The Psychology Times

Independent Voice of Psychology

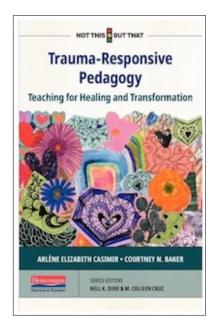
An eNewspaper about Psychology, Psychologists & the Psychology Community

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Researchers Present at Assn of Psychological **Science Convention**

Psychological scientists from Louisiana joined more than 2,000 researchers from around the world who gathered in Washington D.C., for the 2023 APS Annual Convention of Psychological Science to share psychological research. This year's event was held from May 25 to 28.

Louisiana State University

Raymond Tucker, PhD, collaborated on the "Ecological Momentary Assessment (EMA) facilitates the study of complex, time-varying phenomena in daily life, such as suicidal ideation." According to the

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Dr. Newman Wins Sweetgrass Award

Division 35 of the American Psychological Association (APA) has named Dr. Denise Newman, PhD, recipient of the 2023 Sweetgrass Award. The award honors the Indigenous psychology professional who epitomizes values and virtues through the dedication of outstanding professionalism in service. For Native peoples,

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Dr. Nemeth Helps Ukraine Survivors

Kyiv's community psychological support center is partnering with international charity organizations to "restore and rehabilitate war-torn minds" in Ukraine, reported Kyiv Post on April 25. Among those assisting is Dr. Darlyne Nemeth, Clinical, Medical & Neuropsychologist, Founder of The



Dr. Jesse Lambert (left) testified about amendments to HB 69.

Dyslexia Screening Bill Goes Forward with Amendments

HB 69 by Rep. Marino revises laws relative to screening for dyslexia. The measure was voted out of the Senate Education Committee favorably after being amended by Sen. Jackson and testimony from Dr. Jesse Lambert of the Louisiana Psychological Association. The amendments changed the word "diagnosis" to "identification" and the word "psychometric" to "academic."

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Effort to Ban Medical Procedures for **Trans Minors Fails in Committee**

In an exciting tie-breaker vote, the Senate Health and Welfare Committee tabled a bill which would have prohibited surgical and hormonal sex change procedures for miners. The committee chair, Senator Fred Mills, broke the tie and voted with the opposition to defer the bill.

Authored by Representative Michael Firment, the measure had passed the House, 71 to 24, after being heavily amended and substituted in committee. The Senate Committee vote was a tie at 4 to 4, splitting down party lines. The chair, a Republican, Senator Mills acknowledged his vote would break the tie.

He said, "It comes down to me. I'm going to make a statement then. I guess I've always in my heart of hearts, I believe that a decision should be made by a patient and a physician. I believe

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Dr. Baker in Bookshelf -Page 12–13

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Feature: "10 Years Ago" – Page 15



We Remember Dr. John Bolter

Dr. John F. Bolter died May 10, 2023, at the age of 72. He suffered from Alzheimer's disease.

A respected Clinical Neuropsychologist and Medical Psychologist, Dr. Bolter served as the Director of the Department of Clinical Neuropsychology at The NeuroMedical Center in Baton Rouge. He was one of the leaders of the movement to provide specially trained psychologists with "prescriptive authority" also called RxP. In 2004, he helped accomplish what many believed was an almost

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Editorial Page – Opinions

Putting the Logical Back in Psychological

by J. Nelson

It was quite exciting when the bill to prohibit surgery and puberty blockers for transgender kids resulted in a photo finish. The tie vote had to be broken by the chair, Senator Mills.

From my Libertarian viewpoint, this was probably the best outcome--no new laws, no new bans, individual freedoms were preserved.

Another good thing happened when Dr. Mixon summed it up, that what it all boiled down to was simply trust or distrust in the doctors.

While any bill that is in a tiebreaker mode should not go forward, Senator Mills' default to, "I trust the doctors in this state," seems to me a fairly odd notion. My stance on things as important as sterilization of minors boils down to "prove it."

Surely, it has not escaped our attention, just how flawed the medical-pharmaceutical industrial complex really is.

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Cartoon by Springer courtesy of the Press Assn.

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–unintended acts, omissions, commissions, failures to achieve the desired outcomes— 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 already know this issue from all types of examples. When the specialists go on vacation the mortality drops. For the one out of 1,000 women saved by mammography, two to 10 healthy women will be treated needlessly and 250 to 500 will get a false alarm and half biopsied needlessly. A third of FDA approved drugs have been found to later have safety issues.

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.

Physicians have been shown to suffer from statistical illiteracy. An example is that almost 80% don't understand the correct probability of illness, given a positive mammogram test.

Psychologists could've been helpful as true facilitators in the legislative process regarding HB 648. We are, at least in theory, statistically literate. But organized psychology has already entered at the lower, political level of the system, rather than transcend the Left vs. Right debates, for the benefit of the whole.

From a group problem-solving perspective, the legislators were not helped to process the contradictory scientific information in hopes of a consensus. There was no way that any in-depth analysis could be discussed, such as predictive validity, false positives, risk of treatment, etc. Nor was there any way to actually separate out the influences of political bias, financial bias, or elements such as the illusion of certainty bias.

The debate did more to show that we should not trust the doctors, than that we should. I'll stick with being a skeptic, a critic, and someone only persuaded by airtight logic.

Tom Stigall, PhD, Adobe Stock Photos

Copy editor: Susan Brown

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Because as Marcus Aurelius wrote, "The object of life is not to be on the side of the majority, but to escape finding oneself in the ranks of the insane."

[Julie Nelson is a licensed psychologist, journalist, 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, —she welcomes feedback.]

Corrections & Clarifications

No corrections were received for last month's issue. Please send your corrections to: <u>psychologytimes@drjulienelson.com</u>

Dyslexia Screening Bill Goes Forward with Amendments continued

The measure is pending Legislative Bureau as of May 31.

The measure Was voted out of the Education Committee of the House favorably at 11 to 0. It was voted on by the House on April 25 and passed 105 to 0.

According to the digest, the Committee Amendments Proposed by Senate Committee on Education to the engrossed bill are as follows:

 Require the state Department of Education to select a dyslexia screener that meets certain criteria and to provide the screener, at no cost, to each public school.
Change the word "diagnosis" to "identification".

3. Change the word "psychometric" to "academic".

4. Require the core assessment for the identification of dyslexia to include a brief standardized screening tool of intellectual ability.

According to the current digest, the proposed law requires the state Department of Education to select a dyslexia screener with an area under the curve of 0.80 or above and provide the screener, at no cost, to each public school. Further requires the dyslexia screener to be administered to each student by a classroom teacher in the second half of kindergarten or at any time it is requested by a teacher or a parent or quardian. Prohibits the screener from being a progress monitoring tool and requires that it be developed solely for dyslexia; be evidence-based with proven, published academic validity; and be used for the purpose of determining whether a student is atrisk for dyslexia.

Regarding Identification, the digest says that the proposed law, relative to diagnosis, provides the following: (1) Provides that if screening results indicate that a student is at risk for dyslexia, the school, in order to determine whether he has dyslexia, shall determine through history, observation, and academic assessment if there are unexpected difficulties in reading and associated linguistic problems at the level of phonological processing that are unrelated to the student's intelligence, age, and grade level. (2) Provides that the core assessment for the identification of dyslexia shall not be based on a single test score or specific number of characteristics and shall include the following: (a) Tests of language, particularly phonemic assessment, real words and pseudowords, oral reading fluency, and a brief standardized screening tool of intellectual ability. (b) An academic performance review. (c) A parental interview.

La Department Health Launches Awareness Campaign for 988 Suicide and Crisis Lifeline

The Louisiana Department of Health is launching a campaign to raise awareness of the 988 Suicide and Crisis Lifeline.

According to officials, the Lifeline is available 24/7 to anyone in mental health distress or who may be worried about a loved one who may need crisis support. 988 crisis counselors are trained to help reduce the intensity of a situation for the person seeking help and connect them to additional local resources, as needed, to support their wellbeing.

Suicide is the 11th leading cause of death in the U.S. and the third leading cause of death for individuals ages 15-24. In 2021, 48,183 Americans died by suicide, including 689 in Louisiana. One death by suicide occurs every 11 minutes, wrote officials.

