WWII Fathers' articles were quite inspiring. Their stories reminded me of the many stories I heard from patients I worked with as a VA practicum student and intern in the 60s. My supervisors, mentors, and those who I respected in leadership were also WWII vets who shared their veteran stories. This included my first practicum supervisor who was a WWII veteran who was paralyzed by a gunshot in the back during combat and was confined to a wheelchair for the rest of his life. He became the chief psychologist at the Tucson VA Medical Center and also served as the top consultant around the country for all VA spinal cord units. It also included the head of psychology in VA Central Office in Washington, DC who was a fighter pilot during WWII who helped me and many others get our first jobs as a chief psychologist in a VA medical center. The last of my WWII veteran friends died earlier this year who helped me learn about the early days in the VA as I began writing about the history of VA psychology. We all have much to thank our WWII Fathers, Mothers, Brothers, and Sisters. I feel especially indebted to them, however, for helping me spend a 40-year satisfying career helping veterans in VA Medical Centers.

Rod Baker, PhD  
San Antonio, TX  
Retired Chief of Psychology & Director of Mental Health  
VA Medical Center in San Antonio

## Corrections & Clarifications

We did not receive any corrections or clarifications. Please send your corrections to:  
[psychologytimes@drjulienelson.com](mailto:psychologytimes@drjulienelson.com)



Louisiana Department of Health Releases Outcomes Report—Meets 91% of its 45 Goals

In a Nov. 27 announcement, the Louisiana Department of Health (LDH) released its annual Outcomes Report detailing the results of key initiatives and policy goals for FY 2023. LDH was successful in completing 91.1% of its 45 goals and 92.5% of its 253 deliverables outlined in the FY 2023 LDH business plan titled “Invest: Teaming Up for a Stronger LDH and a Healthier Louisiana.”

According to officials, goals were selected from a range of policy priorities and include addressing chronic disease; improving maternal health; expanding Medicaid policies that address environmental health risks; expanding the behavioral health system’s capacity; and improving services for citizens with developmental disabilities, among others.

LDH had five major categories designed to make measurable improvements: Improve health and well-being across the lifespan of Louisianans; Support vulnerable and underserved populations; Invest in and empower #TeamLDH; Improve performance, accountability and compliance; and Strengthen customer service, partnerships and community relations.

“Improving health outcomes for all Louisianans is critical, and the Department of Health has made tremendous progress in implementing policies that address some of the biggest health challenges facing our state, including chronic diseases, maternal health, behavioral health and overall access to quality medical care for all of our hardworking individuals and families,” said Gov. John Bel Edwards.

“LDH continues to build on the adoption of Medicaid expansion, the easiest big decision I made nearly eight years ago, and as a result, hundreds of thousands of our citizens are able to seek preventive care and treatment for serious conditions that they otherwise would not be able to afford,” said the Governor. “In addition, LDH has provided more services and programs to assist more people in need, and I’m proud of all this team has done to develop and execute a plan with key policy priorities that are equitable and enable Louisianans to live healthier and have a higher quality of life.”

Quotes from community partners and legislators in the press release included:

“Family and children have always been a focal point for me over the last eight years as First Lady. That is why I’m grateful to see the Louisiana Department of Health is continuing to prioritize emotional and behavioral health for children in our state. By developing an action plan to address Adverse

Childhood Experiences and executing trauma-informed care, more families throughout Louisiana can work towards being happier, healthier and readily have access to the care they need,” said Louisiana First Lady Donna H. Edwards.

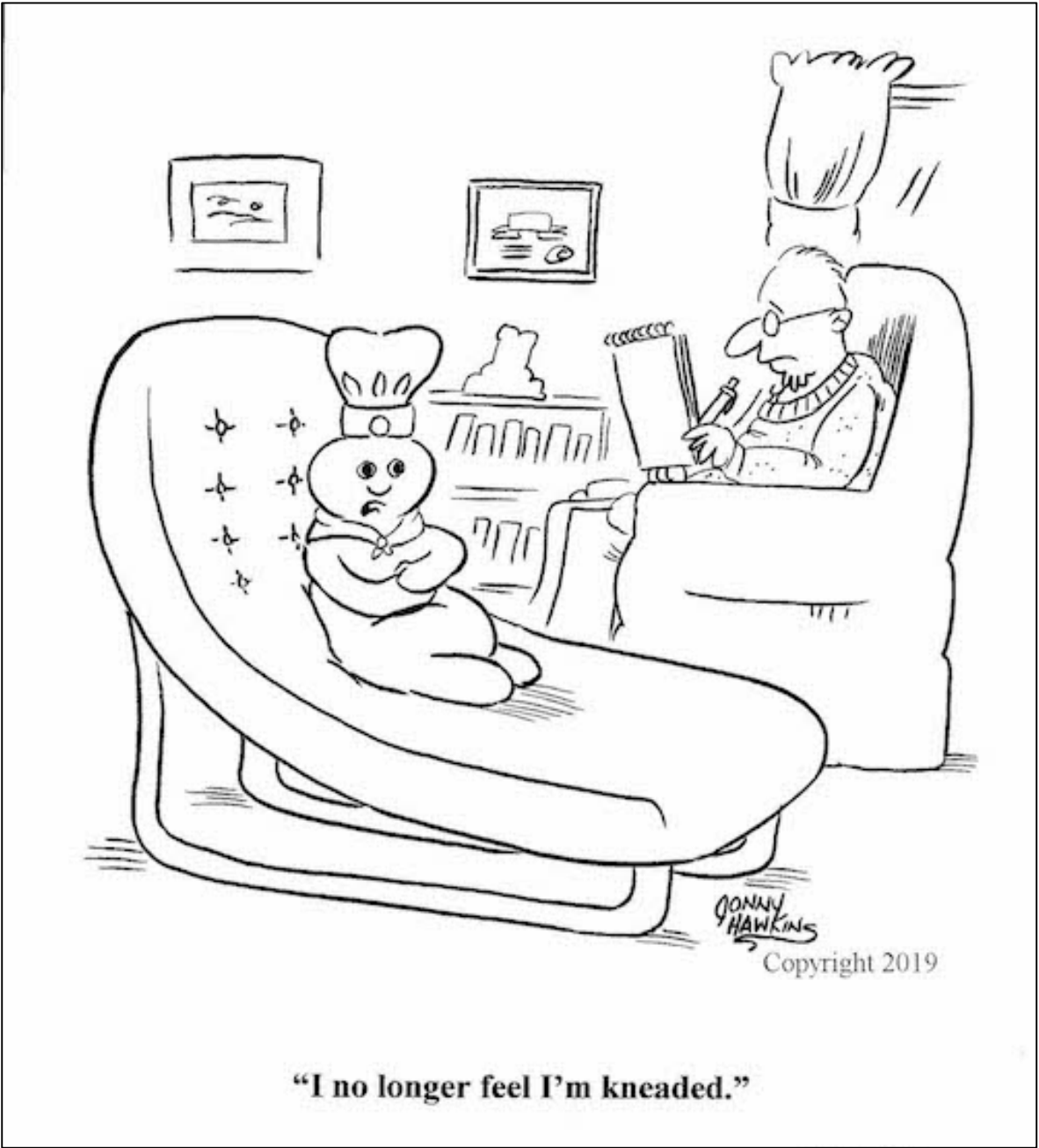
“The Department’s dedication to addressing the mental health crisis in Louisiana is both commendable and essential. LDH’s involvement in the launch of the Louisiana 988, alongside the efforts of the Office of Behavioral Health, is a significant step towards ensuring Louisianans in crisis have access to the support they need,” said State Representative Laurie Schlegel, District 82.

Tonja Myles, Certified Peer Support Specialist, Set Free Indeed Ministry, said, “Louisiana 988 has quickly proven to be a critical source of 24/7 mental health support. Upon its launch, many Louisianans were unaware of this crucial resource. However, LDH has made significant progress in promoting this important tool, which is becoming more widely utilized and known during a time of mental health crisis in our state. I look forward to seeing the continued usage and promotion of 988, aimed at reaching our most vulnerable residents in their time of need.”

