



Detail from A Midsummer Night's Dream, Phunny Phorty Phellows 1883 invitation
(Courtesy Tulane Public Relations)

“Throw Thee Something Mister!” Shakespeare & Mardi Gras at Tulane

by Michael Strecker
Tulane Public Relations

Shakespeare-inspired Mardi Gras ball invitations, call out and admittance cards, dance cards and parade bulletins dating from 1870 to 1932 will be on view through March 30 at Tulane University's Louisiana Research Collection.

"Welcome Merry Shrovetide: Shakespeare on Parade," will include Shakespearian designs from the krewes of Comus, Consus, Disciples of Thespis, Elves of Oberon, Falstaffians, Phunny Phorty Phellows and Twelfth Night Revelers.

The exhibition is free and open to the public Monday through Friday, 9 a.m. to 5 p.m., and Saturdays from 9 a.m. to 1 p.m. in the Louisiana Research Collection's exhibition gallery in Jones Hall, Room 200.

Shakespeare's works and characters, from *A Midsummer's Night's Dream* to Falstaff to *The Merry Wives of Windsor* and more, have long inspired Carnival krewes with their themes of misrule and merriment, pleasure and masquerading. The exhibit will also feature Rex ducal medals and souvenir pins from the krewes of Amphictyons, Argonauts, Athenians, Atlanteans, Comus and Consus.

The Louisiana Research Collection at Tulane preserves the largest Carnival collection in the world and recently completed a two-year project to place more than 5,600 original float and costume designs from Carnival's "Golden Age" online.

Support for the Louisiana Research Collection's Carnival holdings is provided, in part, from a bequest from Charles L. "Pie" Dufour.

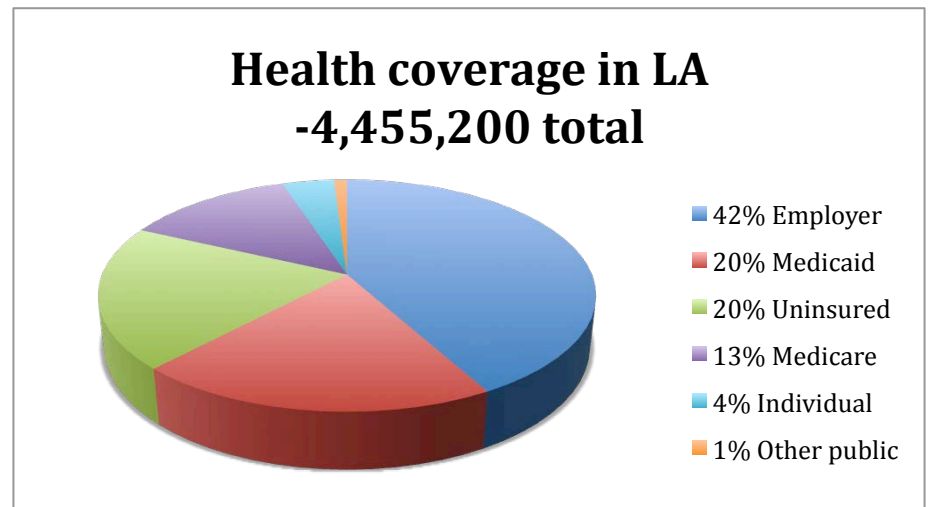
Magellan's Decisions Draw More Concern Among Psychologists

Last month representatives from the Louisiana Psychological Association asked for explanations about the reimbursement schedule of Magellan Health Services, the company now managing behavioral health services for the state.

The request came after a review of Magellan's 2012 reimbursement schedule, used as a guide for ongoing decisions and updates regarding reimbursements to behavioral health providers, specifically physicians, psychologists, master's professionals, and nurses.

Psychologists from the state psychological association (LPA), Dr. Jesse Lambert and Dr. Alicia Pellegrin,

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Based on information from Kaiser Foundation, Louisiana has 1,202,000 people living in poverty out of a total state population of 4,455,200. Kaiser reports that 42 percent of Louisiana citizens have health insurance from their employers, while 20 percent are covered under Medicaid and 13 percent covered with Medicare. Twenty percent are uninsured.

UNO Biopsychologists Discover Way to Stall Huntington's Disease

Dr. Gerald LaHoste and his team of researchers from the Applied Biopsychology Program of the Psychology Department at University of New Orleans (UNO) have discovered a way that could help delay behavioral decline in patients with Huntington's Disease, an incurable, debilitating and fatal illness.

Working with genetically altered mice with the gene for Huntington's, the researchers discovered that the role of another gene, named Rhes, is necessary for the symptoms of Huntington's to appear. In their research they found that if this second gene was inhibited, there was a significant delay in the emergence of behavioral symptoms of the disease. The research, "Attenuation of Rhes Activity Significantly Delays the Appearance of Behavioral Symptoms in a Mouse Model of Huntington's Disease," is published by Public Library of Science, PLoS One.



Gerald J. LaHoste, Ph.D.
(courtesy photo)

Huntington's is an inherited disease affecting 3 to 7 of 100,000 people of European ancestry. It causes a progressive breakdown of cells in the brain, resulting in many debilitating effects on a person, including movement problems, cognitive disability, and dementia. Medications are used to help manage the symptoms of Huntington's and deterioration of functioning that occurs over 10 to 15 years, but currently there are no treatments that prevent the physical and mental decline.