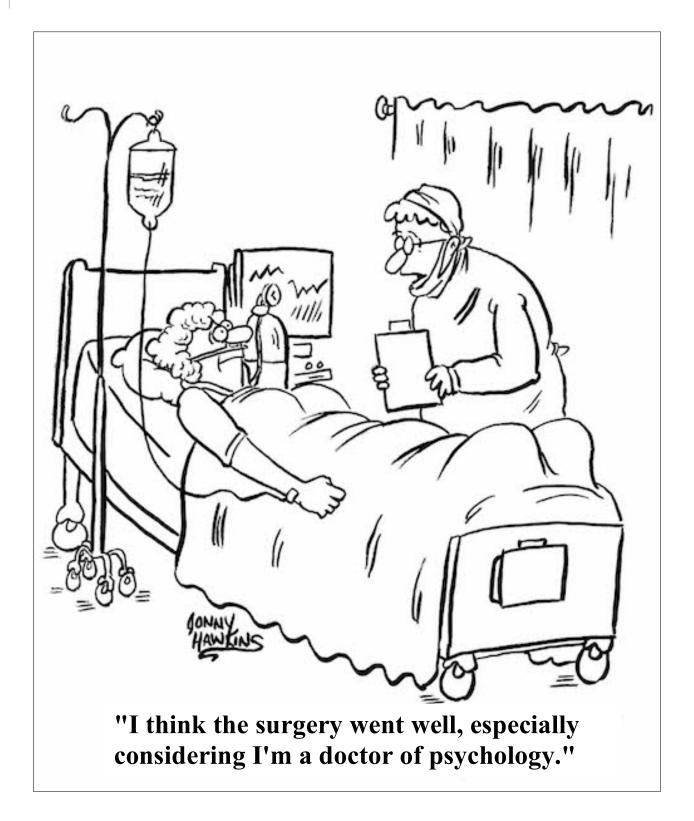
"Mental Health Awareness Month is an opportunity for us to recommit to raising awareness about the importance of mental health in the lives of all Louisianans," said Governor John Bel Edwards. "The 988 Suicide and Crisis Lifeline is available to anyone in mental health distress. If you're depressed, going through a hard time, thinking about suicide or just need to talk, 988 is for you. 988 is for all of us." As part of the 988 awareness campaign, LDH is launching an online 988 Dashboard providing transparency on key metrics of crisis call data from Louisiana's two 988 crisis centers.

According to the dashboard, among Louisiana callers self-reporting their information to 988:

59.4% are White and about 34.8% are Black. 60.6% are female and 38.9% are male. 32.2% are ages 25-40 and 18.9% are ages 18-24 and 18.1% are ages 41-59. The most common referrals were for mental health, housing and financial assistance. Orleans, East Baton Rouge and Jefferson parishes had the highest volume of calls.

The dashboard, which will be updated monthly, contains metrics on accessibility, referral source, reason for the call, and some outcomes, but they do not contain historical summaries. Demographic data is available for only about 20% of calls, as it is not always possible to collect data during a crisis call.

Calls to 988 are confidential and any selfreported data is aggregated before sharing with the public.



Effort to Ban Medical Procedures for Trans Minors Fails, continued

in the physicians in Louisiana. I believe the people that are licensed by the Board of Medical Examiners are well regulated. I believe in the scope of practice. I believe in the standard of care." [...] "So because of that, I do believe in opposition, and I believe in the right of a family to choose what's best for them. I vote yes."

During the hearing, Clinical psychologist, Dr. Clifton Mixon, was among those who testified in opposition to HB 648.

"I work in a gender clinic that prescribes hormone therapies to youth," he said. "At the heart of this debate is mistrust in our medical and mental health providers to provide ethical, individualized care without prejudice and based on best practices and established research," Mixon said. "I'm here to address these concerns in opposition to a mean-spirited bill that defies science and humanity.

"The evidence is clear—gender affirming medical interventions are safe and effective treatment for gender dysphoria and resulting mental health problems for many trans youth. Unfortunately, you've been exposed to false information that misrepresents the established research and practice guidelines on gender health care medicine. I am here with actual studies that can help you understand the actual facts. I have a doctoral degree with training in how to conduct and interpret research," he said.

"These medical interventions reduce risk for suicide and improve overall mental health functioning and quality of life. We are not providing access to youth for whom it is not appropriate."

He noted the success rate is high; high rates of treatment satisfaction and low rates of regret less than 1%. And he pointed out 20 position statements for major medical and mental health organizations across the country.

He explained that when he and his team suggest hormone therapy to these children, it is because they have exhausted all other options and when this happens they get better, he said.

"I'm here to tell you we know what we are doing. We are following established research, Best practice guidelines and our ethical codes and we are doing so with an awareness of our role and supporting safe exploration and decision-making. We are doing so with the best interest of every child and family member."

Psychologist, Dr. Jesse Lambert, also testified in opposition, representing the Louisiana Psychological Association.

"A lot of research has been discussed today scientifically sound research that indicates that this is a true phenomena and that individuals who are trans have suffered greatly.

"Citing from the American Psychological Association, we have data that indicates that individuals who are trans experience more victimization, be that bullying, be that acts of violence occurring in school. They feel more ostracized, more isolated and this generalizes into relationships including close family relationships.

"I echo the data that indicates the greater likelihood of psychological morbidity including self mutilation, suicide and also note research again endorsed by the American Psychological Association that shows greater degrees of satisfaction and resolution of these issues and that this isn't immediately about going to a biological treatment modality."



Dr. Clifton Mixson (seated at the desk, center) testified in opposition to HB 648.

waiting as opposed to the use of dangerous and experimental drugs and invasive and irreversible surgeries," he said.

"We know that for 85% of the kids experiencing gender dysphoria, the confusion will resolve itself with time in counseling. We also know that despite claims to the contrary rates of suicides are not decreased and health outcomes are not improved with so-called gender affirming care. Where children are self diagnosing, decisions can lead to permanent damage including sterilization and loss of sexual function."

Dr, Quenton Vanmeter, a pediatric endocrinologist from Atlanta, Georgia, cited evidence from European countries that suggests that there is no benefit in transgender surgery or hormonal treatment and that the suicide rate is not impacted.

Dr. Evelyn Griffin from Baton Rouge testified as a certified OB/GYN that puberty blockers are not approved for adolescents and are dangerous.

The clashing world views of the individuals supporting and those opposing the bill included both sides claiming that they had the more valid research and that the other side's research was flawed. Sen. Mills asked why so many differences in the evidence.

Dr. Stephen Félix, a pediatrician, said, "The problem with the studies that the AEP reports and others, they do not have significant randomized control trials. They have small sample sizes, they have poor follow up, they have a lot of people lost to follow up, they have individuals who they have a very short period of time that they follow them. That's why," he said.

"The studies that are coming out of Sweden, Finland or long-term studies where they looked extensively and they said, 'wait, this is all wrong.' The quality of evidence that supports this transition therapy is poor. The level of evidence that we're presenting is strong."

He explained that a model of triage issues with different intensities and that practitioners don't automatically jump to biological modalities.

"If this bill should pass, psychologist would not be able to take part in a team based approach, involving endocrinologists, psychiatrists, pediatricians and contribute to an individual's care from a holistic standpoint."

Speaking in favor of his measure, Rep. Firment said, "Perhaps the most compelling scientific evidence to consider today is the fact that several progressive European nations who pioneered chemical and surgical sex change procedures like England, Sweden, and Finland have completely reversed course on this issue and they are now recommending counseling and watchful Sen. Mills said that he just needed them to understand that there are a lot of organizations that have the other side.

Dr. Griffin said, "Policies are created by organizations, a small group of individuals in organizations. That is then broadcast out and physicians like ourselves, in the trenches, [...] It does become increasingly difficult to practice medicine when you're told by your employer that these are the benchmarks that you have to check off. So that's actually the reality of what's happening nowadays and that's why you see a contradiction and what is perhaps shown in main stream media or by organizations and why you see front line doctors like ourselves saying something different."

During the two-hour hearing, some degenerated into mudslinging. Dr. Mixon remarked that Dr. Vanmeter's views had been compared to a hollow chocolate Easter Bunny, and Rep. Firment returned that Dr. Mixson was a "radical activist who works for Ochsner's Hospital."

The hearing is available on the Senate archives.