Gov. Posts on His Accomplishments

Nov 13 the Office of Governor announced the launch of “56 for 56,” a social media campaign that will highlight one signature accomplishment of Louisiana’s 56 the governor every day for the 56 days remaining before the inauguration on January 8. The first post of the campaign is about the very first signature accomplishment of the Edwards administration, delivered on the Governor’s first day in office...Medicaid Expansion. Find the 56 for 56 campaign by following the Governor’s social media channels and using the hashtag #56for56.

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# Dr. Erin Richard Helps with Novel School Design, continued

by James Glass

Elementary would then add a middle school and the name would change to Park Elementary Medical Academy. Polk Elementary would become a sixth-through-12th-grade school and would be renamed the Eva Legarde Research Center for Coastal Studies and Environmental Studies.

In a memorandum from Superintendent Narcisse, the Eva Legarde Research Center for Coastal Studies and Environmental Studies would be based on a phase-in approach, with 50 students per grade level or approximately 350 students. Successful participation in this program is an asset for students interested in pursuing their post-secondary studies at LSU.

Narcisse explained that professional development, both at the district level and in partnership with LSU, is a crucial component to ensure that teachers have the expertise and support to ensure that the program is implemented with fidelity.

This is where Dr. Richard's expertise plays a key role in the successful completion of professional development. As a faculty member in the LSU School of Leadership and Human Resource Development, Dr. Richard teaches courses on work stress and health, organizational needs assessment, program evaluation, and quantitative research methods.

Dr. Richard consults with local organizations to provide services such as training needs assessment, program evaluation, leadership development workshops, and survey design and analysis.

Her research focuses broadly on the promotion of worker well-being, with a focus on topics related to emotion, self-regulation, interpersonal communication, and leadership.

Dr. Richard is currently examining how organizational leaders manage negative emotion and promote resilience in followers.

"This is a dream coming true before our very eyes," Edgardo Tenreiro, chief executive officer for Baton Rouge General, told the board. Tenreiro said Baton Rouge General has a school of nursing that the Park Elementary program could feed into, noting there's a shortage of nurses right now.

Christopher D'Elia, dean of LSU's college of coast and the environment, said the college has successfully partnered for years with science-minded students at Scotlandville High and he sees the new Eva Legarde school as an opportunity to expand on that. "I'm looking for more of the same and better, and I just can't tell you how excited we are about this opportunity," D'Elia said.

Dr. Richard has conducted applied research funded by the Office of Naval Research in partnership with the Naval Air Warfare Center Training Systems Division (NAWCTSD), and she has collaborated on projects funded by the Educational Testing Service (ETS) and the National Institute for Occupational Safety and Health (NIOSH). She has also consulted with local organizations to provide new manager training.

Her focus is on intrapersonal and interpersonal processes related to emotion in the workplace, the promotion of worker well-being, with a concentration on topics related to emotion, self-regulation, interpersonal communication, and leadership. Her research interests include Industrial and organizational psychology, work stress and health, leadership and emotion Interpersonal emotion management, work motivation, cyber-aggression and workplace neurodiversity.

She has published her research in academic journals such as Journal of Applied Psychology, Personnel Psychology, Organizational Behavior and Human

Decision Processes, Occupational Health Science, and many others.

Dr. Richard's publications include:

Matey, N., Sleiman, A., Nastasi, J., Richard, E. M., & Gravina, N. (2021). Varying Reactions to Feedback and their Effects on Observer Accuracy and Attrition. *Journal of Applied Behavior Analysis*, 54(3),1188-1198.

Richard, E. M. (2020). Promoting employee resilience: The role of leader-facilitated emotion management. *Advances in Developing Human Resources*, 22(4)\*, Special Issue on Resilience and HRD (J. Mendy & M. Bal, Issue Eds.) Issue awarded the 2020 Best Issue Award from the ADHR editorial board.

Richard, E. M., Young, S. F., Fischer, J. J., & Giumetti, G. W. (2020). Unique effects of cyberaggression on victims' counterproductive work behavior via rumination and negative emotion. *Occupational Health Science*, 4, 161-190.

Richard, E.M. Fischer, J. J., & Zhou, Z. E. (2019). Cyberbullying in the Workplace: Cross-cultural Issues. In G. Giumetti and R. Kowalski (Eds.), *Cyberbullying in Schools, Workplaces, and Romantic Relationships: The Many Lenses and Perspectives of Electronic Measurement*. Routledge/Taylor Francis.

Dr. Richard received her PhD in Industrial-Organizational Psychology from Louisiana State University. She is Assistant Professor in the School of Leadership and Human Resource Development, in the College of Human Sciences & Education at Louisiana State University. She serves on the editorial board of the *Journal of Business and Psychology*, *Organizational Behavior and Human Decision Processes*, and the inaugural board of *Occupational Health Science*. She is also a member of the Academy of Human Resource Development, the Society for Industrial and Organizational Psychology, and the Society for Occupational Health Psychology.



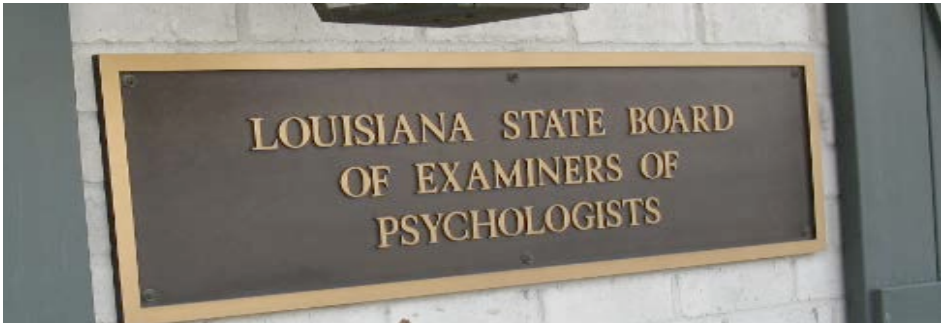
Erin Richard, PhD

Dr. Richard is helping with the organizational development activities for the Baton Rouge school systems.

She is Assistant Professor in the School of Leadership and Human Resource Development, in the College of Human Sciences & Education at Louisiana State University. She serves on the editorial board of the Journal of Business and Psychology, Organizational Behavior and Human Decision Processes, and the inaugural board of Occupational Health Science.

(Photo courtesy of LSU)





From April Meeting  
Published in October

i. **Accept/Discuss Ethics Attorney Letter: ASPPB CE’s for Board Members** – Dr. Gormanous reported that the Board of Ethics Opinion regarding Board Members not being prohibited from receiving Continuing Education (CE) credit from ASPPB, was pulled from the Board of Ethics website. The Board of Ethics opined that it was not prohibited for Board Members to receive CE credit for attending ASPPB.

**Continuing Professional Development:**

**Applications for Licensee CPD Preapproval and Sponsor Activity Approval** - The Board reviewed the application forms for the preapproval of CPD activities of licensees and preapproval of activities and offerings by other individuals. Dr. Harness moved in favor of adopting the “*Sponsor Application for Approval of Continuing Professional Development*” form and the “*Licensee Application for Preapproval of Un-sponsored Continuing Professional Development Offerings or Activities*”. Following an opportunity for discussion, the motion was put to a vote. The motion passed by unanimous roll call vote of the members present as follows: In favor: (5) Gormanous, Moore, Harness, Sam and Holcomb; Against: (0); Abstained: (0); Absent: (1) McNeely.

**Approve training video/credit for licensees** – The Board discussed the 2023 Regulatory Update and Training, Part I presented by Ms. Monic. Dr. Harness stated that she had watched the video and thought it was good. Dr. Harness moved in favor of approving he CPD training video and offer a half hour of CPD Credit for completing the training. Following an opportunity for discussion, the motion was put to a vote. The motion passed by unanimous roll call vote of the members present as follows: In favor: (5) Gormanous, Moore, Harness, Sam and Holcomb; Against: (0); Abstained: (0); Absent: (1) McNeely.

6. **2023-24 Contract Review** a. **COMPLAINTS COORDINATOR 2 – Mark P. Vigen, Ph.D.** Ms. Monic reported the term for Dr. Vigen’s contract would be ending on June 30, 2023. Following discussion, Dr. Gormanous moved to adopt the following resolution: [...]

