

## LSU's Dr. Noell Sets National Bar

Dr. George Noell, LSU professor and licensed school psychologist, is receiving national recognition for his innovative research on behalf of Louisiana's Board of Regents.

In a far-reaching effort that began in 2003, Dr. Noell created a research design with the goal of predicting children's school success. He and his team started by building a very large multivariate database of over 300,000 students. Then he developed

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Dr. George Noell

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## Two Offer To Serve on LSBEP

Dr. Michael Chafetz and Dr. Marc Zimmermann have self-nominated and offered to serve on the psychology board.

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## Memorandum Signed

Executive Directors Robert Marier, MD, and Ms. Jaime Monic signed the "Memorandum of Understanding..." for their respective boards

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## Attorney General Gives Opinion

The Louisiana Attorney General rendered an opinion (#09-221) on December 2<sup>nd</sup>, 2010 that addressed questions asked by the Psychology

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## Dr. Weyand Trains Therapists In China

Dr. Carolyn Weyand, as a faculty member with the China American Psychoanalytic Alliance (CAPA), recently traveled to China to teach, lecture and attend the ceremony for CAPA's first graduating class in Beijing. Carolyn, also an instructor with the New Orleans-Birmingham Psychoanalytic Center, is a psychologist and psychoanalyst who practices in the New Orleans area.

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Photo courtesy BRACVB PR Site

# Happy New Year! 1-1-11

New Year - 1.1.11  
**Join Up and Help  
Make A Difference**

*Editors note: Three statewide organizations are available to those who want to help mold the future of psychology in Louisiana – LPA, LAMP and Grassroots.*

*What follows is some information about each, including my editorial comments and opinions. (I'm a member of LPA and Grassroots.)*

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New Year - 1-1-11  
**For NY's Resolutions  
Engage Unconscious**

As far back as the ancient Babylonians, humans have been making New Year's resolutions, but only with about 15 percent success. Modern tips and guidelines, many stemming from behavior therapy, suggest ways to shape and reinforce our efforts: write down the goal, make goals specific, measurable; schedule time to meet

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# Editorial Page

## “Where have all the psychologists gone?”...

-Asked APA President James Bray (Monitor, June 2009). He pointed out that many areas are dropping ‘psychology’ from their names (developmental science, cognitive science, neuroscience), and that “clinical and counseling psychologists are quickly becoming generic mental health practitioners who perform counseling or therapy, rather than provide psychological services.” Bray wrote that most mental health providers in the US are masters level, not psychologists, and patients don’t understand the difference. IO and consulting psychologists often do not bother to be licensed, he said, and are moving to business schools. In short, we are losing our identity.

The psychological scientists have this problem too. APS President Mahzarin Banaji (*Observer*, Sept 2010) wants to “Bridge Science and the Public.” And, “We must find ways in which the best work can ultimately reach the funding public...” Reach the public? Good luck with that.

## The Psychology Times

Published monthly  
by Nelson News, LLC.  
[psychologytimes@drjulienelson.com](mailto:psychologytimes@drjulienelson.com)

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Member, Louisiana Press Association

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We welcome ideas for news, features, Letters to the Editor, photos, and other material related to psychological community of Louisiana.

Editorials and commentary reflect the opinions of this newspaper. Columns and Letters to the Editor express the opinions of the writers and not necessarily those of *The Psychology Times*.

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The deterioration can be seen in the recent practice (job) analysis by the association of psychology boards (ASPPB). There was an alarming drop from a dismally low 8 percent to 7 percent in research methods and statistics.

Should we care? Somebody had better. John Monahan’s article, “Statistical Literacy: A Prerequisite for Evidence-Based Medicine,” (*APS Observer*, October 2008) summarized a review of Gigerenzer, et al, quoting him, “...across widely varying samples of health professionals, patients, and policymakers, in all countries studied, statistical illiteracy reigns supreme—often with catastrophic consequences for individual and public health.”

The problems we have in our identity come from a failure in leadership. Recently, and *for the first time in 117 years*, APA decided to develop a strategic plan. (Is that supposed to be good news?)

In his letter, “Missing Important Heads in the Big Tent,” (*Letters, APA Monitor*, December 2010) Russell Riendeau wrote that one of the presidential task teams on the future of psychology “missed the mark...”

“Where on the task force,” he asked, “were representative minds from business, marketing, finance, sales, entrepreneurs, a college sophomore, entertainment, media or a soldier? Who played devil’s advocate during the process?” [...] “How does one sell an idea. Appeal to the emotions and senses of the customer. In this case, business professionals, capitalists and free enterprise—the very people who use, measure, predict, guess and profit from psychology research.”

Where have all the psychologists gone? *We’re still out here*. And we’d appreciate some visionary, competent leadership, at the state *and* national levels.

But even without this leadership, every once in a while, one of us finds a way to a serendipitous situation where he or she can be a real psychologist. Like Dr. George Noell, who with the hammer and nails of science, and the blueprints of human behavior, is building a better life for 650,000 school children, who can then build a better life for their children, and their children’s children...

Working for one person or 650,000, that’s what a real psychologist can do.



## Two Offer...

Ballots have been sent to psychologists and are due in by January 21<sup>st</sup>. The governor will then appoint either Dr. Chafetz or Dr. Zimmermann to replace Dr. Joseph Comaty, who will finish his term this coming June.

Dr. Michael Chafetz noted that "... I am particularly interested in having a viable Impaired Psychologist program that facilitates adequate decision-making. This interest arises from my experience performing psychological and neuropsychological evaluations for many different licensing boards, including LSBEP. I am also interested in a fair screening for complaints, including a process to weed out motivated false complaints often found arising from legal cases handled by psychologists."

Dr. Marc Zimmermann said that if appointed, he would like to "help improve the board's efficiency and also its effectiveness at staying clearly within its mandates."

He explained that he has seen times when a psychologist has an inappropriate or bogus complaint against them. The process drags on when it should be handled quickly and much more effectively to resolve these unwarranted claims against licensees.