Bill to Improve Mental Health for Incarcerated Passes House 94 to 0

Rep. Selders is proposing in House Bill 55 to improve treatment of incarcerated individuals with mental health needs, referred to as "The Mental Healing Justice for Incarcerated People Act." The measure passed the House and was reported favorably out of the Senate Committee. It is pending Senate Floor action.

The proposed law states that legislative intent is access to high-quality mental health services, regardless of the setting, and that the state wholly supports efforts to assist incarcerated individuals suffering from severe and persistent mental illnesses, including post-incarceration syndromes, in their efforts to navigate incarceration and reentry into society.

HB 55 amends present law to make the establishment of resources and programs mandatory. The proposed law provides that the qualified mental health persons within the multi-disciplinary service team shall establish a training program to be conducted annually.

Rep. Marcelle's HB 353 Set for Senate Education Committee

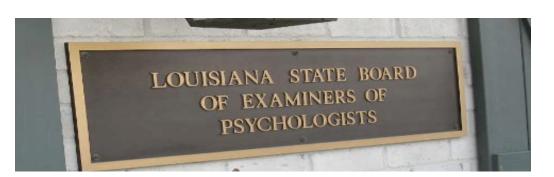
HB 353 by Rep. Marcelle passed the House, 93 to 6 and is scheduled for the Senate Ed Committee. It provides relative to student behavior, discipline, and behavioral and mental health and is pending in the House Education Committee.

The proposed law adds that a student may be absent for up to three days in any school year related to the student's mental or behavioral health, that such absences shall not require a certification in writing in order to be excused, that the child may make up missed school work, and that the child shall be referred to school support personnel following the second day of absence. Proposed law requires DOE to develop and administer a pilot program for the purpose of implementing ACEs screening, to select three school systems to participate in the program, and consult with experts in the fields of mental health, behavioral health, and trauma-informed restorative services in developing and administering the program.

HB 466 Passes House, Prohibits Certain Discussion, Instruction Regarding Sexual Identity

HB 466 by Rep. Horton provides relative to instruction on and discussion of sexual orientation and gender identity with certain public school students. The measure passed the House 67 to 28, and is set to be heard in the Education Committee on 6/1.

Proposed law prohibits a public school teacher, employee, or other presenter at a school, in grades kindergarten through 12, from (1) Incorporating into classroom instruction or discussion topics of sexual orientation or gender identity in a manner that



From the Minutes

Selected Items from Jan '23 Minutes of the Louisiana State Board of Examiners of Psychologists (LSBEP)

Thursday, January 19, 2023 and Friday, January 20, 2023 FINAL APPROVED: April 21, 2023 Finally published May 8, 2023

[...]

d. Job description for Executive Counsel (In House/Prosecuting) – The Board reviewed and discussed updating the policy to include a Job Description for Executive Counsel. Dr. Moore moved in favor of adopting an update to the Board's Policy and Procedures to include a job description for Executive Counsel as follow: [...]

1. facilitate disciplinary and compliance procedures by coordinating with the Board Investigator, Complaints Coordinator, Board Member and/or other appropriate staff/board members in the investigation of alleged or suspected misconduct by licensees, applicants for licensure, and/or others

2. facilitate the negotiation of settlement terms for Impaired Psychologist Procedure Agreements and Consents Orders and prosecute all administrative matters which go before the Board for adjudication

3. monitor the status of pending investigations and complaints and compliance with Impaired Psychologist Procedure Agreements and Consent Orders

4. initiate or facilitate the initiation of an Administrative Complaint on behalf of the Board and/or sign an Administrative Complaint [...]

DAY 2: LONG RANGE PLANNING January 20, 2023

9:15 a.m. – 10:30 a.m. The Board received a presentation from representatives of the Association of State and Provincial Psychology Boards (ASPPB) including Dr. Mariann Burnetti-Atwell (ASPPB Chief Executive Officer) who spoke to ASPPB's role being to have jurisdictions be self-guided, Dr. Matthew Turner (ASPPB Former Director of Examination Services))who presented a Power Point on test development, validation process as per Standards, Sharpless studies on differential pass rates, etc., and introduction to Dr. Hao Song (ASPPB Associate Executive Officer of Examinations Services), who spoke regarding the validity and other issues concerning the EPPP (Part I and Part II). This presentation was conducted at the request of the Board in response to the decision by ASPPB to define the EPPP as one examination with 2 parts, forcing LSBEP to consider its current procedures for assessing both knowledge and skill. Following the presentation, the Board asked questions of the presenters regarding the examination, validity, logistics of registration across jurisdictions, timing for admission to the examination.

GENERAL DISCUSSION/ACTION ITEMS:

[...]

c. Letter from ethics attorney – Dr. Gormanous reported that an answer to the request for an Advisory Opinion from the Ethics Board, Docket No. 2022-747 had been received. Dr. Gormanous shared documentation that the letter was sent to his home address. Further that the conclusion was that the Code does not require the LSBEP or its members to disclose waiver of registration fees for attendance at ASPPB.

e. ATAP Administering select projective test if adequately trained - The Board discussed the proposed language, specifically under LAC46:LXIII.1105.C. to address concerns posed by licensee's that the section would restrict test instruments like the "Draw-A-Person" (classified as a projective test measure), which some ATAPs are currently administering. Dr. Moore stated that it is her opinion that when the full context of the section is considered, the section does not prohibit the administration of tests such as the "Draw-A-Person" or similar projective tests as long as a measure has a standardized method for administration and scoring. Dr. Sam agreed this was her view also and stated her understanding of the intent of the section is to restrict the global use of projective measures and ensure the licensed psychologist understands that it remains their judgment of what can be done and by whom under their license; measures which do not have "specific predetermined and manualized administrative procedures, and which entail behavioral observations, and/or recording test responses" would not include Draw-A-Person nor similar projective measures; and further, that the decisions made related to test selection are at the discretion of and responsibility of the licensed psychologist who should be competent in all measures considered.

deviates from state content standards or curricula developed or approved by the public school governing authority. [...]

HB 181 to Modify Emergency Certificate Set for Passage

HB 181 by Rep. DeVillier is set for final passage in the Senate. It was heard in committee, amended and voted favorably. House Floor vote was 94 to 0. HB 181 will allow coroners, deputy coroners, and assistant coroners to execute an emergency certificate via actual examination or telemedicine examination and establishes provisions for such persons.

HB 181 provides that the actual examination of the person may be conducted by any medical professional listed in proposed law, including coroners, deputy coroners, and assistant coroners, via telemedicine.

[...]

b. LONG RANGE PLANNING DISCUSSION:

i. Masters Level License/Credentialing – The Board discussed this topic taking into considerationthe steps being taken by the American Psychological Association to begin accrediting masters level psychology programs. Mr. McNeely moved that staff study best practices and licensing considerations related to master's level licensing in North America and seek input and resources from any relevant organizations, staff and experts as staff deems fit. Following opportunity for discussion, the motion was put to a vote. The motion passed by unanimous roll-call vote as follows: In favor: (6) Gormanous, Moore, McNeely, Harness, Sam and Holcomb; Against: (0); Abstained: (0); Absent: (0).

Action: Monic organize workgroup to begin compiling data for Board consideration.

[...]

{TO BE CONTINUED IN NEXT MONTH'S ISSUE.]

We Remember Dr. John Bolter

impossible achievement—the political maneuvering that gave Louisiana medical psychologists the right to prescribe medication, and the state psychology board the right to regulate that authority.

Dr. Bolter earned the distinction of being the first civilian psychologist in the United States to write a prescription for medication to treat emotional and behavioral health disorders. He was also a key figure in the education efforts of medical psychologists having developed a psychopharmacology education program for postdoctoral psychologists in 1998. He served as Senior Lecturer for the International Psychopharmacology Program, Alliant University, College of Professional Psychology, San Francisco, California.

Fellow medical and neuropsychologist, Dr. Darlyne Nemeth wrote, "Dr. John Bolter was a kind, loving, and multi-talented pioneer who changed the course of psychology forever. Along with Dr. James Quillin and their amazing colleagues, this small group of individuals sought to obtain prescription privileges for Louisiana Psychologists. Over many years, political forays, and monetary efforts, John, "Q," and company prevailed. I was privileged to play a small part. John orchestrated that process," she said, and "wrote the first prescription. Throughout, John remained a humble, soft-spoken man who never lost sight of the goal."