*IT THEREFORE RESOLVES by motion of Dr. Gormanous that the Board contract with Dr. Vigen to provide services as Complaints Coordinator II, for a fiscal-year beginning July 1, 2023 and ending June 30, 2024 for an amount not to exceed a maximum of \$5,000. BE IT FURTHER RESOLVED that the hourly rates of pay for the position of Complaints Coordinator shall be: \$100 per hour, [...]*

a. **INVESTIGATOR – Statewide Surveillance & Investigation, LLC (Tony McCoy/Henry Richardson)** - Ms. Monic reported the term for the investigation contract **with Statewide Surveillance & Investigation, LLC** would be ending on June 30, 2023. Following an opportunity for discussion, Dr. Gormanous moved to adopt the following resolution: [...] *IT THEREFORE RESOLVES* by motion of Dr. Gormanous that the Board contract with Statewide Surveillance & Investigations for an amount not to exceed \$12,000, to provide investigatory services beginning July 1, 2023 and ending June 30, 2024. The contract to commence at the following rates of pay: *\$60 per hour for investigative work; [...]*

v. **Vinformatics\*** Dr. Holcomb presented 3 proposals for information technology, and Dr. Sam presented an option for CE Broker. The Board balanced their options based on their financial position. Dr. Holcomb moved to adopt the following resolution:

*IT THEREFORE RESOLVES by motion of Dr. Holcomb, that the LSBEP accept Covalent Logic’s Proposal for a custom licensing system, including complaints management and online applications, and enter a multi-year contract with Covalent Logic for the design and development of the system in an amount not to exceed \$50,000 for Standard Content Management System Cost and Licensing Management System Cost; \$50,000 for Phase II of the proposal, to provide information technology services including, but not limited to for the addition of the supervision component [registration of assistants] plus additional optional features to include \$7,000 for Communications Manager, \$6,500 for Table Manager, \$3,000 for content migration and authorize payment of a monthly fee upon implementation of \$750/month for Hosting and Technical Support. The contract to begin May 15, 2023 and end June 30, 2029.*

**LDH – OCDD: Request for exceptions to Registration of Assistants** – The Board considered a request from the La Department of Health, Office of Developmental Disabilities related to a waiver *of the required fee as another state agency under the LDH budget; and a streamlined process of registration of all assistants and notification of any employment changes including if an assistant leaves the agency and/or if supervision changes including a recommendation that the notifications would come from the OCDD Clinical Director for any OCDD Resource Center clinicians and from the Pinecrest Supports and Services Center or Central Louisiana Supports and Services Center administrator for any clinicians under the purview of these facilities.* They discussed the requirement and

# From the Minutes

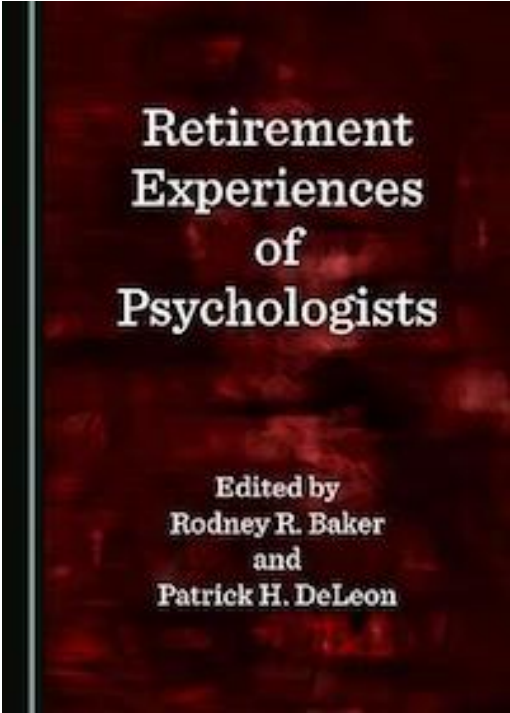
## Selected Items from April Meeting of the Louisiana State Board of Examiners of Psychologists (LSBEP)

responsibility of the Licensed Psychologist related to utilization of assistants and the requirement that the assistant operate under the direct supervision of a Licensed Psychologist. Additionally, the board discussed the fact that it does not receive any state general funds to support the staff and operations required to regulate. *Following discussion, Dr. Holcomb moved to deny the request* to waive fees associated with registration and renewal of assistants and affirm the requirement that all licensed psychologists comply with the notification requirements related to the discontinuation of an assistant. The motion passed by unanimous roll call vote of the members present as follows: In favor: (5) Gormanous, Moore, Harness, Sam and Holcomb; Against: (0); Abstained: (0); Absent: (1) McNeely.

**La Department of Education – Recertification of School Psychologists** – Dr. Gormanous reported on the meeting with LDOE representatives, Ms. Elizabeth Duncan, Rachel Normand and Christy Bellue, and LSBEP representatives, Dr. George Hebert, Jaime Monic and including himself. Dr. Gormanous explained that LDOE was seeking to provide a fast track for recertification of individuals who were licensed as either Licensed Psychologists or Licensed Specialists in School Psychology (LSSP’s). Dr. Gormanous reported that he saw this as a very positive move that would benefit LDOE, LSBEP and the public. Dr. Gormanous reported that following the meeting, the LSSP Committee met and was not inclined to consider grandparenting, but did devise a table to demonstrate that Licensed Psychologists and LSSP’s met or exceeded certification standards; and further suggested that because the language in Bulletin 746 refers back to NASP standards, then Level A and Level B certified school psychologists should meet the eligibility requirements for the LSSP License if their training program and internship are consistent with the NASP Standards. Current regulations will allow the Board to consider equivalency for training and internships on an individual basis. Ms. Monic recommended that the Board adopt the guidance developed by the LSSP Committee. Following a very positive discussion and commendations for the Committee’s work, Dr. Moore moved to approve and adopt the guidance comparing equivalencies identified by the LSBEP with respect to education, training and continuing education for LSBEP and LDOE’s respective licenses/certifications/renewals/ recertifications. Further that the guidance be shared with LDOE and opinion that because the language in Bulletin 746 refers back to NASP standards, then Level A and Level B certified school psychologists should meet the eligibility requirements for the LSSP License if their training program and internship are consistent with the NASP Standards. Current regulations will allow the Board to consider equivalency for training and internships on an individual basis. Following an opportunity for discussion, the motion was put to a vote. The motion passed by unanimous roll call vote of the members present as follows: In favor: (5) Gormanous, Moore, Harness, Sam and Holcomb; Against: (0); Abstained: (0); Absent: (1) McNeely.

This matter was tabled due to time. **Masters Level Licensure (TSam)**

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Guest Column:

# *Our WWII Mothers & Sisters, continued*

by Rodney R. Baker, PhD  
VA Psychology Historian

retired in 2004 and have grown in number. The stories have impressed me with the diversity and impact of women in the military in our nation’s wars as well as their courage and sacrifice. In my historian role I am convinced that history is all about what happened and what happened is a story. I have many stories about women in the military from our nation’s early beginning, and I am pleased to share some of them with you from WWII in this narrative.

Those of you who are reading this and have seen my letter to the editor know that I referred to the WWII Fathers’ articles in the November 2023 *Psychology Times* as inspiring. The photos in those stories added to their impact, and I would like to start my sharing of stories of WWII women in the military with two photos of exhibits from the Nimitz National Museum of the Pacific War in Fredericksburg, Texas. The first photo notes that nurses were among the first women to arrive at the Normandy beachhead after D-Day and assisted in the operating theater. The second photo shows a woman who served in the Women’s Air Force Service Pilots (WASPs) who ferried aircraft from the factories to air bases, served as test pilots and flight instructors, shuttled officers around, and towed targets for artillery practice.

It is estimated that 350,000 American women joined the military during World War II. They served roles as nurses, drove trucks, repaired airplanes, and performed clerical work. Some were killed in combat or captured as prisoners of war. Over 1600 female nurses received various decorations for courage under fire. As many as 543 women died in war-related incidents, including 16 nurses who were killed from enemy fire. Although U.S. political and military leaders had decided not to use women in combat because they believed that public opinion would not accept such roles, nurses were needed to provide care to soldiers in combat zones and they ignored any technical distinction between serving in combat or serving in combat zones.

The Army established the Women's Army Auxiliary Corps (WAAC) in 1942, with WAACs serving overseas in North Africa. The WAAC was converted to the Women's Army Corps (WAC) in 1943. Recognized as an official part of the regular army, more than 150,000 women served as WACs during the war with thousands sent to the European and Pacific theaters. In 1944, WACs landed in Normandy after D-Day with WACs also serving in Australia, New Guinea, and the Philippines in the Pacific.