He wrote, "The board is dealing with great turmoil in the profession. An even and temperate attitude will be needed to transverse this period."



Dr. Carolyn Weyand (L) and Wendy Wen, a Chinese psychologist and graduate of the first China American Psychoanalytic Alliance psychotherapy class.

## Dr. Weyand...

Along with other CAPA faculty, Carolyn attended the graduation of the first class on October 24<sup>th</sup>, 2010 at Peking University in Beijing. The event marked the completion of CAPA's two year psychotherapy training of 28 Chinese psychiatrists, psychologists and counselors. They were the first in their country to receive formal training in psychoanalytic psychotherapy.

"CAPA was organized three years ago," Carolyn explained to the *Times*, "when Chinese mental health professionals pressed CAPA founder, Elise Snyder, MD, to develop a training program. She [Elise] responded to their requests by organizing a multi-disciplinary faculty of mental health professionals, developing a curriculum, and establishing criteria for graduation." Over 200 experienced psychotherapists from around the Western world became involved in teaching, supervising and treating Chinese trainees. These Chinese psychiatrists, psychologists and counselors became the first group of psychotherapy students and CAPA's first graduating class.

"Americans teaching psychotherapy to Chinese mental health professionals usually do it over Skype or ooVoo," Carolyn noted. This fall marked the opportunity for the CAPA instructors to teach and lecture in person to their students in China.

Carolyn told the *Times*, "Chinese mental health professionals find themselves grappling with mental health treatment issues far beyond the traditions of their training. Exposure to Western psychotherapy theories and techniques, through readings and visiting lecturers, enlightened them to the breadth of possibilities potentially available to them in their work," she explained. She noted that these possibilities "...piqued their curiosity, stimulating a demand for more thorough study, for training in psychotherapy."

**Dr. Weyand, CAPA...**

Carolyn lectured at the Southwest University of Finance and Economics in Chengdu, China. There she spoke to 150 Chinese graduate students, medical students and mental health professionals from psychiatry, psychology, nursing and counseling. She spoke on "The Therapeutic Alliance." Carolyn also lectured in Shanghai at the East China Normal University to a similar audience, on "The Meaning of Therapeutic Neutrality." The CAPA team also traveled to Xi'an and Kaifeng to provide additional presentations.

Carolyn explained that the training involves two years of coursework to study theory and technique, and supervision of two long-term psychotherapy cases. Also psychotherapy or psychoanalysis for the developing therapist is included in the training. "The long-term mission of CAPA," Carolyn added, "is to assist the Chinese to develop their own faculty and to take over the program."

"The social conditions in China, particularly the expansion of the middle class and an increase in personal freedoms, make mental health issues more visible," she said. "Traditional methods for dealing with mental health problems which involved herbal medicines and acupuncture, have fallen away, giving rise to psychiatric practices resembling those of the West. Patients are treated with psychoactive medicines and attempts are made to counsel them and their families. The pioneering professionals knew enough to recognize the deficits in their treatment arsenal."

Part of Carolyn's trip included a tour of the Forbidden City, a hike around the Great Wall, and attending the Red Theatre production of Kung Fu, a story about a little boy who is raised by the Sholin monks. She said, "The production quality, costumes, lighting...rivalled anything on Broadway.... We all left the theatre stunned by the show."

Dr. Carolyn Weyand is a licensed clinical psychologist and a psychoanalyst and until recently served as Chair of Outreach and Scientific Education for the New Orleans-Birmingham Psychoanalytic Center. She is an occasional columnist for the *Times*.



Dr. Carolyn Weyand had the opportunity to see Pandas, called "living fossils" by the Chinese because of their phylogenetically ancient status. The Pandas eat constantly.

National News**Members File Class Action Against APA**

A federal class action against the American Psychological Association claims that millions of dollars were fraudulently collected from members over decades, as reported by *Courthouse News Service*, October 25, 2010. The lawsuit has to do with the special assessment for practitioners, and that the assessment was made to seem mandatory when it was not. Also a problem is that the money was given to a separate, but affiliated, lobbying group.

The named claimant is Ellen Levine of Hayward, California. She noted, "...APA employed a subterfuge to function as a lobbying and lobbying fundraising entity." The claim also noted, "The APAPO practice assessment is not trivial, amounting to over 50 percent of the amount of the APA dues..." For example in 2009 the assessment was \$137 and dues were \$238.

"Until dissemination by defendants of the revised dues statement form in May 2010, it was unknown by plaintiff and members of the class, and not reasonably capable of being known, that the purportedly mandatory APAPO assessment was a means by which APA/APAPO leadership secretly, fraudulently and with intent to deceive, had set up the dues arrangement described hereinabove so as to illegally collect lobbying funds from membership which the leadership knew otherwise would be unwilling to donate or provide through dues or otherwise the annual APAPO assessments," according to the complaint.

The class includes all APA members in the US who paid the assessment.



**Dr. Noell...**

hierarchical linear models where children were “nested” with their teachers and teachers nested within their schools. Over several years, George refined and tested the models until the results became stable and reliable, and the factors that impact children’s success became clear.

One outcome of his work is the value-added Teacher Preparation Program Assessment Model. Using the business concept of making affordable changes in a product or service that create high value to the customer, George’s efforts blended with the Regents’ goals of accountability and economical improvements for Louisiana’s schools.

Among other things, the results provided estimates of how teachers can impact children’s success, and also how education programs impact teachers. This work gives state decision-makers the facts they need to make the best and most affordable decisions for Louisiana’s children.

In the early stages of his research, directions were not always so clear as they are today. George told the *Times* that when he first became involved, “People were struggling to know if teacher preparation programs were successful. There were lots of opinions,” he said, “but not much evidence to help—very little fact-based information for people to make their decisions.”