In 2009, Dr. Bolter was part of a second and successful effort to give medical psychologists more autonomy by moving them under the medical board, known as Act 251. While controversial, the move was praised by many as a way of accelerating medical psychologists' independent practice.

Dr. Warren Lowe, a colleague and also a leader in the medical psychologist community, wrote, "Medical psychologists stand on the shoulders of giants, none greater in stature than John Bolter and Jim Quillin. John was a visionary. His curriculum for post doctoral training in psychopharmacology has become the standard for universities across the country," he said.

"John was intelligent, kind, and considerate, always willing to help a colleague. It was not his style to place himself in the limelight. What a privilege it has been for us to know him and to benefit from his counsel, wisdom, encouragement and determination. What a gift he has left us. God bless him," Dr. Lowe said.

Dr. Bolter received multiple awards for his service to the field. In 2004 he and colleagues were named with the Karl F. Heiser APA Presidential Award for Advocacy, an award honoring those psychologists who have given voluntarily of their time to define the discipline of psychology statutorily by state and federal laws through advocacy.

His efforts were also recognized by the American Psychological Association Division 55's Leadership Award and the Special Recognition Award in Leadership by Louisiana Academy of Medical Psychologists.



Dr. John Bolter, at the Am. Psychological Association's Leadership Conference, in Washington, D.C., in 1996. (Photo courtesy of Dr. Brenda Dawson.)

is too little space to share them. My memories of John are as a dynamic individual who was thoroughly engaged with his patients, his profession, his family, and his colleagues. You could not help feeling energized anytime you were in his company," he said.

"I was fortunate to be in the first cohort of psychologists who trained to be prescribing psychologists in Louisiana and had the opportunity to observe first-hand John's brilliance in the areas of clinical psychopharmacology, politics, academics, professional regulation, and organization. I remember our first class of instruction en route to our MSCP degree. It was Neuroscience taught by John and two other colleagues. John was clearly one of the most intellectual thinkers I have known," he said. "His service to his country and his profession will be honored continuously."

Dr. Bolter was a member of the International

During his extensive career he served as Consulting Neuropsychologist at the Sage Rehabilitation Hospital, the NeuroMedical Center Surgical Hospital, the Department of Health and Human Services, the Social Security Administration, the Medical Center of Baton Rouge, Our Lady of the Lake Regional Medical Center, and the South Louisiana Rehabilitation Hospital and Outpatient Center.

He was a Medical Expert Witness for the Office of Hearing and Approvals, Department of Health and Human Services, and Social Security Administration. He was Clinical Assistant Professor for the Department of Family Medicine, Louisiana State University Medical Center, in Baton Rouge,

Dr. Joseph Comaty, colleague and medical psychologist, wrote for the Tributes Page, "I have so many memories of John there Neuropsychology Society, National Academy of Neuropsychology American Psychological Association, APA Divisions 55 (Psychopharmacology), 40 (Neuropsychology), and 42 (Independent Practice). He was also a member of the Louisiana Psychological Association, the Southeastern Psychological Association, the Louisiana Academy of Medical Psychologists, and the Academy of Medical Psychology.

He served as President of Louisiana Psychological Association and as Treasurer of Louisiana Academy of Medical Psychologists. He served on the Advisory Council of Spinal Cord and Head Injury Trust Fund of Louisiana, on the APA Psychopharmacology Task Force, and on the APA Model Practice Act Committee.

He served twice on the Board of Examiners of Psychologists, in 1995 as well as in 2007.

Cont next pg

We Remember Dr. John Bolter

Mr. Lloyd Lunceford, posting a Tribute, wrote, "As legal counsel for the Louisiana State Board of Examiners of Psychology for twenty years, I had many occasions to work with dozens of outstanding board members — and John stood out as the best of the best. He was wise, kind, conscientious, hardworking, articulate, gracious, and humble. He was devoted to his profession and to protecting the public health, a trusted leader who had the respect of his peers. I was blessed to know him, and will miss him. My thoughts and prayers go out to his family."

Throughout his long career Dr. Bolter assessed and treated thousands of people and published widely in the areas of brain trauma, seizure disorder, and dementia.

Just a few examples include: "The Relationship Between an Alternative Scoring System for the Halstead Category Test and the Wisconsin Card Sorting Test," in *Archives of Clinical Neuropsychology*; "Item Error Frequencies for the Halstead Category Test: A Cross Validation Study for a Performance Validity Check," in *Archives of Clinical Neuropsychology*; "Frequency of occurrence of WAIS dementia profile in head trauma patient," in *Archives of Clinical Neuropsychology*; "Epilepsy in Children: Neuropsychological Effects," in J. E. Orbzut & G. W. Hynd (Eds.), *Child Neuropsychology Vol. II. Clinical Practice*; and "Lateralized Cerebral Dysfunction in Early and Late Stage Alcoholics," in *Journal of Studies on Alcohol*, and he published the "Multidigit Memory Test," through Wang Neuropsychological Laboratories.

"We all knew Dr. Bolter as a pioneer in many areas of Psychology/Neuropsychology/Medical Psychology," wrote a fellow neuropsychologist, "but I also wanted to share his pioneering efforts in the nascent development of embedded validity indicators in the 1980s (way before this was a regular thing in forensic neuropsychology)." Dr. Bolter and colleagues made use of embedded validity indicators to identify 18 items rarely missed by neurological patients, resulting in the "Bolter items."

Dr. John Bolter made it a practice to train and share his information with others. He presented over 75 professional workshops, seminars and talks. Examples include:

"PEP Review Course, Neurology and Neuroscience, Differential Diagnosis, and Integrating Psychopharmacology into Clinical Practice," for The American Society for the Advancement of Pharmacotherapy Mid-Winter Meeting, San Diego, California; "Workshop: Essential Laboratory Tests with Psychotropic Medications.," for the Louisiana Academy of Medical Psychologists Semi-Annual Meeting, Baton Rouge, Louisiana;

Symposium Chair: "From Law to Practice, Prescription Privileges in Louisiana," for American Psychological Association Annual Meeting, New Orleans, Louisiana;

"Rosecrans SEPA Invited Address: Prescribing Activities of A Medical Psychologist," for South Eastern Psychological Association Annual Convention, New Orleans, Louisiana; and

"Workshop: A Review of Antidepressant Psychopharmacology," for the Mississippi Psychological Association Annual Meeting, Biloxi, Mississippi.

A native of San Francisco, and longtime resident of Baton Rouge, he was born in 1950 in San Francisco, California, to Oila Larsen Bolter and Bernard John Bolter.

He was a Vietnam era veteran, serving as a corpsman for the U.S. Navy from 1968 to 1974, at Balboa Hospital in San Diego, California and on the USS Ticonderoga. He served in the Army Reserves until 2001, at the rank of Major.

He attended the University of California, Berkeley where he graduated Phi Beta Kappa, with a BA degree in psychology. He obtained a master's degree in experimental psychology from the University of the Pacific, and his PhD in clinical and neuropsychology from University of Memphis in 1983. He reentered the military for his clinical neuropsychology internship at Walter Reed Army Hospital in 1983. He obtained a postdoctoral master's degree in psychopharmacology in 1999.

His family noted that his "side gig" was as a drummer for the classic rock band Blu Rouge.

He is survived by his wife Dr. Brenda L. Dawson, also a psychologist, currently in Wilmington, NC, his son Brian John Bolter (Lisa) and grandchildren Bailey and Barrett Bolter, Annapolis, MD, and his daughter Caroline Janice Bolter, Culver City, CA. Also surviving him are his brothers George B. Bolter (Barbara) in Janesville, WI, Bernard J. Bolter (Kay) in San Francisco, CA and James A. Bolter (Susan) also in San Francisco, CA. He was preceded in death by his infant son Patrick John Bolter, his parents and his stepparents.



L to R: Dr. Tommy Stigall, Dr. Alesia Williams, Dr. Brenda Dawson, assistant to Sen. Landrieu, Dr. David Greenway, Dr. Kim VanGeffen, Connie Stigall, and Dr. John Bolter, attending the 1999 Am. Psychological Association's Leadership Conference, in Washington, D.C.

Dr. Bolter was the Chair of the Psychopharmacology Committee.

(Photo courtesy of Dr. Brenda Dawson.)