The National Archives and Records Administration reports that in September 1942, the Army Air Force (AAF) created the Women's Auxiliary Ferrying Squadron (WAFS) and recruited highly skilled and experienced female pilots who were sent on noncombat missions ferrying planes between factories and AAF installations. Eventually, over one thousand women completed flight training in the program. As the ranks of women pilots serving the AAF swelled, the value of their contribution began to be recognized, and the Air Force took steps to militarize them. As a first step the Air Force changed their unit name from WAFS to Women Airforce Service Pilots (WASP). Thirty-eight WASPS died in accidents in their assigned duties. Women were finally recognized as a permanent part of the U.S. armed forces with the passage of the Women's Armed Services Integration Act of 1948. However, they were not granted veteran status until 1977,



*Women Air Force Service Pilots (WASPs )in WWII (Courtesy of Nimitz National Museum of the Pacific War in Fredericksburg, Texas.)*

and finally only became eligible for the Congressional Gold Medal in 2009.

Records at the National WWII Museum in New Orleans note that among the more than 27,000 American military personnel held as POWs in the Pacific were 77 US military nurses. The women, members of the Army Nurse and Navy Nurse Corps, would come to be known as the “Angels of Bataan and Corregidor.” Taken prisoner in the Philippines, the nurses were held with POWs in the Santo Tomas and Los Banos Internment Camps. In those critically undersupplied internment camps, they were able to provide vital professional care to all Allied POWs held there. Santo Tomas became a POW city of roughly 6,000 people The nurses helped to establish the Santa Catalina Hospital on the grounds of that camp and did their best to help stem epidemics in the overcrowded camp as well as organized a public health campaign in the most unsanitary conditions. They treated patients with minimal supplies in spartan conditions for accidents, disease, and malnutrition. The weight loss due to starvation in the camps averaged around 32 percent of an individual’s body weight. The American nurse POWs were not just waiting to be liberated, they were fighting to survive and to ensure the survival of others for whom they were proving care.

Miraculously, all 77 of the nurse POWs survived the almost three-year long imprisonment from May 1942 to February 1945, The Army nurses were liberated from Santo Tomas in early February of 1945. I have added a photo from the National WWII Museum in New Orleans that shows that the Navy Nurses, who had been moved to the Los Banos Internment Camp, were liberated three weeks later. After

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Guest Column:

# Our WWII Mothers & Sisters, continued

by Rodney R. Baker, PhD  
VA Psychology Historian

[liberation](#), the Angels of Bataan and Corregidor received little recognition as military prisoners of war. But most of the nurses said that they did not do anything extraordinary, they were just doing their jobs.

I will finally note that the Military Women’s Memorial (described at <https://womensmemorial.org/>) was established by a grateful nation to honor women who have served in or with the United States Armed Forces. It is unique in inviting military women to register and submit their stories, thus preserving those stories for future generations. The memorial is located at the gateway to Arlington National Cemetery in Virginia, USA. Dedicated in 1997, it is the only major U.S. national memorial that recognizes the courage and patriotism of an estimated three million women who have defended their country throughout history starting with the Revolutionary War.



*Liberated Navy POW nurses at Leyte, Feb 23, 1945. (Courtesy of Naval History and Heritage Command and National WWII Museum in New Orleans.)*

Rodney R. Baker, PhD  
VA Psychology Historian

*Rodney Baker’s distinguished 40-year VA career included chief of psychology and director of mental health positions at the VA Medical Center in San Antonio, Texas. During that career, he also served as historian and archivist for VA psychology and for the APA Division of Psychologists in Public Service. Following his retirement from the VA in 2004, he co-authored the first comprehensive history of VA psychology as one of many publications focusing on the care of veterans by VA psychologists. He was also awarded the American Psychological Foundation Gold Medal Award for Life Achievement in the Practice of Psychology in 2017.*  
( courtesy photo)



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special report

# An Ounce of Prevention, cont'd

by J. Nelson

Alberta, Canada, and expert in the field of nutritional mental health, thinks this type of prevention might save lives and money. Kaplan publishes widely on the biological basis of developmental disorders and mental health – particularly, the contribution of nutrition to brain development and brain function.

In her “Hospitalization cost of conventional psychiatric care compared to broad-spectrum micronutrient treatment,” in *International Journal of Mental Health Systems*, Kaplan points to dramatic savings for those patients that respond to nutritional interventions.

Nutrition is one of the innovations in illness prevention that has been neglected for decades. Other basic approaches include behavioral and psychological treatments for lifestyle based illnesses, equally as cost-effective.

“Prevention requires tools that are often unfamiliar because educational, behavioral, and social interventions, not usually considered to be part of medicine, may be most effective for many diseases,” said Hamilton Moses and co-authors in, “The Anatomy of Health Care in the United States,” in an article of the *Journal of the American Medical Association*.

While medical costs are driven by chronic disease, it is not due to an aging population, even though age is often cited as the cause. Moses shows that about 80 percent of the total health care cost is accounted for by those under 65, and relate to psychological, social and behavioral elements. The CDC estimates that three lifestyle factors—poor diet, inactivity, and smoking—account for 80 percent of heart disease and stroke, 80 percent of type 2 diabetes, and 40 percent of cancer.

"Behavioral intervention is the foundation for lifestyle medicine," writes Dr. John Caccavale, author of *Medical Psychology Practice and Policy Perspectives*. "Of the top four classes of medical problems in America – metabolic disorders, respiratory disease, cardiovascular disease, and mental disorders – physicians will have great difficulty demonstrating that they are improving patient health by utilizing medications as a first-line treatment for these classes of disorders," writes Caccavale.

"I think wellness/prevention are areas where there is tremendous need in primary care," said health psychologist Dr. Michelle Larzelere.

"For both physical and mental health, the need to work on active problems is often so high that wellness/prevention get shorted on attention," Larzelere said.



Adobe

"The health habits that most reduce the preventable component of the most prominent causes of morbidity and mortality in the US, –for example, refraining from smoking, eating a healthy diet, getting regular exercise, and limiting alcohol consumption– are behaviors that psychologists can really impact positively. Unfortunately, at least in my experience, other needs are so great that it is hard to make time for wellness/prevention initiatives unless there is a specific plan put in place."

Author of *Health Psychology*, Dr. Linda Brannon said, "The division of health into mental and physical health is a false dichotomy that we need to get over. I think that many providers address the presenting problem to the extent that they do not look beyond it."

For decades now, psychological scientists have known that behavior is the key to costs. Larzelere explained that psychological scientists have agreed that those using an integrated care model can expect a 30 to 60 percent reduction in medical use costs.

Quality care and cost savings dovetail at the primary care level. To put this in perspective, a 10 percent reduction in medical/surgery costs nationwide –by treating the mental or behavioral component– would exceed the entire current national mental health budget, she explained.

She is correct. Prior to Covid, CMS and The National Health Expenditure Accounts reported that healthcare spending reached \$3.5 trillion in both public and private sources. This is \$10,739 per person. And accounts for 17.9 percent of the Gross Domestic Product.

A ten percent savings, as Larzelere suggests, is \$350 billion. Estimating savings at 30 percent could mean a savings of \$1 trillion dollars.

Is all this spending doing anyone any good?

A pattern of poor health outcomes and high costs reflects the country as a whole. The United States ranks 50<sup>th</sup> out of 55 industrialized countries in a measure of life expectancy and medical care spending, according to *Bloomberg*, who concluded the U.S. is the “least-efficient” health-care system in the world.

Louisiana is always at the bottom. In the most recent report from America's Health Rankings, an annual analysis of the United Health Foundation, Louisiana ranks No. 50.

The state has its challenges. Nearly 21% of the population of the state is at the poverty level or below, when only 12 1/2% of the citizens nationwide fall at this level of economic status. Over 41% of the citizens a Louisiana fall at 200% of the poverty level or below. Compare this to 29.75 percent nationwide.

Health is woven into a complex set of social and psychological behaviors, not a single cause. “Socioeconomic status is one of the most powerful predictors of all cause mortality,” says Dr. Chris Leonhard, health psychologist and Professor at the Chicago Professional School at Xavier. “New Orleans is a startling example of this,” Leonhard said. “Life expectancy at birth in the Tremé where the average household income in 2010 was about \$26,000 is 55 years, while in Lakeview, the

# An Ounce of Prevention, continued

by J. Nelson

average 2010 household income \$75,000, and life expectancy at birth is 80 years."