That has changed. In December 2009 education officials from ten states visited Louisiana to better understand the models. In December last

year, the Baton Rouge *Advocate* reported that U.S. Secretary of Education Arne Duncan “...praised Louisiana as the first state to both redesign its college teacher education programs and create an assessment model to examine the results.” Duncan suggested that other states should try and follow in Louisiana’s footsteps.

Louisiana and George’s efforts are receiving national media attention. In a December 2008 editorial by the *New York Times*, “What Louisiana Can Teach,” the author pointed to the state’s achievements. In October 2009 George was interviewed by *Time Magazine* and in December 2009 the *Washington Post* published a review “Louisiana Serves as a Model in Teacher Assessment.” The topic continues in a lively debate in the *Wall Street Journal*.

In August 2010 Regent’s Chairman Artist Terrell said, “The Board of Regents is proud to have produced a national model for assessing teacher preparation programs. Our board supported the development of the Value-Added Teacher Preparation Assessment Model in 2003 by Dr. George Noell...” And he said, “...We have supported the release of the results to the public since 2006-07, giving our colleges and private providers critical information on how they are performing. This is accountability at its best!”

“Louisiana continues to outpace all other states in the nation in releasing evaluations of its university and private provided teacher preparation and certification programs,” the Regents noted about latest results in August 2010.

Dr. George Noell’s rare combination of talents may be at the center of these innovations. He is a licensed school psychologist and a board certified

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Ms. Connie Stigall (L) and Dr. Penny Dralle having tea at a fundraiser for Mary Landrieu some years ago. Penny served as LPA President in 1994. Connie was the Executive Director for LPA for many years. Photo taken by Dr. Tom Stigall.

**Dr. Noell...**

behavior analyst, who has practiced at the clinic level. He has published extensively, including in the topic of teacher preparation. As an LSU professor, he instructs doctoral candidates in school psychology, but also he teaches multivariate analysis and research design.

"My first ideas were all over the place," he said, "I came to the realization that measuring everything was financially impossible. Then I lit on the idea that all the kids were impacted by their teachers."

Searching out sources of error variance in this complex set of data was critical, he explained. "We wanted to be very careful and sure of each step. It's one thing to make a mistake with one kid, but at this level, a mistake could affect 700,000 children...No one wanted to foul it up."

As the results stabilized, he was able to explain children's academic success, measured by achievement tests. His models pointed to the connections to their prior achievement, demographics, classrooms and schools.

One of the powerful applications of the results was finding that some new teachers were able to have the same impact on children as the more experienced teachers. This led to the study of teacher preparation programs and how changes in teachers' training could impact children's achievements.

The results have become a source of information in the design and assessment of teacher programs, focusing on 66 of the state's school districts and all 21 public and private universities.

While able to craft a strategic research design for 300,000 plus school children, it may be his one-to-one work with youngsters, parents and teachers that provided the insight and creative spark that he brought to the project. "It started with a couple of things," George said. "I was interested in how to do effective treatments and found that the biggest part is compliance. I got interested in doing things that make schools strong, more vibrant, and more effective. As I did that I became interested in the pivotal role of teachers."

"There is nothing more rewarding than going home that day knowing you have helped a kid, a mom, or a teacher," he said to the *Times*. "I was in the clinic in those days, and it was one kid, one parent," he said. "You could really see it, feel it, it was right there—that you made a difference in someone's life."

## **Dr. Dardard Injured in Riding Mishap**

Dr. Susan Dardard, consultant to *The Psychology Times*, Secretary in Grassroots, and committee member in LPA, was injured while horseback riding. The accident occurred Thanksgiving morning.

Susan is doing well but the incident landed her in the hospital with a broken pelvis. She was released to rehabilitation, and now is recuperating at home and continuing physical therapy.

Susan was forced to dismount while exercising one of her horses, named "Red," when he became embroiled in an altercation with another male. She told the *Times* that she has learned never to get in between two males who are determined to fight.

Along with his other duties, he is now also leading a new task force charged with helping the state close achievement gaps and improve student outcomes. Called the "Superintendent's Delivery Unit" or SDU, the group is working to identify "best practices" and how to estimate the impact on student achievement.

"The state has adopted an ambitious set of goals for student outcomes," George said. "I'm leading the team that is applying some classic business concepts to the goals."

His group will support crafting strategic plans to address quality issues, continuous improvement, and other concepts that reflect the growing awareness that business objectives such as quality assurance and accountability can be of benefit to educational systems.

But amid an extremely busy schedule, Dr. George Noell said that he is happy to know that his work is "...going to trickle down and make a difference in a teacher's or a kid's life."

"Louisiana has over 650,000 public school children," he said. "There are moments when you see how the programs are actually going to impact the kids' lives. Those are the moments that are most fulfilling."

But he misses the direct contact. "I'm at the 50,000 foot level now, which is a long way from children. A great struggle some days is that I started out very close to kids and miss that. There is nothing more rewarding than working on behalf of children and adolescents," he said.



## LPCs, Psychs Discuss Issues, Background

According to the minutes of their October 29<sup>th</sup> meeting, the Behavioral Health Professional Working Group (BHPWG), members discussed the LPC's scope of practice regarding diagnosing.

According to the discussion described in the minutes, the LPCs already felt that their licensing law allowed them to diagnose. The psychologists asked why LPCs felt the need for additional legislation.

Noted in the minutes, the LPCs said they "felt compelled to clarify the language based on the opinion of Dr. Comaty that they have limited scope of diagnostic authority and they believe that this has had an adverse influence on their practice within DHH."

In a position statement provided along with the minutes, LPCs

explained that when their legislation was passed in 1999, they believed that the issue of diagnosis was resolved, and in fact they were then included in many insurance plans.

But they wrote "...about 4 years ago Dr. Joe Comaty began making statements which presented his and the psychology board's opinion and position that the LPC statute does not authorize LPCs to diagnose emotional, mental and behavioral disorders as a fact." They noted that at the Office of Behavioral Health, Dr. Comaty is Chief Psychologist, Medical Psychologist, and Director-Division of Policy, Standards and Quality Assurance.