People

Dr. Newman Wins Sweetgrass Award, continued

sweetgrass is a sacred plant that attracts positive energy, beauty, and sweetness.

Dr. Newman served as President for the Society for Indian Psychologists, whose stated mission is to provide an organization for Native American indigenous people to advocate for the mental well-being of Native peoples by increasing the knowledge and awareness of issues impacting Native mental health.

One of the main focuses for the Society is for Native psychologists to support professionals, researchers, graduate students, and undergraduate students who are aspiring for careers in any area of psychology and match them with Native mentors, to share ideas, spread knowledge, and provide new information that is relevant to Native People who are united by a common set of core values.

At the 2021 Society for Indian Psychologists (SIP) Convention, Dr. Newman was a co-collaborator for the SIP Mentorship Program: "The Native-to-Native way." The Mentorship Program is an online mentoring community of American Indian/Alaska Native and Pacific Islander scholars in psychology and allied health professions. The SIP pair Native students and early career professionals with experienced and elder Native psychologists from all around the country and overseas. The program offers mentoring training and online webinars, CE offerings, on topics in Indigenous psychology, personal, and career development.

According to the APA Sweetgrass program, Dr. Newman is honored for actions including mentoring and support of Indigenous women, development or adaptation of research methods or models for treatment and intervention that are ethnical, cultural and gender appropriate for Indigenous women. Also included are activities such as advancing the understanding of the psychology of Indigenous women; the scientific understanding of features of ethnicity, culture and class among Indigenous women which pertain to the psychology of women. Advocating on behalf of Indigenous women in policy, clinical and research findings in the area of services to AN/AI and other Indigenous women, children, youth, and families, is also included.

Dr. Newman notes that her training and background as an analyst help her to be particularly sensitive to multicultural concerns and to the importance of knowing oneself in depth and in the context of relationships with others. She combines her scientific background in development and neuroscience with her interests in psychoanalysis and culture. Her psychotherapy style is depth and insight oriented, and she also has over 25 years' experience in academic research, university teaching, graduate training, and clinical specialty practices background as a university professor.

Her specific areas of expertise include developmental psychopathology during adolescence, identity, and personality development - including racial and ethnic identity, culture and neuroscience, diverse topics in American Indian mental health, and developmental topics in psychoanalysis. She especially enjoys working with culturally diverse populations and with pre/post-partum mothers. She is active in service with various international, national, and local professional organizations in psychology, psychoanalysis, child development, American Indian affairs, and mental health.



Adobe

Dr. Nemeth Helps Ukraine Survivors, continued

Neuropsychology Center of Louisiana, and Secretary-General of the World Council for Psychotherapy.

According to the *Post*, "With long-term, active combat operations taking their toll on the psyche of Ukraine's military, leaving lasting imprints on their mental health, the International Society of Psychologists is actively working to help Ukrainians with mental health problems as a result of Russian aggression. These problems with mental health have not spared the civilians of Ukraine - who are under constant pressure from the tragic events of the war."

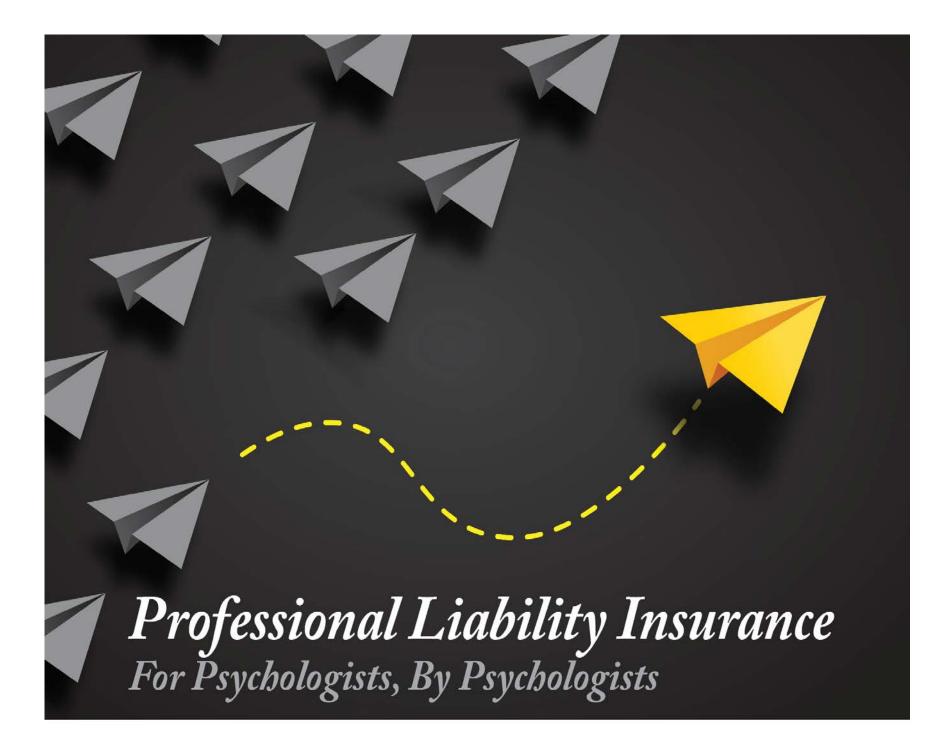
Dr. Nemeth explained, "Our first workshop was on dealing with fear. Dr. Kuransky presented a wonderful exercise using stress management via balloons, and I followed with a Double Bind exercise showing how two feelings can occur at the same time. When acknowledged, they can be processed and resolved. The feelings that I used were being afraid and being brave. That workshop was very successful according to those who attended," she said.

According to the *Post*, "The psychological support center has been operating in Kyiv for about ten months, with experts from all over the world providing counseling to those seeking support. Since beginning, 403 people have passed through the center, where they go through a course until ten individual sessions. Mostly, they are refugees from Mariupol, Kharkiv, Zaporizhzhia and cities of the Kyiv region," reported the *Post*.

"We're providing temporary relief and coping strategies to those who are under intense duress," said Dr. Nemeth. "I am sure that many people from Louisiana are attempting to help the Ukrainian people; however, I have specifically been asked to participate in the planning and execution of these workshops. Dr. Judy has asked that her students be involved, and I have asked my clinical and research assistant, Cody Capps, B.S., from LSU, to participate as well. There are only four psychologists on site to help thousands of people, so anything we can do via Zoom will help," she said.

She has published and presented scholarly research on topics in developmental psychopathology, psychiatric epidemiology, ethnic minority children's development, and on Native American mental health and personality development. She has lectured nationally on topics related to the development of depression, anxiety, substance use, attention problems, dissociative or disruptive behavior, personality and identity development, stress and trauma in preschool, adolescence, and during the transition to young adulthood.

"The next workshop will be focused on women with cancer who have been in considerable pain," said Dr. Nemeth. "I am working with Dr. Judy Kuriansky at Columbia University and her students to assist Dr. Alexander Zharkov with the workshop. My presentation will be on a variation of the Tapping Exercise that was used in our Katrina 10 Workshops. We are still formulating the entire workshop, so the results will be finalized in the next two weeks."



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Researchers Review Their Work at Association for Psychological Science Convention *continued*

by James Glass

program: The presenters described the recent EMA research examining suicidal desire variability and sexual orientation, emotional differentiation in relation to suicidal thoughts, and person-specific models of suicide risk, with implications for just-in-time suicide prevention efforts.

Tonya Vandenbrink, PhD., was a co-collaborator on "The Influence of Age and Divided Attention on Eyewitness Memory." The collaborators abstract noted: Their study supports previous findings that children are more suggestible than adults to misleading questions. This study also found that the negative influences of divided attention on eyewitness memory are not only present in adults but also can be found in younger populations, such as preschoolers.