Pre-Covid, Louisiana paid \$10.7 billion on behalf of about 1.9 million Medicaid recipients, averaging about \$5,694 per recipient, according to the Louisiana Department of Health. During the fiscal year 2017–2018, about 39.6 percent of Louisiana’s population were enrolled in the Medicaid program and payments were made on behalf of 1,876,908 recipients

However, according to an analysis by Blake Kruger and Jeremiah Brown, Louisiana spends the most on Medicare beneficiaries per capita than any other state. At the same time, we reports greater disparities in health status and death rates than other states.

Kruger and Brown investigated the associations between healthcare intensity, healthcare spending, and mortality in Louisianan Medicare beneficiaries. They defined healthcare intensity to be synonymous with the hospital care intensity index, a combination of inpatient days and physicians' services.

The researchers found no association between healthcare intensity and spending. Nor did they find any association between spending and mortality, noting, "We also observed no association between health-care spending and age, sex, and race-adjusted mortality." And, when they compared healthcare intensity to age, sex, and race-adjusted mortality, they could find no meaningful associations. Nor did they find than more spending made any difference in survival when adjust for smoking, inactivity, or obesity.

They concluded, "We found that no associations exist between healthcare intensity and spending, spending and mortality, as well as healthcare intensity and mortality. The lack of an association between healthcare intensity and spending may indicate that outpatient care in Louisiana is becoming more highly utilized and thus our measure of inpatient care intensity is becoming less sensitive. These findings may also reflect that spending more on healthcare in Louisiana may not improve rates of survival and should prompt reflection as to the role social programs play in producing more auspicious health outcomes for Louisianans."

## Healthcare is Designed by Special Interests

The sheer size and complexity of the healthcare industry would suggest that innovations would be challenging, but change may be even more unlikely because of the political power yielded by the industry. Over the last years the pharmaceutical industry, Blue Cross/Blue Shield, the American Hospital Association, and the American Medical Association were the some of the highest contributors to Congress.

Psychology and other groups have not been able to garner a place at the medical table. California Attorney David Ries of Human Capital Specialists tried to persuade federal Rule makers to include psychologists in the bonus plan for Accountable Care Organizations (ACOs) but failed. He told the *Times* that the final Rules were very disappointing, and said, "The broad recognition of the importance of behavioral health to overall wellness indicates that ACOs are unlikely to achieve their treatment objectives ...".

These special interests exert themselves not only through direct lobbying, but the medical-pharmaceutical-hospital-insurance industrial complex has a firm hold on the prices and services through the "CPT Codes" and the "Relative Value Scale Update Committee" or RUC. These special interest groups decide what services are allowed and how much they are reimbursed.

The CPT codes, short for Current Procedural Terminology, control what services are allowed and reimbursed. The codes are created by three hundred "Advisors and Experts," primarily from the American Medical Association’s House of Delegates, representing medical specialties, who attempt to influence an "Editorial Panel," composed of representatives from medical societies, insurance companies and the government. This

panel conducts secret meetings and decides on what healthcare services are paid for, and which are not.

Dr. Tony Puente, Past-President of APA, was one of the two outsiders allowed to participate in the CPT process. "Essentially," he said, "the CPT tries to divvy it up in a way that is theoretically and empirically, and diplomatically and politically, correct." Participants must sign a strict AMA (American Medical Association) confidentiality agreement and declare, "I will not disclose, distribute or publish confidential information to any party in any manner whatsoever."

To decide on reimbursement, 28 voting members on RUC, representing medicine specialties such as anesthesiology, cardiology, neurology, neurosurgery, obstetrics, oncology, psychiatry, and so on, meet and decide how much each service is worth, and how much is to be paid.

The CPT system is dominated by organized medicine. "Every seat at the table has a vested interest, mostly not supporting your proposed code," said Dr. Travis Thompson, professor, psychologist, and leader in the Association for Behavior Analysis International. He was speaking after it took him and colleagues three years to muscle through codes for the treatment of autism.

While the CPT approval is a first leg of a long journey, another element of this behind-the-scenes influence is the panel known as AMA/ Specialty Relative Value Scale Update Committee, or RUC. Since 1991 members of the RUC establish the value or price for the CPT codes. Somehow this is not considered price-fixing.

Control of the CPT and RUC have helped shaped health care toward high technology and high prices, less primary care, and no prevention.

A dramatic example of flawed decisions in the medical/pharma industrial complex is the opioid crisis. Twenty years after a marketing blitz aimed at convincing physicians that opioids were safe and effective, the over-prescribing of this heroine-type drug has catapulted overdose deaths to the highest rate in modern times.

Despite the flood of legal opioids into the society, the CDC reported no change in pain that would meaningfully drive the prescribing: "...there had not been an overall change in the amount of pain that Americans reported."

In contrast, the CDC did find that psychological and physical treatments for pain were beneficial ("CDC Guideline for Prescribing Opioids for Chronic Pain"). This despite the fact that these non-medical approaches are rarely integrated into treatment programs.

And, they were often the more appropriate treatment. "It is now widely accepted that pain is a biopsychosocial phenomenon," clinical health psychologist and Past-President of the Southern Pain Society, Dr. Geralyn Datz said, and that must be treated as such.

## Conclusion

Dramatic changes are needed in the structure and function of the healthcare institutions currently used for the state and the nation. Individuals will need to be treated for root causes, which will be more behavioral and psychological in nature than the current methods or models.

Louisiana may have the most to gain from prevention and innovations of any state in the nation. But there is a long way to go.

"A bright new future of understanding, preventing, and treating mental disorders awaits us," writes Bonnie Kaplan.

But just how long is that wait going to be?





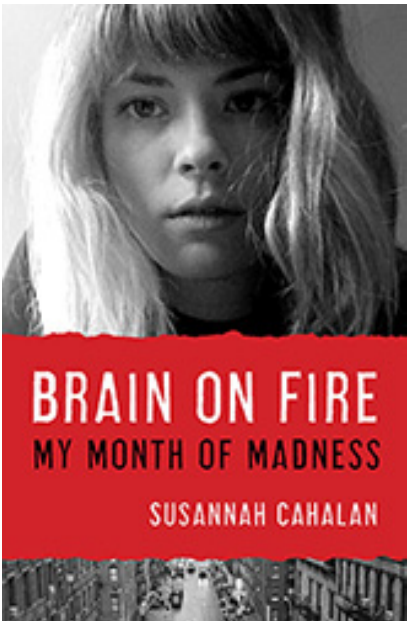
## The Psychology Times' BOOKSHELF

Classic Recommendations

**John Fanning, PhD**  
Neuropsychologist  
Past LPA President

### *Brain on Fire* by Susannah Cahalan

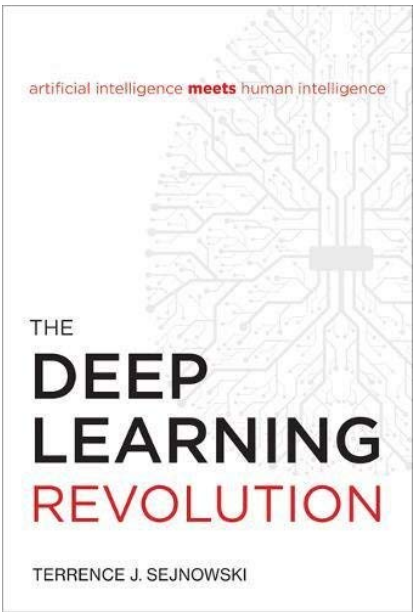
I'm currently reading *Brain on Fire*, by Susannah Cahalan. It's an autobiographical account of a very severe and frankly bizarre neurologic illness, written by a young woman who is a journalist for the New York Post. It's sharply written and very engaging. I'll take the liberty of saying that if the disease had killed her or permanently incapacitated her, she'd have needed a co-author, or at least a ghost writer. There is a deeply ironic aspect to her story, however, in that while she describes in detail the peculiar development and surreal phenomenology of her illness, she has very little memory of the period in which it was most severe, and consequently had to gather information from doctors, coworkers, family members, and medical records to describe what happened to her during that time. She was in the position of doing biographical research into her own history, one she herself cannot remember. □



**William McCown, PhD**  
Dept Head, ULM  
Distinguished Psychologist

### *The Deep Learning Revolution* by Terrence Sejnowski

From Amazon to our credit scores, Deep Learning is already influencing our lives. Very soon indeed, its methods will be used to drive our cars, select what we eat, compose what music we listen to, and even make medical decisions for us.