The LPC position statement explained that LPCs with DHH complained that they were not allowed to diagnose and that the group learned that Dr.

Comaty's and the LSBEP's position had been adopted as policy by the Office of Mental Health.

"It is because of such a policy decision by DHH, which is based on the influential opinion of Dr. Comaty and the LSBEP, that LCA and the LPC Board realized that it would be beneficial to seek legislation..."

According to the minutes of October 29<sup>th</sup>, "There was a discussion about the LPCs impression that the psychologists did not consider the LPCs to be trustworthy to which Dr. Comaty responded that it was true based on his personal experience with some LPCs that they have not proven to him that they were trustworthy."

After discussion of these background issues, the group continued by offering each other their proposals for compromise language in the LPC's legislation.

LPCs proposed that they would increase their semester course hours from 48 to 60, require that 6 of 40 CEUs be in diagnosis, 3 CEUs in ethics, and to make policy changes.

The psychologists proposed requiring additional formal academic training, specific supervision, and establishment of an advanced level of counselor.

"Each side agreed to take the proposals back to their constituencies for comment before the next meeting," according to the minutes.

Dr. Comaty was the recorder.



Members of the Behavioral Health Professionals Working Group at a meeting earlier this year. The group is working at the request of the Legislature to develop agreed upon language for legislation and collaborative approaches to serve LA's citizens.

**Memorandum...**

in November. The two boards, including the Medical Psychology Advisory Committee have been working on the document over the past year with the goal of producing an agreement that would help the two boards work together in how they address the dual regulatory duties over the practice of psychology in Louisiana. Verbatim excerpts:

**“A. PURPOSE:**

Whereas, Act 251 of the 2009 Regular Session of the Louisiana State Legislature transfers the regulatory authority over Medical Psychologists (MPs) from the Psychology Board to the Medical Board as of January 1, 2010;

Whereas, Act 251 grants the Medical Board the authority to regulate the practice of psychology by associates to the Medical Psychologists;

Whereas, R.S. 37:2352(5) grants regulatory authority over licensed psychologists and the practice of psychology by unlicensed associates to psychologists to the Psychology Board;

Whereas, by Act 251 both the Medical Board and the Psychology Board have regulatory authority over the practice of psychology;



Ms. Jacqueline Lively, Administrative Assistant to the Executive Director at the Psychology Board, handling general business for the office. Ms. Lively always has a kind word of greeting for those attending meetings. The next meeting is in Baton Rouge on January 14<sup>th</sup>.

Therefore, the purpose of this Memorandum of Understanding (MOU) is to establish a relationship which allows both parties to cooperate on matters pertaining to the practice of psychology.”

The agreement gives the benefits as:

**“B. STATEMENT OF MUTUAL BENEFIT AND INTERESTS:**

The parties to this MOU understand it is to their mutual benefit to establish a specific means to allow them to cooperate on all matters pertaining to their shared regulatory role over the practice of psychology. The benefits include but are not limited to a reduction in cost and expense related to regulation; the elimination of duplication of effort and processes; the sharing of resources and information; providing administrative clarity to those being regulated; and providing for the protection of the public.

**C. The Medical Board SHALL:**

1. Engage in cooperative rule making with the Psychology Board on any matters that pertain to the practice of psychology by their respective licensees;
2. Establish procedures for conducting joint investigations with the Psychology Board when complaints arise as to the practice of psychology by MPs who retain their psychology license with the Psychology Board and the practice of unlicensed associates to Medical Psychologists;
3. Establish a mechanism for collaborating with the Psychology Board on disciplinary procedures and sanctions related to complaints about the of practice of psychology by MPs who retain their Psychology license with the Psychology Board;
4. Share necessary information with the Psychology Board when engaging in mutual rule making, discipline, or imposing sanctions relative to the practice of psychology by MPs who retain their Psychology license;
5. Agree to work with the Psychology Board on any other matters that pertain to the practice of psychology as may be beneficial to the respective licensees of both parties.

**D. The Psychology Board SHALL:**

1. Engage in cooperative rule making with the Medical Board on any matters that pertain to the



**Memorandum...**

practice of psychology as may affect MPs who retain their psychology license with the Psychology Board and those unlicensed assistants of MPs;

2. Establish procedures for conducting joint investigations with the Medical Board when complaints arise as to the practice of psychology by MPs who retain their Psychology license with the Psychology Board and the practice of unlicensed associates to Medical Psychologists;

3. Establish a mechanism for collaborating with the Medical Board on disciplinary procedures and sanctions related to complaints about the practice of psychology by MPs who retain their Psychology license with the Psychology Board and the unlicensed associates to Medical Psychologists;

4. Share necessary information with the Medical Board when engaging in mutual rule making, discipline, or imposing sanctions;

5. Agree to work with the Medical Board on any other matters that pertain to the practice of psychology as may be beneficial to both parties.”

The document also stated the scope as:

“G. SCOPE. It is understood that (1) the scope of this Memorandum and the obligations set forth above pertain only to those aspects of the practice of psychology that are particular to Medical Psychologists and not performed by other LSBEP licensees: i.e., the pharmacological treatment and/or pharmacological management of mental, nervous, emotional, behavioral, substance abuse or cognitive disorders and the authority to administer, distribute without charge and/or prescribe drugs as defined in La. R.S. 37:1360.52(2); (2) Notwithstanding anything in this Memorandum expressly or impliedly to the contrary, nothing herein shall be construed to in any way limit the statutory responsibility, authority, prerogative and discretion of either the LSBME or the LSBEP to take whatever action authorized by law that either board may deem necessary and appropriate to protect the public health, welfare and safety.”

The agreement took effect when signed and will be in effect for one year, and extended or amended if the boards agree. Either board can terminate it with a 60-day written notice.

**Attorney General...**

Board in October 2009. (See *PT*, Vol 1, No 1). The board had asked a number of questions regarding Act 251 including questions about simultaneous licenses, who has what authority, and questions about conflict of interest.