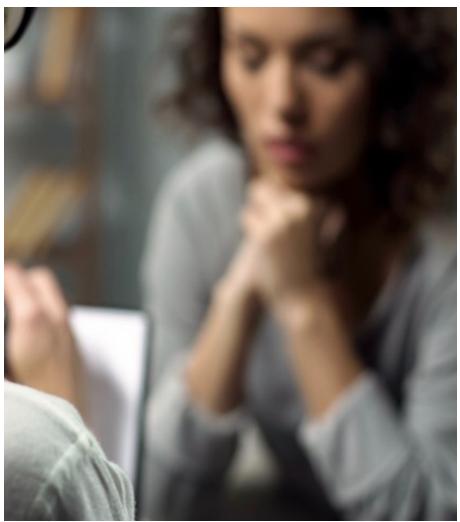
University of Louisiana Lafayette

Aidan Guidry, Anna Catherine Romero, BS, Prynceston Fant, and Hung-Chu Lin co-authored "Attachment Insecurity and Empathy: Comparison between Inmates and College Students." The authors noted: When compared to college students, inmates reported significantly lower levels of empathy but higher levels of attachment anxiety. For inmates, but not college students, regression results predicting empathy indicated main effects of attachment anxiety and avoidance, suggesting the role of attachment insecurity in empathy for criminal justice involved population.

Anna Catherine Romero, BS, Jaci Philliber, Kinsey Hatfield, Sydney Guidry and Hung-Chu Lin, PhD. Contributed to "Adverse Childhood Experiences, Mindfulness, and Health Outcomes." The abstract noted: Data from 650 emerging adults revealed a main effect of adverse childhood experiences (ACEs) on depression, anxiety, stress, and somatic symptoms. Separate regression analyses (with age, gender, race/ethnicity controlled) indicated that mindfulness emerged to be a protective factor for all four outcomes above and beyond ACEs, social support, and resilience.

Ashley Messina, B.S. and Theresa Wozencraft, PhD. presented "The Relation between Race-Based Traumatic Stress and Stress Appraisals." According to the presenters: The purpose of this exploratory study was to examine the relation between race-based traumatic stress (RBTS) and stress appraisals (i.e., threat, challenge, and centrality appraisals). Preliminary analyses demonstrated that the relationships between each variable were significant (p < .05) and that threat appraisals significantly predicted RBTS (p = .02).

Ayodeji Adegoke and Manyu Li, PhD., presented "Egocentric Network Analysis of Undergraduate Students' Support Network." From the presenters abstract: Using an egocentric network analysis approach, this study took a step further to understand the types of social support that relate to students' academic motivation. The preliminary analyses demonstrated initial evidence that students' support network indices were related to their intrinsic academic motivation and academic/career success values.



Adobe

of social restrictiveness may predict treatment-seeking attitudes in Asian Americans.

Brooke O. Breaux, PhD, Robert B. Michael, PhD and Ayush Deshpande. Collaborated on "Fake News: Towards an Empirical Definition." From the abstract: College students were more likely to label a news story as "fake news" when it contained information that they disagreed with, made them unhappy, was thought to contain false information, and was thought to be written by a blogger, politician, or Facebooker whose intent was to mislead the reader.

Brooke O. Breaux, PhD., authored "Psychology Research Proposals: Benefiting from Explicit Instruction, Content Alignment, and Strategic Simplification." According to the presenters: Within an introductory research methods course, it can be challenging for undergraduates in psychology to produce a quality research proposal. To improve outcomes, I created a sequence of three assignments for which there are explicit instructions, aligned the delivery of course topics with the assignment deadlines, and eliminated unnecessary complexity.

Brianna Sadighian, BA, and Manyu Li, PhD., discussed "Generation Status and Social Restrictiveness As Predictors for Attitudes Towards Seeking Professional Mental Health Services in Asian Americans." According to the abstract: Though the Asian American population and rate of mental health disorders continues to increase, there is still an underutilization of services in this population. Results show that generation status and levels Hung-Chu Lin, PhD, Dianne Olivier, Roger Rholdon, Tricia Templet, Kaylee Ackel, Megan Bergeron, and Aidan Guidry and Paula Zeanah collaborated on the "Experiences of Student-Parents during the COVID-19 Pandemic." The presenters abstract noted: Data of a sample of studentparents enrolled in a mid-size public University in the South of US during the COVID-19 pandemic were compared to non-parent students. Young student-parents (aged below 25) were at the greatest risks for academic difficulties and overall negative experiences, when compared to older student-parents and non-parents.

Cont next pg

Researchers at Association for Psychological Science Convention *continued*

Kiara E. Martin, BS and Valanne MacGyvers, PhD., coauthored "The Role of ACEs on Academic Achievement and Psychological Well-Being: Examining Protective Factors." From their abstract: Abuse, violence witnessed in the home, and divorce are all considered adverse childhood experiences (ACEs) and can limit a person's potential for success. However, protective factors such as resilience, growth mindset, and campus connectedness can help individuals overcome adversity from their childhood and improve their chances of success.

Kirsi S Michael, HS and Brooke O. Breaux, PhD, presented "Are Perceptions of Criminality Biased? The Roles of Name Popularity and Socioeconomic Status." According to the presenters abstract: Are people with unpopular first names and people with lower socioeconomic status perceived by others as more likely to have committed a crime than people with popular first names and people with higher socioeconomic status? Such biases would potentially impact the criminal justice system and convictions in court.

Taylar Johnson, BS and Manyu Li, PhD., co-authored, "Threat to Sense of Belonging: The Buffering Effects of Social Media Influencers." The presenters abstract noted: This study examines whether parasocial bonds with social media influencers and cultural similarity to the influencers will moderate the negative relationship between threat to sense of belonging and sense of belonging. It is hypothesized that the moderators will buffer against the negative role of threat of sense of belonging.

Ainsley Graveson contributed to "Adverse Childhood Experiences, Mindfulness, and Health Outcomes." According to the abstract: Data from 650 emerging adults revealed a main effect of adverse childhood experiences (ACEs) on depression, anxiety, stress, and somatic symptoms. Separate regression analyses (with age, gender, race/ethnicity controlled) indicated that mindfulness emerged to be a protective factor for all four outcomes above and beyond ACEs, social support, and resilience.

Tulane University

Anna Wilson, Hilary Skov, Kavya Subramaniam and Sarah A.O. Gray, PhD, co-collaborated on the "Maternal Depressive Symptoms during COVID-19: Pandemic-Related and Other Stressors Confer Risk." According to the abstract: In a sample of low-income and economically marginalized, primarily Black mothers of young children, maternal depressive symptoms increased from pre- to post-COVID, elevating to clinically significant levels. Pre-COVID depressive symptoms were the most significant predictor of pandemic depressive symptoms, but exposure to COVID-related stressors accounted for 7.3% additional variance. Stress Solutions by Susan Andrews, PhD

How Wild Animals Cope with Stress

Humans are not the only animals that suffer from an overload of stress. Animals from our pets to lizards and songbirds to wild beasts can experience stressful and challenging situations that actually can have long-lasting impacts of them. Just as young children can have lifelong consequences from Early Life Stress (ELS), so can a rare Colorado checkered whiptail lizard stresseat in response to noise. In fact, the similarities to humans includes passing on trauma to the next generation. Just as pregnant mothers who are super-stressed and anxious during pregnancy can affect the performance of their offspring (generational trauma), the same passing of the trauma has been identified in some species, like small fresh water fish.

Many of us overeat to stress. Or, we drink too much coffee. Or, maybe we drink too much of other substances that are bad for our health. Some of us have developed life threatening habits, like smoking, and the response to increase stress is to light up.

A new study involving the rare Colorado checkered whiptail lizard discovered that part of their habitat is an army base. Low flying aircraft regularly fly in and out of the base producing sounds that are much louder than the lizards experience naturally and the result is almost continuing stress for the species. The study took blood from some of the lizards and found that during flyovers they released more cortisol – yes, our old friend, Cortisol – and they ate more and moved less.

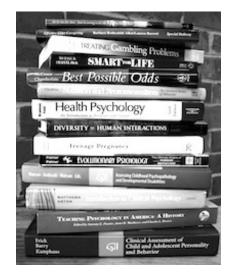
Sleep is important for all animals, human and non-human. Sleep deprivation is a definite form of stress. The effects of sleep deprivation on animals is actually studied even in fruit flies and bees. Fruit flies, for instance, sleep less and eat more when subjected to social isolation. Sleep deprived mice eat more. Butterflies who don't get enough rest/sleep have been known to even lay their eggs on the wrong types of plants. And, some bee species who are sleep deprived perform their waggle dances with less precision. The "waggle dance" of a bee is their equivalent of a GPS. So a sleep deprived bee who is supposed to be communicating with the rest of the hive as to the direction of food could be off in the directions they are giving the others.