For Psychologists, as for many professionals, Deep Learning may well make much of what we do irrelevant, unless we change our practice model.

A great introduction to the topic is Professor Terrence Sejnowski's recent semi autobiography and history *The Deep Learning Revolution*.

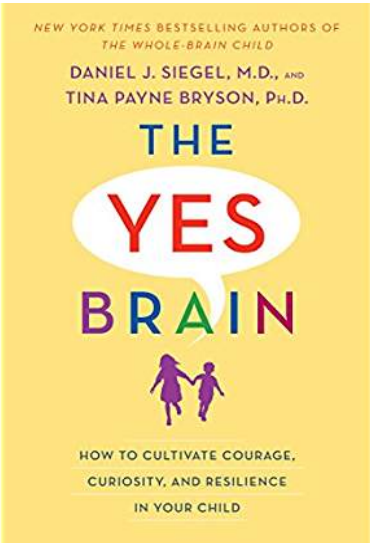
Sejnowski, the Francis Crick Professor at The Salk Institute in La Jolla, California, is a pioneer in the field of computational neuroscience. His *extraordinary* research in computer modeling of the brain has combined the elegance and rigor of cellular level precision with a systemic understanding of global brain functioning.

Reminiscent of Hans Eysenck almost three generations ago, his contributions are astonishing for their variety, breadth, and richness. Equally like Eysenck, his writing style is succinct and highly convincing, though without the polemics. He can almost effortlessly make complex topics understandable and Deep Learning is pretty darn esoteric!

If you are at all interested in what the world will be like in ten years and the person who made it possible, read this book. It will leave you somewhat satisfied but admittedly unsettled.

**Randall Lemoine, PhD**  
Psychologist, Private Practice  
Baton Rouge

### *The Yes Brain: How to Cultivate Courage, Curiosity, and Resilience in Your Child* by Daniel Siegel & Tina Bryson



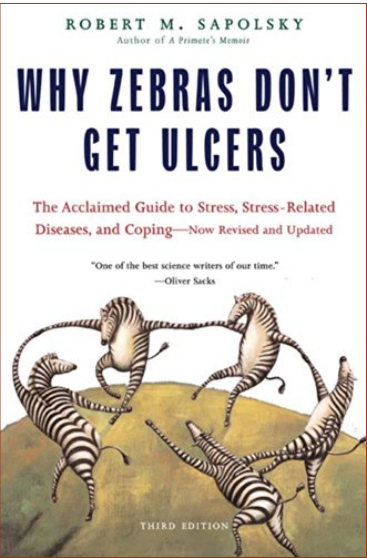
Drs. Siegel and Bryson have done it again! The Yes Brain is their latest illustration of the exciting applications of the science of “interpersonal neurobiology” to parenting.

And it is another rallying call for a paradigm shift in how parents discipline their children. Siegel's “interpersonal neurobiology” posits that the human brain is a highly social organ that is neurologically “wired” through everyday parent-child interactions from infancy to react/respond either positively (Yes!) or negatively (No!) in social situations. Unfortunately, traditional parenting practices have placed a heavy emphasis on No! Brain approaches, such as threats and/or external punishments and focusing mainly on extinguishing misbehavior. No! Brain approaches often stimulate anxiety, anger, resistance or passive submission rather than teaching the child self-discipline, which, after all, is the goal of discipline. In contrast, the Yes! Brain approach, based on our growing understanding of how core brain circuits (e.g., limbic system and prefrontal cortex) develop and integrate with repeated parent-child experiences, emphasizes “parenting from the inside out,” and views each disciplinary event is a “teachable moment” for “skill building” that promotes insight, self-regulation, empathy and resilience (the four chapters of the book). A core feature of the positive, Yes! Brain approach is to teach and empower children to operate from their internal zones of emotional regulation (aka underlying autonomic fight-flight-freeze system and pre-frontal executive system). Children are taught strategies that help them to expand and to remain in their green zone (flexible, adaptive), and how to pause, self-calm, and to choose behaviors when they get into their red zone (angry, rigid) using instructional parent-child dialogues rather than “carrots and sticks.” This new book will surely be inspiring reading for both parents and professionals working with parents/children. Do I highly recommend it for holiday reading? Well, that’s a No! brainer. Yes!

**Bridget Sonnier-Hillis, PhD**  
Clinical Health Psychology  
Past LPA Director

### *Why Zebras Don't Get Ulcers* by Robert Sapolsky

*Why Zebras Don't Get Ulcers*, by Robert Sapolsky, now in its third edition, is an excellent book for those interested in learning more about the field of health psychology and how the biopsychosocial model explains the relationship between the mind and body.



Although most people believe stress is unhealthy for the body, stress isn't necessarily harmful for us. The human brain is actually well-developed for coping with and responding to acute, short-term stressors that have a clear beginning and end, such as situations that are threatening or dangerous. However, the nature of today's stressors in the modern world is such that there often is no clear beginning, or at least there is no clear end, such as stressors that are more chronic. Dealing with on-going financial issues, relationship problems, conflicts at work, unemployment, illness, and poverty are examples of chronic stress that the brain is not well developed to respond to, and prolonged stress is what is harmful to most of the organ systems in the body. Even childhood traumatic experiences put individuals at risk for health problems in adulthood.

This book offers a concise and practical illustration of how, really, there is no separating the mind from the body. Enjoy!



# Christmas

## The Psychology

### Times'

## BOOKSHELF

Classic Recommendations

**Tiffany Jennings, PsyD**  
Neuropsychologist, Shreveport  
Chair, Rural Health, LPA

### *Chicken Soup for the Soul: The Joy of Christmas*

by Amy Newmark

To say that the year 2020 was a little wild is kind of like saying the sky is a little blue. Life didn't get thrown sideways. The fabric of society, in almost every aspect world wide, has had to adjust to a new normal. And frankly, we've

all had our struggles with this adjustment. Work, family, friends, traditions, have all been impacted in some way. Many of us have experienced a loss, either directly or indirectly.

People look for ways to settle their mind. Yes, I know some folks head for the higher octane beverages or food, but I'm trying to keep this G rated. When I think of ways to soothe the soul, I think of a good cup of tea, tasty treat (hey I'm Southern and food is a wonderful part of our culture), crafts, and of course, a good book.

Chicken Soup for the Soul: The Joy of Christmas: 101 Holiday Tales of Inspiration, Love and Wonder, edited by Amy Newmark is a lovely collection of stories about the holidays.

These stories cover a multitude of holiday topics, including gifts, miracles, family, memories, traditions and decorating. For me, the decorating stories and those from a child's perspective are the most salient. It brings to mind some of the traditions my husband and I are sharing with our young child, and her joy and enthusiasm at Christmas are infectious.

The story of the Barbie Christmas Tree had me thinking of my little one and how fast the dolls would come off the tree. The story of Perfectly Imperfect particularly struck me as the author describes her mother-in-law's NOEL decoration that was missing a letter. The point of the short little story really struck home this season. Here, the author speaks of how an imperfect holiday set resembles a family. How family is not perfect, but it is still family. Life isn't perfect, but people can be resilient and go on.

**ValaRay Irvin, PhD**  
Director of Counseling Center  
Southern University, Baton Rouge  
Past LPA Secretary

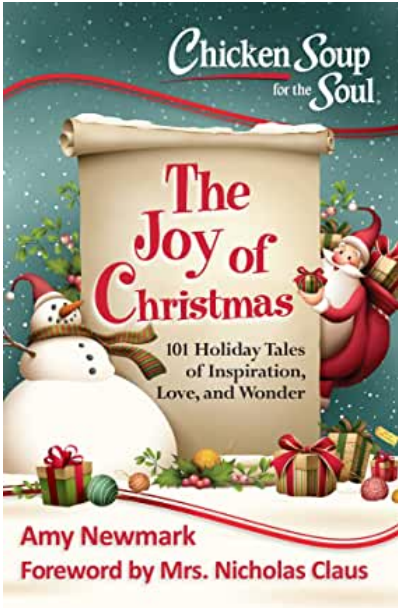
### *A Simple Act of Gratitude*

by John Kralik

"A Simple Act of Gratitude," emphasized that when one focuses on giving thanks, even for the 'smallest' things, over time positive changes

will occur internally, which then makes for external transformation of how you see your life, and the world around you.