Verbatim sections of the Attorney General’s opinion follow:

“**Question 1:** May a psychologists simultaneously be licensed with the Psychology Board and licensed as a medical psychologist with the Medical Examiners Board? More specifically, would revocation of a license or the refusal to grant a license because of licensure with another occupational board violate the constitutional or other legal rights of an individual to hold a professional license?”

The AG office said, “In response to your first question, the Attorney General’s office is not aware of any prohibition against dual licensure. La. R.S. 37:1360.55 requires as a prerequisite that an applicant for a medical psychologist’s license hold a license in good standing to practice psychology issued by the Psychology Board...” [...]

“... Act 251 requires that any individual applying for a medical psychologist’s license after January 1, 2010, ‘hold a current and unrestricted license in good standing to practice psychology issued by the Psychology Board.’ Holding a general psychologist’s license is only a prerequisite to applying for a medical psychologist’s license. Once a psychologist meets all of the criteria set forth in La. R.S. 37:1360.55(B) and is approved by the Medical Examiners Board to receive a license in medical psychology, the individual will be governed entirely by the Medical Examiners Board. Since licensure as a psychologist and medical psychologist is not required, it would be duplicative to maintain a general psychology license after the psychologists has received a medical psychologist license given that the individual will be licensed and regulated by the Medical Examiners Board as a medical psychologist exclusively. Therefore, while it may be unnecessary for an individual to continue to hold a general psychology license once a medical psychologist’s license is approved, it is nevertheless the individual’s choice.”

Another question was:

“**Question 2:** Where a psychologist may maintain dual licensure with the Psychology Board to practice psychology and also the Medical Examiners Board to practice medical psychology, and that psychologist practices psychology under the auspices of his/her

**Attorney General..**

psychology license with the Psychology Board, does Psychology Board retain jurisdictional authority over that license?"

"Act 251 transfers the jurisdiction of a certain class of psychologists, medical psychologists, from the Psychology Board to the Medical Examiners Board after January 1, 2010. See La. R.S. 28:2(12.1) and 37:1360, et seq. As a practical matter, dual licensure as a psychologist *and* medical psychologist is not required by La. R.S. 37:1360, et seq. and may be duplicative after an individual has received a medical psychologists license since that the (*sic*) individual will be exclusively licensed and regulated by the Medical Examiners Board as a medical psychologist. As a result, once an applicant is granted a medical psychologist's license by the Medical Examiners Board and does not concurrently maintain a psychologist's license, the Psychology Board no longer has the authority to regulate the psychologist. La. R.S. 37:1360.55."

"In the event that an individual receives a medical psychologist's license *and* decides to concurrently maintain a general psychologist's license, Act 251 is silent as to which board would have jurisdiction over the psychologist's license. However, if dual licensure is maintained it appears that both boards would retain jurisdiction over their respective licenses. Therefore, in the situation where a professional maintains both a general and medical psychology license, the Medical Examiners Board's jurisdiction would govern the medical psychologist license and



Dr. Phillip Griffin, LPA President Elect speaks with a LAVA (LA Volunteers in Action) representative at the last LPA Annual Convention. Dr. Griffin is in charge of programs for the spring convention to be held April 14-16 in Baton Rouge. He is seeking proposals for workshops, symposia and panels and has extended the deadline for submissions to February 1<sup>st</sup>.

the Psychology Board's jurisdiction would cover the general psychologist license.

The last question covered in the opinion was:

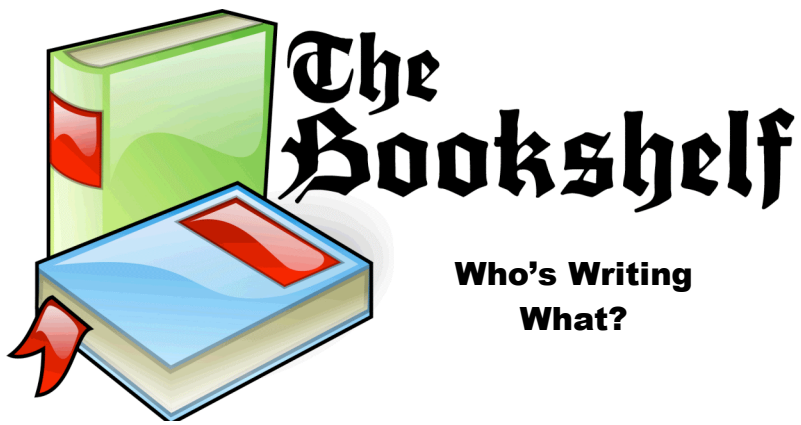
**"Question 3:** Is there a conflict of interest when a psychologist<sup>2</sup> is a member of the Psychology Board and is simultaneously licensed as a medical psychologist with the Medical Examiners Board?

Our office is unable to determine whether a conflict of interest may exist when a psychologist serving on the Psychology Board simultaneously holds a medical psychologist's license with the medical Examiners Board. As previously stated by this office to you in Opinion 09-0216, '[w]hen (*sic*) this office receives question about the legality of holding two or more positions of public office or public employment, our opinion is limited to an examination of the dual office

holding laws, La. R.S. 42:61, et seq. These laws do not generally address conflicts of interest or other ethical issues which may be present in the instant matter. Rather, the propriety of a public board member's conduct is governed by the Louisiana Code of Governmental Ethics, La. R.S. 42:1111, et seq. The Louisiana State Board of Ethics issues opinions concerning the Ethics Code; you may wish to contact the Board of Ethics at P.O. Box 4368, Baton Rouge, LA 70821, telephone: (225) 219-5600, for an advisory opinion addressing your concerns.' We further recommend that you seek an advisory opinion from the State Board of Ethics on this issue."

"[<sup>2</sup>Licensure as a psychologist is a prerequisite for appointment to the Psychology Board under La. R.S. 37:2353(A)(3).]"