It is not just sleep deprivation or too much noise or too much heat or rain that can cause stress in animals. The presence of predators obviously makes animals nervous. And, that goes for most humans, too.



Charles Figley, PhD, was the co-chair for the presentation on "Filling Gaps in Research on Disaster-Related Traumatization and Growth: Lessons from Catastrophic Category-5 Hurricanes." From the abstract: Facing the surging impact of major disasters, trauma psychologists pointed to certain research gaps. This symposium on hurricane studies seeks to address gaps via following modalities: 1) Complex pathways to multifaceted outcomes; 2) Bayesian structural equation modeling (SEM) on prospective research; and 3) In-depth analysis concerning resilience of underserved communities.

Dr. Susan Andrews is a Clinical Neuropsychologist, an awardwinning 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.



The Psychology Times' BOOKSHIELF Who's Writing What?

Trauma–Responsive Pedagogy Teaching for Healing and Transformation

Arlene Casimir & Dr. Courtney Baker

Dr. Courtney Baker has turned her considerable understanding of trauma sensitive education into a useful and innovative guide for teachers who want to be responsive to trauma in their students and themselves.

Dr. Baker has teamed up with Arlene Elizabeth Casimir to author Trauma Responsive Pedagogy: Teaching for Healing and Transformation. The book is part of the Heinemann series, dedicated to teachers and edited by Nell Duke and Colleen Cruz.

Trauma Responsive Pedagogy is based on the foundational principle that children who are experiencing significant stress, either chronic or acute, cannot learn in a regular classroom. What is required are insightful teachers who understand trauma and its ramifications. The authors add the complex notion that often the teachers are also experiencing their own chronic stress.

One of the pillars of thought offered by Trauma Responsive Pedagogy is that teachers must find the center of compassion and understanding, for dealing with chronic stressors of poverty, discrimination, health challenges, and environmental crises.

The small but profound work is chocked-full of ideas to help educators develop ways to acknowledge trauma and its correlates, and support students to help them learn and reach their full potential.

Dr. Baker brings her considerable knowledge and experience about trauma and schools to the subject matter of Trauma Responsive Pedagogy. She is the Project DIRECT Team Leader and Principal Investigator, and an Associate Professor in the Department of Psychology at Tulane University. She is also a licensed clinical psychologist with a specialty in child clinical psychology and she directs the APA-Accredited School Psychology doctoral program at Tulane. She also co-directs the Tulane University Psychology Clinic for Children and Adolescents.

NOT THIS BUT THAT

Trauma-Responsive Pedagogy

Teaching for Healing and Transformation



ARLÈNE ELIZABETH CASIMIR • COURTNEY N. BAKER

SERIES EDITORS NELL K. DUKE & M. COLLEEN CRUZ

nonsense review of the problems in current situations that ignore trauma of children and of the teachers. Written by Casimir, the section invites educators to see through traditional teaching methods to the deeper understanding of trauma sensitive education.

Casimir gives her own story and then explains possible manifestations of student trauma. These include fight, flight, freeze, faint, fawn, forget, front, fool, and friend. She calls these nine acts of student trauma manifestations and describes how much of this can be missed in the traditional school scenario.

Among the many examples, she describes how teachers risk isolating children who are experiencing emotional pain and also how teaching methods that are not responsive to trauma risk compartmentalizing the experience of children and can be harmful.

Dr. Baker authors the next part, Section 2, "Why Not? What Works? Trauma-Responsive Classrooms Promote the Well-Being of All Students."

In this data rich section, Baker describes the Adverse Childhood Experiences measurement (ACEs) and the significance of these studies.

She notes that women and individuals from low income and racial minority groups with urban backgrounds are more likely to experience ACEs and and she makes the point that these negative impacts are cumulative over time. "... ACEs negatively impact the developing brains and bodies of children by, for example, chronically activating their flight or fight responses," she writes.

Trauma Responsive Pedagogy reflects much of what Dr. Baker and her team members have learned. She and her team have partnered with 13 New Orleans childcares, Head Starts, and pre-K/K classrooms within charter schools, which serve low-income children. Project DIRECT, a community-engaged approach, has aimed to reduce disparities in mental health and academic achievement.

Baker and her group reach children who live in poverty, children of racial and ethnic minorities, and children who have experienced trauma. They deliver high-quality evidence-based prevention and improve intervention programs for real-life applications, especially for children who are vulnerable to poor outcomes.

It is just this type of goal that is useful for readers of Trauma Responsive Pedagogy.

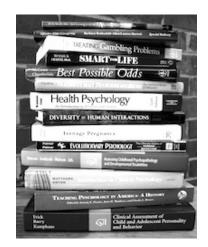
The text is divided into three sections. Section 1 is, "Not This -Schools as Places That Cause Trauma." The section is a no

She explains burn-out and how secondary traumatic stress can result in feelings of emotional exhaustion, detachment, and inefficiencies and how many teachers are not recognizing their own stress levels to traumatic events and the day in and day out challenges of a classroom.

Baker includes a section on balancing risk with resilience and describes ecological systems theory pertinent to the situation of classrooms. She explains the child in context of the family and the classroom and peers, and shows how these systems and connections to school, community, and extended family, as well as to society, culture, and overall economics, impact the child.

Dr. Baker also gives detailed information for developing social, emotional, and behavioral skills including guidance for developing a safe and supportive classroom and offering social emotional

Cont next pg



The Psychology Times' BOOKSHIELF

Who's Writing What?

learning programs. She stresses the importance and gives the research on the impact of student teacher relationships and the importance of empathy and warmth for children who are experiencing trauma. Backed up by research evidence, she details how these relationships can make up for poverty, family difficulties, and unmet needs of children,

She outlines how these safe and supportive relationships can help to retrain students, providing a valuable list of strategies, including when to use them, and what is the result.

And, Dr. Baker mirrors the message presented earlier in the book by Casimir on attending to the teachers well-being.

Section 3, offered by Casimir, is: "But That – Teaching for Healing and Transformation: Seven Stages to Trauma Responsive Pedagogy."

For this section the author lays out the necessary stages that teachers must embrace in order to be successful at creating the trauma sensitive learning environment. Casimir gives detailed information on the seven stages which include:

Stage 1–Know Thyself. By way of any combination of techniques or therapy, one has to do the inner work necessary for self-knowledge, she explains.

Stage 2 – Know Thy Content (in the Context of Culturally Relevant and Trauma–Responsive Pedagogy). Casimir explains that teachers must be solid in their instructional skills in order to be effective in the trauma sensitive context. They must know the "curriculum, research, and supporting educational frameworks."

Stage 3 –Bear Witness: Entering Our Classroom and Schools with a Trauma-Responsive Lens. She notes to " witness (don't guide, don't teach, be present, and watch.)"

Stage 4 - Feel: Tending to the Wounds Within Ourselves and Within Our Classrooms

Stage 5 - Grieve ... It's an Ongoing Process

Stage 6 –Initiate the Archetypes. The author suggests to use the symbols and images of civilizations past to help soothe and understand the human condition.

Stage 7 – Heal and Transform: The Intention and Practice of Teaching the Whole Child While Nurturing Your Well-Being

Based on guiding principles from the substance abuse and mental health services administration, Casimir asks the question of how to co-create a classroom that prioritizes the students' cultural, emotional, mental, physical, and spiritual safety. She explores how to create and cultivate trustworthiness and transparency, and how to create authentic collaboration and center the students voice in every decision the teacher makes.

Casimir continues with how to weave these trauma responsive ideas into the fabric of the instruction. She puts forth methodology and the belief that school can be a place for restorative and transformative practices for the child to regain wholeness.

Trauma Responsive Pedagogy: Teaching for Healing and Transformation is a very useful and inspiring little book that makes its point well. The authors combine their considerable expertise to bring useful and sometimes profound information to teachers who find themselves willingly or unwillingly in situations where trauma is at the core of children's learning problems. Baker and Casimir provide those in the trenches with guidance, support, and hope.



Dr. Courtney Baker (courtesy photo)

Dr. Baker notes that her career is committed to bridging the gap between research and practice, with a particular focus on understanding and facilitating the translation of evidence-based programs into school and community settings that serve children, youth, and families at risk for poor outcomes.