Another one I had forgotten is "Acts of Faith," by Eboo Patel. It's the story of an American Muslim, his struggles to integrate both his home culture and beliefs, with being raised in the U.S. There's a lot on tolerance, faith, and trying to live one's truth in a pluralistic society.



**Randee Booksh, PhD**  
Neuropsychologist, Private Practice  
Metairie

### *How to Be an Artist*

by Jerry Saltz

This delightful small coffee table book contains 63 bite size pieces of advice from Saltz organized into six steps to becoming an artist. He includes artistic exercises for some of his pointers. While the exercises are mainly for visual artists, his concepts are for artists of all sorts and apply to anyone who relies

on creativity for their craft, regardless of the medium or discipline. Saltz reflects on his own story and draws inspiration from musicians, scientists, and writers, as well as visual artists.

Photographs of artists, their works, and anecdotes from their lives effectively illustrate his points. The tone is encouraging and motivating. The advice is a mix of practical suggestions, timeless truths, and sage advice. It's one of those books you can randomly open to any page for an inspirational quote or idea. Tip #60 You Must Prize Radical Vulnerability. Saltz defines this as "...following your work into the darkest or most dangerous corners of your psyche, revealing things about yourself that you don't want to reveal but that your work requires you to, and allowing yourself the potential of disappointment."

**Courtland Chaney, PhD**  
Industrial-Organizational Psychologist  
Human Resource Management Associates,  
Retired LSU faculty member

### *Getting to Yes: Negotiating Agreement without Giving In*

by Roger Fisher & William Ury

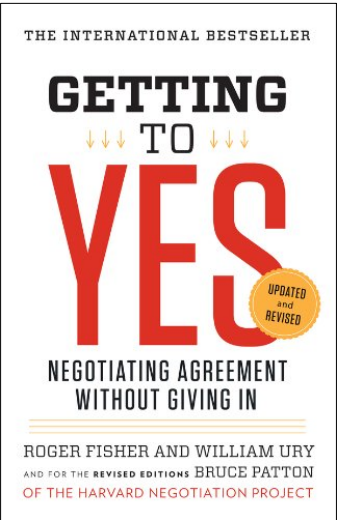
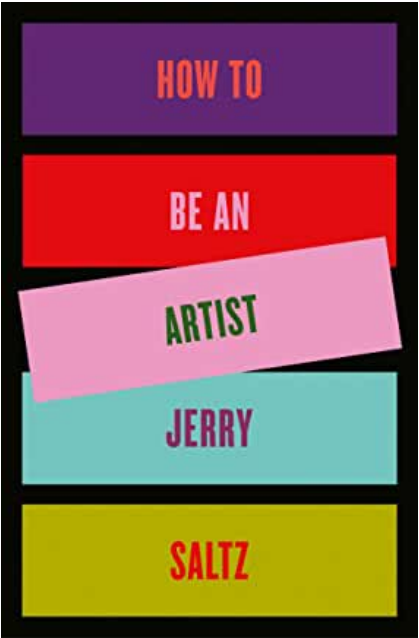
My Christmas stocking stuffer would be *Getting to Yes* by Roger Fisher and William Ury with Bruce Patton as editor, Penguin Books, second edition, 1991.

*Getting to Yes – Negotiating Agreement without Giving In* deserves recognition as a classic.

Millions of copies in at least 18 languages, this national best seller is a brief, straightforward approach to mutually acceptable agreements that meet the interest of both (dare I say all) parties when interests are not identical.

The text begins by acknowledging that negotiating agreements and coping with the inevitable inherent in negotiations is simply a part of life. As such, we can all benefit from understating the various approaches to and elements of negotiation as well as how to manage the stages of what the authors call "principled" negotiation. Principled negotiators attempt to reach decisions based on the merits of the situation, allowing one to obtain what you are entitled to while treating others in a fair and decent manner. It is an all-purpose strategy for win-win negotiations.

After emphasizing the importance of separating the "people" involved in the negotiations from the "interests" of those individuals, the authors provide methodologies for focusing on interests, inventing alternative solutions, using objective criteria to evaluate options, and understanding how to leverage your best alternative to a negotiated agreement.





# Stress Solutions

by Susan Andrews, PhD

## APA Speaks Out About Stress

Nearly every year in recent history, the APA has taken the “Stress-Temperature” of this country on at least an annual basis. The most recent article is called Stress in America 2023/A nation recovering from collective trauma. However, even though the title of the article is about a nation recovering from the collective trauma of Covid-19, the news is not good, and recovery is not the topic of the paper. No one can argue that Covid-19 was a traumatic time and it is mostly over. But the stress of so many other crises and problems is building. The APA article points out how much higher the percentage of stress-related chronic illnesses are being seen today. To add to the growing concern about professional stress, the Louisiana Psychological Association Fall/Winter Workshop hosted Dr. Leisl Bryant, a Professional Consultant with The Trust, who spent almost the last hour of her Ethics, Risk Management and Vulnerabilities: Yours, Mine, and Ours presentation talking about stress and the need to manage it in order to remain effective therapists.

I must admit that I was getting tired of writing about stress and stress management every month and I figured the readers are getting tired of it too. However, my thoughts as I read the APA paper and then listened to Dr. Bryant were different. I realized how important it is for us all to take stress management more seriously. In other words, stop putting it off and start doing something on a regular scheduled basis. That was Dr. Bryant’s basic message.

The message of the APA article was full of data about increased and increasing numbers of people who are reporting chronic stress-related illness but denying that they are all that stressed. It is as if people do not want to admit that they are stressed.

According to the APA, adults between the ages of 35 and 44 are showing an increase in chronic illness from 48% in 2019 to 58% in 2023. The article made an important point that we all know but put it in everyday language so that it is more digestible: “Long-term stress puts the body on high alert and as stress accumulates, leads to inflammation, wearing on the immune system, and increasing the risks of a host of ailments, including digestive issues, heart disease, weight gain, and stroke.”



Adobe

The APA’s yearly survey concluded that many people (81%) felt that their physical health was good even when they also reported (66%) being diagnosed with a chronic illness (high blood pressure (28%), high cholesterol (24%), or arthritis (17%). That is as close to being a river in Egypt as you can get. They also reported an anxiety disorder (24%) or depression (23%). At the same time, the data indicated that people are playing down stress. The reasons given for not seeking treatment were: therapy doesn’t work (40%), lack of time (39%), or lack of insurance (37%). While we cannot do much about insurance costs and lack of coverage, but our field needs to get busy to change the beliefs that therapy doesn’t work and that people do not have enough time to go to therapy. We need more information into the public.

Then there is the Elephant in the room: Stress Management and how many of us really do it. There are so many ways to reduce stress. Each of us needs to spend a good half hour thinking about all the things we do to reduce stress on a DAILY basis. Make a list and really try to put it into a regular schedule. You can set your iPhone or smart watch to remind you when it is time to take a break.

I went back over the columns posted in the *Psychology Times* since I started writing them around 2014 and came up with so many possible ways we can pay attention to how stressed we feel at the end of the day and what we can do about it. But, as the Maharishi Mahesh Yogi, the originator of Transcendental Meditation™ once said, “If you can’t do anything else, Breathe!” Breathing is automatic. Maharishi was not talking about mindless breathing; he was talking about breathing with intention and focus, with mindfulness.

Maybe spend 2-3 minutes every few hours to Pause, and take some slow, deep inhalations.



Dr. Susan Andrews is a Clinical Neuropsychologist, an award-winning writer/author (her book Stress Solutions for Pregnant Moms, published in 2013, has been translated into Chinese,) and 2016 Distinguished Psychologist of the Louisiana Psychological Association.



Best of

# A Shrink at the Flicks

## Bah Humbug

by Alvin G. Burstein, PhD

The approach of Christmas stirs up memories—and a wish. Some of the memories reflect my confusions about the holidays as a child.