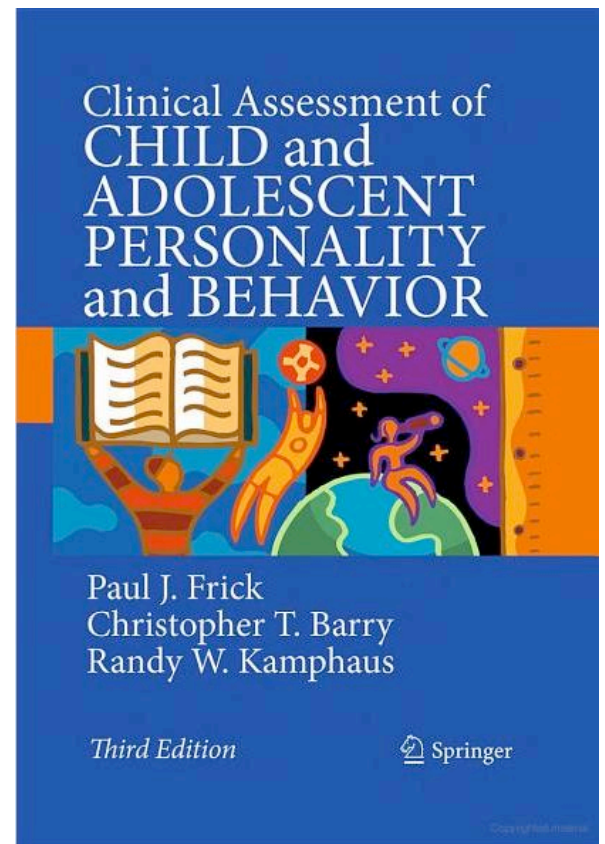


**Who's Writing  
What?**

***Clinical Assessment of Child and  
Adolescent  
Personality and Behavior  
3<sup>rd</sup> Edition***

**Paul J. Frick  
Christopher T. Barry  
Randy W. Kamphaus**

**Springer  
2010**



*Clinical Assessment of Child and Adolescent Personality and Behavior* is the latest edition of the immensely useful graduate text by Dr. Paul Frick, University Research Professor and chair of the Psychology Department at University of New Orleans. Coauthors are Dr. Christopher Barry of the University of Southern Mississippi and Dr. Randy Kamphaus, Dean of Education at Georgia State University.

The 3<sup>rd</sup> edition of *Clinical Assessment* fulfills its promise of providing an uncluttered, straightforward review and critique of current techniques. The authors embed their review in a lucid, understandable description of the theoretical and applied context that psychologists must always keep in mind.

Dr. Paul Frick told the *Times*, "This book was based on all three authors' frustration in teaching courses on the psychological assessment of children and adolescents, finding that existing textbooks were not serving us well. Most of them were encyclopedic, edited volumes that were uneven in the quality across chapters..." And he continued, they were "...not geared either in format or level of presentation for beginning graduate instruction."

In the preface of the text, the authors note that the goal of psychological assessment is to measure constructs that have important clinical implications. "But what is important from this conceptualization," they write, "is that our view of psychological assessment is not test-driven but construct-driven." And, "...the most critical component in choosing a method of assessment and in interpreting assessment data is understanding what one is trying to measure."

*Clinical Assessment* provides an ease of delivery that makes this text perfect for psychologists in training. The writing style is clear and free from meaningless jargon. The authors strip everything down to the essential elements of the problem. Echoing throughout the text are the themes of evidenced-base practice and construct validity and informed use of measurement results.

Experienced psychologists who find it difficult to keep pace with the rapidly changing landscape of child and adolescent assessment (and who doesn't) will discover *Clinical Assessment* to be an excellent source of authoritative information and advice that can be quickly referenced without having to wade through muddy water.

The coauthors make a very convincing first-string team of experts. Barry is the specialist. Kamphaus is an expert in test development and author of BASC-2 (Behavior Assessment System for Children-2).

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Paul Frick is a leading authority in child and adolescent diagnosis and behavior. “Currently I am serving on the ADHD and Disruptive Disorders Workgroup for the 5th Edition of the Diagnostic and Statistical Manual of Mental Disorders,” he told the *Times*, “which is due to be published by the American Psychiatric Association in May of 2013.”

His presentation at APA in August was a convention highlight, “Possible changes to the criteria for the Disruptive Behavior Disorders for the DSM-V: Rationale and implications.” He is the editor of the *Journal of Clinical Child and Adolescent Psychology*, and also president of the Society for the Scientific Study of Psychopathy. His research in children and adolescent psychology has been funded by the National Institute of Mental Health, Office of Juvenile Justice and Delinquency Prevention, and John T. and Catherine D. MacArthur Foundation.

*Clinical Assessment of Child and Adolescent Personality and Behavior* covers a lot of ground efficiently. Chapters are formatted consistently with questions in the introduction and a summary of concepts at the end. Descriptions and discussion of critical issues are supported by references to key research, diagnostic contexts, and evidenced-based practice decisions.

In Part I, “Basic Issues,” authors give the overriding framework in a succinct presentation. It rings throughout the text: psychologists must understand tests, but also must understand what they are trying to measure, the context, and threats to validity. Chapters include topics of historical trends, measurement issues, classification and developmental psychopathology, standards and fairness, and planning the evaluation and rapport building.

The next nine chapters, Part II “Assessment Methods,” include reviews and critiques of self-report inventories, parent/teacher rating scales, behavioral observations systems, peer-referenced techniques, projective techniques, structured interviews, history taking methods, family assessments, and adaptive behavior scales. Each chapter format gives the context and relationship to the construct, and then the authors review current tests, reliability, validity, norms, and a list of strengths and weaknesses of the measure and potential threats to validity.

In Part III, “Advanced Topics,” the authors cover assessment of attention deficit, disruptive behavior disorders, depression, anxiety and autism spectrum disorders. The chapters on “Integrating and Interpreting

Assessment Information,” and “Report Writing,” again call upon the reader to use a broad footing in psychological constructs, critical-thinking, as well as practical and common-sense views.