One of the foundations of Dr. Baker's work was when then Tulane's Chair of Psychology, Dr. Stacy Overstreet, led a group of psychologists, including Dr. Baker, and community partners in a first-of-its-kind study, for learning how schools can best meet the needs of traumatized youngsters. Dr. Overstreet, Dr. Baker, and the team was awarded a \$2.6 million grant from the National Institute of Justice.

A Shrink at the Flicks H Shrink St the Flicks

Creed III A Review

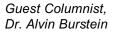
by Alvin G. Burstein, PhD

After my father died, and my mother gave up trying to run the HJB, their mom and pop grocery, we moved in with my grandmother, Perl. Her home was the last white owned one in a neighborhood that had become all black. I started second grade at the local school, the only white student in my classroom, and as a talkative kid, the teacher's pet of the all-white female faculty. Understandably, I was also the target of after-school bullying by my darker-complected classmates.

That unhappy circumstance was counter-balanced by the warmth with which many of the neighbors received me as I roamed the streets, searching for parental substitutes. This was 1939, and Joe Louis, the Brown Bomber, was in the midst of his bum-a-month campaign. I shared the emotional intensity of black neighbors as they clustered around the radio, listening to the champ's fights.

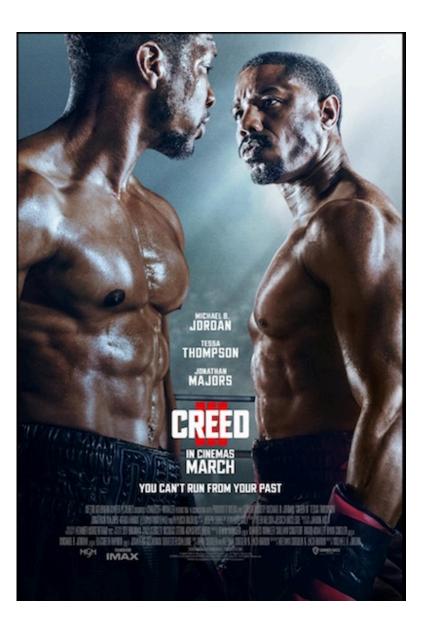
I have a vivid memory of the night when, early in the fight, Twoton Tony Galento, sent the champ to the canvas. I shared the shock and dismay evoked in the radio audience, giddily replaced by joy when Louis quickly resumed the fight, going on to dispatch his foe.

By a kind of contagion, the memories of those evenings, clustered around a radio, listening to the radio, sparked my lifelong interest in the boxing ring, an odd contrast for a bookish intellectual. It also explains my investment in Sylvester Stallone's *Rocky Balboa* series, and its latest entry, *Creed III*, the first one in which Stallone himself does not appear.



Burstein, a psychologist





Adonis Creed is the son of Rocky Balboa's opponent in the fight which propelled Rocky to the championship. Adonis has himself gone on to win the title, and, retiring, become engaged in coaching a new champion. A highly anticipated title defense is cancelled because of an injury to the challenger—an echo of the circumstances surrounding the first Balboa/Creed fight.

Adonis's homie, Damien Anderson, released after a lengthy term in jail for the killing during an escapade in which Adonis was also involved, finds Adonis and shames him for abandoning his best friend. He argues that Adonis owes him the underdog opportunity to face the current champion another parallel to the first movie. Adonis reluctantly agrees, and Damien wins the title, but begins to mock Adonis for his initial abandonment. Damien's public harangues require Adonis to challenge Damien to come out of retirement for a grudge match, the centerpiece of the new film.

Perhaps as paradoxical as my interest in boxing is the circumstance that the best contemporary account of fighting is Joyce Carol Oates' *On Boxing*. In what may reveal a sexist stereotype on my part, I confess to being surprised by her understanding of the unique fascination of boxing's brutality—you play basketball, or football or baseball, but you don't play boxing— Oates gets that the fascination is buried deeply in a recognition of our mortality. This film, like its predecessors, highlights the centrality of bearing pain for this non-sport. For preparing for it, for engaging in it. Boxing can be seen as a recognition of the degree to which life and pain are linked, thus constituting a celebration of courage and persistence.

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;

courtesy photo

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.

10 Dears Ago ... What The Psychology Times was reporting on in June 2013

BA Bill Passes

Senator J. P. Morrell's SB 134 to establish an independent board for Behavior Analysts completed its journey through the Senate and passed the House on May 28, headed for the Governor.

The bill provides for the Louisiana Behavior Analyst Board within the Department of Health and Hospitals and authorizes enforcement of the requirement for licensure, state certification, and registration, beginning December 31, 2013. The law also sets out the procedures and standards for the licensing of Behavior Analysts, certification Assistant Behavior Analysts, and registration of line technicians. Fees are \$400 for license, \$250 for certification, and \$50 for registration.

Photo Right: Louisiana Senator J.P. Morrell speaking at the recent psychology convention. Senator Morrell and wife Catherine took an active role in the legislation for regulation of behavior analysts.



Tulane's Dr. Ruscher Chairs Another Hit Convention for APS

For the third time, Tulane's Dr. Janet Ruscher has pulled off a major success as the Committee Chair of the Association for Psychological Science Convention, that just wrapped up last month in Washington, D.C.

"The conference was a terrific success," she told the *Times*, "– great energy, record attendance, excellent balance across the programs." She might be getting good at this. Dr. Ruscher also chaired the convention for the growing organization in 2003 and 2004.

Dr. Tramontana Named LPA 2013 Distinguished Psychologist

Louisiana Psychological Association has named Dr. Joseph Tramontana as its 2013 Distinguished Psychologist. The award was announced at the annual convention on May 30 in Baton Rouge. Originally from New Orleans, Dr. Joseph Tramontana received his Ph.D. in Clinical Psychology from the University of Mississippi.

Psychology Gumbo

COMMENT: Dr. Emily Sandoz, University of Louisiana– Lafayette, and Director of the Louisiana Contextual Science Research Group. COMMENT: Dr. Elizabeth Anne Shirtcliff, University of New Orleans Professor, and Jeremy Peres, UNO

Springer

Chafetz Presents for Social Security Inspector General

New Orleans clinical neuropsychologist, Dr. Michael Chafetz, presented his research to members of the Inspector General's Office of the Social Security Administration (SSA) on April 30, 2013. The event was hosted by the On-Line Academy of the Louisiana Psychological Association as a free presentation in the public interest.

Dr. Chafetz's research was cited in a letter by Senator Thomas Coburn of Oklahoma, sent to the SSA this past March. Coburn is the U.S. Senator known for confronting government waste and inefficiency. In the March letter, he challenged the Social Security Administration's anti-scientific approach to detecting faking in its disability claims. Coburn said that the potential for waste could reach \$68 billion.

Task Force on School Psychology Specialists to Meet June 28 in BR

The first meeting of the School Specialist Task Force is scheduled for June 28 according to a report by the state psychology board. [...]

Members of the task force include Dr. Rita Culross, Professor at LSU, who will be the psychology board's representative. Dr. Conni Patterson, Professor of Practice at Tulane University and past president of the Louisiana School Psychology Association will also serve.Dr. Steven Welsh will work on the task force. Dr. Welsh has been the Department head for the Department of Psychology and Counselor Education at Nicholls, and more recently, the interim Dean of the College of Education. Also included is Dr. Carmen Broussard, Associate Professor of Psychology at Nicholls.Susan Ratterree, the National Association of School Psychologists Delegate for the Louisiana School Psychological Association, will serve. And, E. Francoise Parr, current President of the Louisiana School Psychological Association, is also a member.

graduate student.

Autism and Child Psychopathology Series Series Editor: Johnny L. Matson

Johnny L. Matson Editor

Functional Assessment for Challenging Behaviors Functional Assessment for Challenging Behaviors

Johnny L. Matson, Editor

Autism and Child Psychopathology Series Springer *Functional Assessment for Challenging Behaviors* is a recent addition to Springer's Autism and Child Psychopathology Series, edited and authored by Louisiana State University Professor and Distinguished Research Master, Dr. Johnny Matson. This newest text zeros in on the specific methods used in functional assessment, one of the most important approaches used in applied behavior analysis. In this 243-page volume, Matson and contributors, including LSU's Max Horovitz, Alison Kozlowski and Megan Sipes, join a host of experts from around the country to give readers the most up-to-date information about functional analysis.

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