Both my parents were Russian immigrants. Mother was an observant Jew. Although my father had spiritual interests reflected in his Masonic studies, he did not follow Jewish religious practices. He sold Christmas trees in the Mom and Pop grocery he ran with my mother. More-over, he donated trees to our public school classroom, and erected one in our home--no doubt provoking Russian language conversations with his wife indecipherable by us children.

And I recall a second grade experience of being excused from participating in singing a Christmas carol with the rest of my classmates. I wanted to sing, too, but I understood the exclusion to be an expression of our teacher's sensitivity to religious difference. That motivated me to hide both my disappointment my curiosity about the meaning of the mysterious term “ronyon virgin.”

Those memories, and the imbedded feelings, may have contributed to the wish to re-read Dickens’ story, *A Christmas Carol*, and my viewing a couple of film versions of that tale.

The 1830 story is a classic, demonstrated by its having spawned at least eight film versions and by the tale and its reincarnations continuing to shape our views and feelings about the holiday. Of the many film adaptations, I looked at two: the first a re-mastered 1935 version starring Alistair Sim, the second a 2009 3-D Walt Disney/ImageMovers’ effort.

The power of the tale lies in its being a story of a redemption, one that depends on the recapturing of Scrooge’s forgotten past, the curative effect of which is at the heart of psychodynamic therapies. The pathogenic node of Scrooge’s forgotten past is the terror of parental rejection, a potential theme that accounts for the popularity of the classic tales of abandonment and adoption from Bambi and Orphan Annie to Harry Potter.

Dr. Alvin Burstein

Burstein—a psychologist and psychoanalyst, 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 was also a member of Inklings, a Mandeville critique group that meets weekly to review its members’ imaginative writings. Burstein published flash fiction and autobiographical pieces in e-zines; *The Owl*, his first novelette, is available at Amazon. He was, in addition to being a movie fan, a committed Francophile, unsurprisingly a lover of fine cheese and wine, and an unrepentant cruciverbalist.



courtesy photo



Adobe

The Dickens story starkly contrasts happy families, the Fezziwigs, that of Scrooge’s nephew and the Cratchits, with the lonely Scrooge, abandoned as a school child. That theme is deepened by the climactic adoption of a resurrected Tiny Tim by the healed Scrooge.

Though his story antedates Freudian theories of psychosexual orality, the link between being loved and being fed is manifested in Dickens’ emphasis on opulent feasts for the fortunate and deprivation and hunger for the wretched, and his depiction of Scrooge as having two selves, a mean, calculating, unloving self, and a disowned emotional one. That in his redemption the second replaces the first rather than being integrated with it may be a flaw, psycho-dynamically speaking. That might account for a manic element in Scrooge’s “recovery:” his ebullience, his hyper-activity and his showering of money on others. Here is an illustrative excerpt from Dickens:

*“I don’t know what to do!” cried Scrooge, laughing and crying in the same breath and making a perfect Laocöon of himself with his stocking. “I am as light as a feather, I am as happy as and angel, I am as merry as a school-boy. I am as giddy as a drunken man. A merry Christmas everybody. A happy New Year to all the world. Hallo here! Whoops! Hallo!”*

It may be over-pathologizing to raise a question about the durability of such an excess. On the other hand, it may be Dickens’ contribution to our contemporary demand for unmitigated happiness during this holiday, a demand that opens the door to disappointment and holiday depression.

A final comment specific to the DVDs: Both are very close to the Dickens text in the sense of using much of the dialogue from the original. The Walt Disney version is stunning in its visual effects, actually overindulging by stressing the terror of falling and eeriness, thus distracting from the more psychological issue of deprivation. It begins with a prequel in which Scrooge takes the coins from the eyes of Marley’s corpse, sniggering “Tuppence,” a scene that highlights his avarice in way that many children would find upsetting. Scrooge’s animated cartoon presentation, scrawny and desiccated, underlines his emotional starvation but lends him and the other Disney characters a one dimensional quality.

Paradoxically, Sims’ 1935 black and white Scrooge, though more dated, is more real, making it easier to empathize with his pain. In fact, this version elaborates Scrooge’s abandonment by attributing it to his mother’s having died in childbirth. Because Sims’ Scrooge is more real, this version is the one I prefer.



# 10 Years Ago! What the Times was reporting on in December 2013

*Some wrinkles smoothed with LPA*

## Psychology Board Moves Toward Specialist License

In what some consider a historic move, the Louisiana State Board of Examiners of Psychologists is advancing plans to create an optional license for school specialists under the state psychology board, creating a multi-level license for the first time.

While still in development, Executive Director Kelly Parker told the *Times*, “They [the Board] did vote to accept the Task Force report and proceed with meeting other interested and important parties.” If these plans go forward, the credential, to be termed the Licensed Specialist in School Psychology, would open up opportunities for school psychology specialists in private and charter schools that have previously been closed to them.

TEN  
YEARS  
AGO



Members of the Louisiana School Psychological Association look over agendas for the conference, held last month in Lafayette. L to R: Candice Dozier, Annie Holmes, Nancy Alleman, and E. Francoise Parr, current President of the association.

## Dr. McCown to Help Lead College of Business & Social Sciences at ULM

Dr. Bill McCown will help lead the newly formed College of Business and Social Sciences at the University of Louisiana Monroe (ULM) as Associate Dean. McCown has served as Interim Director of the Graduate School and as Professor of Psychology.

ULM recently announced plans to consolidate its five colleges into three. In a press release last month, the university officials noted, “The reorganization will see the university’s five colleges consolidated into three: the College of Arts, Education and Sciences; the College of Health and Pharmaceutical Sciences; and the College of Business and Social Sciences.

*Lifetime Achievement*

## LGPS Honors Dr. Sue Jensen



The Louisiana Group Psychotherapy Society has honored Baton Rouge psychologist, Dr. Susanne Jensen, with their Lifetime Achievement Award, presented at the November 2 Fall Institute of the Society. [...] Jensen has been a key figure in the psychology and psychotherapy community, providing training for hundreds of psychotherapists from psychology, psychiatry, social work, and counseling [...]

TEN  
YEARS  
AGO

## Psych Bd Reviews Emeritus Status

The psychology board discussed possible changes to the Emeritus license for psychologists, at their Long-Range Planning meeting [...]the board members discussed the possibility of requiring an emeritus licensee to be fully retired before being able to declare the emeritus status. Currently, some emeritus psychologists work part-time. The report also noted that board members discussed the possibility of requiring all emeritus licensees who work part-time to obtain continuing education credits.

## Will the Real LAMP Please Stand Up?

Was a PAC requiring a contribution in order for medical psychologists to fulfill requirements of Act 251, which had been written by that PAC? [...]have any medical psychologists been hindered in their efforts to obtain the required training? This appeared to be the case, after several undisclosed sources reported problems with LAMP and their requirements to the *Times*.

TEN  
YEARS  
AGO

### Christmas Section

## 'Tis the Season for STRESS

The *Times* talked with six of our local experts about stress and topics of neuropsychology (Dr. Susan Andrews), meditation (Dr. John Pickering), sleep (Dr. Denise Sharon), acupuncture (Dr. David Thomason), and relationships (Drs. Molly and David Govener) to give us some ideas how to cope with the downside of the season.

## We Remember Dr. Robert "Bob" Davis

Robert Douglas "Bob" Davis, born January 5, 1961, passed away on Thursday, October 31, 2013, at the age of 52.

Dr. Bob Davis is remembered by his colleagues as a remarkably competent, compassionate person with unfaltering support for others, and the ability to generously share his endearing wit and humor with his friends and associates.

## Smiles to Tears and Back Again

by Dr. Joe McGahan

Editors note: Dr. McGahan graciously offered to share a personal Christmas story with Times readers. He is Professor of Social Psychology and Co-Director of The Social Science Research Lab at the University of Louisiana at Monroe.]

## Psychology Gumbo

“The Pursuit of Happiness: Time, Money, and Social Connection” C. Mogilner, – in *Psychological Science*, 2010.

COMMENT: Dr. Gilda Reed, Psychology Department, University of New Orleans, Princeton Review’s Best Professor

## LSU Psychology Alumni Reunion Is Taking Shape

with Courtland Chaney, PhD

Richard Maples and Dr. Courtland Chaney have been working on plans for a reunion of Louisiana State University Psychology Department graduate students, particularly of those who were graduate students in the mid-1970s and early 1980s.

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