What did Paul enjoy most about writing the book? “The most enjoyable aspect of writing this book,” Paul told the *Times*, “is it forces us [the authors] to stay up-to-date on the most current assessment tools used in the psychological testing of children and adolescents. This is also the most difficult aspect of writing this type of textbook. There are always new assessment measures being developed and older ones being updated; thus, such textbooks require frequent revisions.”



Dr. Paul Frick is Chair at University of New Orleans.



## Join Up...

### The Louisiana Psychological Association (LPA)

Established in 1948, LPA is the official state association for psychology. It is an APA affiliate and listed with the state as a non-profit corporation. Kelley Ray and Phillip Griffin are president and president-elect.

**Mission:** "The object of LPA shall be to support and advance psychology as a science, as a profession, and as a means of promoting health, education, and human welfare."

**Members:** LPA has 257 members, mostly practicing psychologists, including clinical, school, neuropsychological, medical, and a few academic psychologists. (Some non-members call LPA "the clinician's organization.") Like APA, LPA has been losing scientists for many years.

**Dues:** At \$255 for full members, dues are in line with similar state associations. First year members get a discount at \$110. The second year dues are \$180. Associate members are \$75 and students, \$20. This year 53% of the dues go to lobbying efforts.

#### Some Potential Benefits:

- Members can coordinate with others to watch or propose legislation. The new lobbying and governmental affairs attorney is Mr. Kevin Hayes of Adams and Reese (\$2,000 per month).
- A web page with links and information for the public; includes searchable database for the public, i.e., "Find a Psychologist."  
(<http://www.louisianapsychologist.org/index.cfm>)
- Listserv for members' questions, referrals, or discussions
- Continuing education workshops, annual meetings and fall conference
- An Executive Director, Ms. Gail Lowe, who is very helpful, efficient, and accessible
- Membership carries with it some prestige



Executive Council members of LPA enjoy lunch at the Fall Meeting: L to R: President, Dr. Kelley Ray, Directors Dr. Gail Gillespie and Dr. Kim Van Geffen, and President-Elect Dr. Phillip Griffin.

#### Organizational Style:

LPA's organizational style is mostly hierarchical and fairly formal. Some of the formality perhaps is required for quality assurance. LPA has a responsibility to the public to help with election of board members. Also, since referrals are made between members and for the public, standards regarding the behavior of its members are required. Hierarchical style organizations tend to be good at control but can be sluggish and lack innovation and creativity, and have difficulty adapting to change or crisis. LPA seems to suffer from these problems.

#### Current Situation:

LPA is struggling to adjust to the internal conflicts over the passage of Act 251. Last year the president asked APA for a small grant for a consultant but APA refused. Nothing else followed. So problems continue to smolder and occasionally burst into flames. But there have been some positive changes: a more representative council, better internal communications, a member opinion survey. However, intense focus on RxP for well over a decade has drained LPA's human and financial resources. The webpage is dated, the "Public Information" section focuses on medical psychologists, public relations efforts appear paper thin, and nurturing of new leaders is absent. Unfortunately LAMP still appears to have influence with LPA leaders.

**Recommendation:** Psychologists, psychological scientists, professors, students and medical psychologists should join LPA. The organization is more "unfrozen" than it has been in years. Clear-headed thinkers can make important contributions.

## Join Up...

### “Louisiana Academy of Medical Psychology” or LA Academy of Medical Psychologists–PAC (LAMP)

LAMP is the political powerhouse led by Jim Quillin. LAMP, supported by LPA and grants from APA, was responsible for the 2004 law giving psychologists the authority to prescribe, something only one other state has been able to accomplish.

LAMP also negotiated the move of MPs to the medical board, a move that should allow MPs to compete in the marketplace with psychiatrists. The director of the medical board hinted that there would be more perks in store for these new “hybrid” professionals who practice both psychology and medicine.

The legal status of LAMP is unclear. LAMP does not appear to be registered under the secretary of state under that or a similar name. “LA Academy of Medical Psychologists” does exist legally, filing reports under the State Ethics Board as a PAC.

**Mission:** LAMP has very little public face but its mission appears to be to promote what the leaders feel is most important for the career advancement of medical psychologists.

**Members:** Membership appears to be somewhere between 36 and 60.

**Dues:** Yearly dues are \$2500. Sources indicate that a portion of dues pay for some continuing education. Twenty-five percent is required by Act 251 to be paid to LAMP.

Whether these fees are dues or political contributions is unclear. The money given by members is listed on the PAC reports, but some MPs have stated that they pay \$2500 in dues.

Also unclear is if a PAC can offer continuing education paid for by political contributions, or if those MPs who are not members of LAMP are contributing to a PAC when they purchase continuing education from LAMP, as required by 251.

**PAC:** LAMP is the only association of the three that has (or is) a political action committee. Currently they contract with the very successful lobbyists, Courson & Nickel (\$6,000 per month). According to sources, LAMP may have over \$100,000 in reserve to protect its interests.

### Some of the Potential Benefits:

- Political action and influence unmatched in the state and perhaps even in the nation; a leader committed to political action
- Continuing education tailored to the needs of MPs
- Several listserves
- A tight-knit, heterogeneous group with similar needs, strong cohesion and internal support for one another
- Money in reserve

### Organizational Style:

Appropriate to its political mission, LAMP has a competitive, somewhat military style. Decision-making is located in a small core group and information flow is restricted. Competition seems to guide the activities, with the goal of career enhancement for medical psychologists by way of political and regulatory influence.

Consistent with a competitive, goal-oriented culture, members appear quite loyal to their leaders. MPs have a strong identity and in-group culture. They have been through a lot together and those who have been along for the full ride have forked up as much as \$30,000 of their own money for the cause, also contributing to strong cohesion.

### Current Situation:

LAMP’s unilateral decision to negotiate Act 251 and trade psychology’s RxP for a place under medicine is likely to continue to cause problems for them. Act 251 upset a number of national groups, and galvanized a subset in LPA. These problems are unlikely to disappear.

However, LAMP appears to lack the inclination or the skill set to mend any fences or build any bridges. Hierarchical and competitive organizations are better at fighting and win-lose frames, including the stealth that LAMP is famous for, than promote consensus or win-win solutions.

**Recommendation:** Medical psychologists should join LAMP. Leaders and members should clear up the confusion, as they are now accountable to medicine, psychology and the public. They should push for a maturing of organizational and leadership style.



## Join Up...

### Grassroots of Psychology in Louisiana (Grassroots)

"Grassroots" emerged in reaction to Act 251 in 2009 and is listed with the state as an LLC. Frustrated psychologists, mostly LPA members who viewed the actions of LAMP as unacceptable, and who also were angry about LPA's lack of response, organized the volunteer, loosely defined, initiative-based group. Michael Chafetz was the leader for the first year and Alicia Pellegrin is the current president.

**Mission:** The group formed to address concerns about 251 and LPA reform. Over time the group has added other interests: connection to psychological scientists, diversity in the state association, a public relations and media program.

**Dues and Membership:** Membership is free. Psychologists, psychological scientists, professors and students can join. "Initiatives" are funded by voluntary donations on a case-by-case basis. Membership is somewhere around 100.

#### Benefits:

- Legal direction as needed from attorney Greg Frost
- A Listserv
- Connections to the larger community: Grassroots and Susan Dardard have developed several initiatives to promote connections with scientists and professors (Pro-Psych Party, Science-to-Practice Alumni Groups, a Scientific Program at LPA's Fall meeting.)
- Teleconferencing for meetings and think tanks
- Website (with a weather report!) [www.grpla.com](http://www.grpla.com).

#### Organizational Style:

The organizational style is open, participative, and innovative. Highly flexible, the decisions and initiatives are made by consensus using the available talents and knowledge of whoever shows up and has interest. At present the group process is fluid and unstructured, at times lacking in follow-up, back-ups, or administration of details.

#### Current situation:

Grassroots continues to serve its members by giving them a voice. The innovative atmosphere is refreshing, although a good deal of maturing into a more cohesive organizational structure will be needed in the future if the organization continues.

The group has a strong interest in reconnecting with psychological scientists and professors, something that appears missing in either LPA or LAMP, and could give Grassroots steam well after issues about 251 are resolved. While changes in LPA could make the need for Grassroots redundant, there may also be a real need for a free, innovative group that works outside of the more formal style of LPA, and is not focused on legislative self-interest.

**Recommendation:** Psychologists, professors, scientists, medical psychologists, and students should join Grassroots. The group will need a more complete organizational structure to facilitate goals and interests as it matures.



### Dr. Nemeth Begins Term as APA Rep

Dr. Darlyne Nemeth was elected by members of the Louisiana Psychological Association to be their APA Council Representative last spring. Her term begins today, January 1<sup>st</sup>. Dr. Nemeth replaces Dr. Linda Upton who was appointed by 2009 LPA president Dr. Judith Levy to fill the position left vacant by the resignation of Dr. Jim Quillin.

Dr. Nemeth noted to the *Times* that she will be attending her first orientation meeting as a representative in Washington, D.C., on February 18<sup>th</sup> through 20<sup>th</sup>.

## Up-Coming Events:

### What Makes People Happy?

1/14/11 – Shreveport, The Holiday Inn,  
1/28/11 – Baton Rouge, The Marriott,  
2/11/11 – Lafayette, The Holiday Inn

Professional Training Resources

[www.professionaltrainingresourcesinc.com](http://www.professionaltrainingresourcesinc.com)

### Overcoming Adversity & Creating Value in the Global Economy

Mid-Winter Conference,  
February 4-7, Scottsdale, AZ  
Society of Consulting Psychology, APA Div 13

### Capturing the Wisdom of Practice and the Rigor of Research: Discovering the Best Health Promotion Strategies

21<sup>st</sup> Annual Art and Science of Health Promotion Conference  
March 21-22 and 23-25, Colorado Springs, CO  
American Journal of Health Promotion

### 63<sup>rd</sup> Annual Fall Convention

Louisiana Psychological Association  
April 14-16  
Baton Rouge



This enviable footwear belongs to Dr. Darlyne Nemeth, attending the LPA bylaws revision last year.

## The Psychology Times

The *Psychology Times* is provided as a community service for those in the practice and science of psychology in Louisiana and related individuals and groups. The *Times* offers information, entertainment, and networking for the Louisiana psychological community.

None of the content is intended as advice for anyone.

### Resolutions...

the goal; get social support, reward yourself, and so on.

But psychologists who study the “automatic unconscious” have their own twist. In *The New Unconscious*, Peter Gollwitzer presents evidence for improving goal success by engaging the automatic unconscious. “Instilling automatic self-regulation” he explains, as a second step to the goal, creates an “instant habit.” He calls the technique “implementation intentions.”

The format for an implementation intention (II) is “If situation X is encountered, then I will perform behavior Y!” An II is created to expand a goal, but it is different from the goal, which is of a format, “I intend to do Z.” For example, “I intend to exercise more” is a goal. Adding the II develops the link, “When I watch the evening news, I will do my squats!” The II engages automatic actions. Gollwitzer writes “...automatic action control comes in handy as established routines linked to a relevant context release the critical goal-directed behavior immediately, efficiently, and without a conscious intent.”

Researchers have shown that self-regulation is like a muscle; it wears out when we use it. We only have so much “will power” or self-control to apply to our goals. However, implementation intentions side-step this problem, probably because conscious resources are not involved. Research shows that these “automatic habits” are less impacted by ego-depletion, distractions, or stress, and less influenced by our bad moods or low self-esteem.

So add an II to a New Year's resolution and engage the adaptive unconscious. And see for yourself if you agree with the research: we don't have to change ourselves or change the world, in order to succeed at changing a behavior.

Happy New Year.