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Dr. David Kidder Ahead of Curve In Outcomes-Informed Research

Dr. David Kidder is one of a growing number of clinicians who uses new methods not only to prove that his treatment works, but to help him and his client make important adjustments during the therapy process. With this method, called outcomes-informed care, Dr. Kidder and others like him, not only provide better services but can help those at risk of a poor therapy

result, such as prematurely dropping out of the treatment.

The *Times* talked with outcomes researcher Dr. Jeb Brown of the Center for Clinical Informatics. He explained that high outcome therapists, the clinicians who consistently score higher than others on their client outcomes measures, do the same work better and

they often do it faster, with fewer sessions, when compared to low outcome clinicians. "High outcome performance networks are money in the bank," for those who pay for services, such as managed care companies, he explained. "There is an economic case to make," along with the quality of patient care issues, he said.

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Ψ *We Remember*

Dr. Ivory Lee Toldson

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Editorial Page

Credentials or Job Performance?

Looking at the Magellan reimbursement schedule from a simple business perspective brings out a few concerns. What people (in this case the Mallegan and our state government) are willing to pay for tells us a lot.

Some specifics jump out. One is the 10-minute office exam, which appears to still be an outpatient therapy service, but only provided by physicians. Reimbursement is \$25.73. According to the AMA, in this time the physician will conduct three required components: "A problem focused history; A problem forced examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and /or family's needs."

This could be named the "Dr. Laura treatment method." It might work with a cold or a sprained ankle, but not with psychological needs.

Then there is the low reimbursement for "Health and behavior intervention" which addresses health issues like high blood pressure, without a psychiatric component. Pay is low: \$15.30 for the physician and \$12.24 for a psychologist, for 15 minutes. But also, still too short. Who can relate to anyone at a meaningful psychological level in 15

minutes? The financial incentives of health and behavior (\$61.20 per hour) vs. a more medical model (\$154.20 per hour) may well drive everyone toward symptom treatments.

I'm concerned about how the diagnostic decisions are being made. Psychological testing is reimbursed at a fairly low rate (even when physicians are doing it!). But the use of the "diagnostic interview" continues strong. We know from IO psychology that the interview has poor predictive validity. Data gathered this way tends to be disproportionately influenced by negatives, framing, anchors, and so on. Researchers have even found that adding a 2-hour interview to a selection battery actually *reduced* predictive validity.

The business model tells us one other thing about this reimbursement schedule. The taxpayer is paying for something other than job performance.

If you buy your psychotherapy from a physician it costs more than if you buy it from a psychologist. And if you buy it from a psychologist it costs you more than if you buy it from a social worker or mental health counselor or nurse practitioner. On what scientific grounds does Magellan make these decisions?

For an article in this issue of the *Times* I had the pleasure of reporting on David Kidder's stellar performance on outcomes measures. While tracking down the story I was privileged to speak with the premier research scientist in this area, Dr. Jeb Brown.

Dr. Brown generously shared a wealth of information about outcomes-referenced research. His work includes very large and very detailed data bases. He has analyzed this multivariate data with new techniques that allows fresh, new understanding about where the variance in psychotherapy outcomes originates.

Yes, he said, it is in fact the *person* who does the therapy that makes all the difference in outcomes.

But it is not the type of therapy, the age, the years of experience, or the *credentials*.

Dr. Brown also shared with me that very often performance based approaches, like outcomes-referenced care, are not very popular with many practitioners or state associations.

But, as scientists, we should let the facts and not politics guide our decisions.

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Dr. Hannie Points to Differences, Science or Religion?

(Editors Note: In a January 15, 2013, Letter to The Editor published in the Baton Rouge Advocate, Dr. Tom Hannie explained philosophical issues for the community. He gave the Times permission to reprint here.)

Letter: Science is science, religion is religion

A recent letter called for our schools to no longer teach theories such as evolution, creationism or intelligent design in our public schools. Others call for the teaching of all these theories.

Again, many have missed the point. We must teach science to our children. Science includes building theories to explain the data. In science class, different theories should be taught based on the evidence for each. In this case, there is great scientific evidence for evolution. There is zero scientific evidence for creationism and intelligent design, which fail to meet the criteria to be considered scientific concepts.

If a school is private and thus may teach religion, teaching creationism and intelligent design is acceptable. Hopefully science and religion are not confused there. We are concerned about our public schools, which are prohibited from teaching religion by our Constitution.

Evolution is within science.

Creationism and intelligent design are within religion.

Maybe more important than teaching our children biology is teaching them the difference between science and religion, as it is obvious that too many of our citizens haven't learned the difference.

Tom Hannie, retired psychologist
Baton Rouge

Below: Dr. Hannie and his famous LSU decorated Mini.



Magellan’s Decisions Draw More Concern Among Psychologists, Cont’d

opened discussion with association members after they noticed that Magellan was planning to reimbursement medical psychologists slightly more (\$49.38) per hour than other psychologists (\$43.21) for the same service of psychological testing.

Dr. Pellegrin said to the *Times* that she and Dr. Lambert are looking into these and other possible issues with Magellan’s plan.

Another problem the psychologists identified was that some services, such as psychoanalysis, multiple-family group therapy, some types of biofeedback, hypnotherapy, interpretation or explanation of exams/reports, were not included to be reimbursed if provided by a psychologist or counselor. However, these services were reimbursed if provided by a physician.

Another issue that drew questions from community psychologists was that in Magellan’s schedule physicians are reimbursed for psychological testing.

Magellan’s schedule indicates that while master’s professionals are reimbursed for a number of services, some of these, such as individual psychotherapy of 30 minutes, appear to be limited to substance abuse. The *Times* spoke briefly with a member of the counselor’s association who said she was looking into the issue.

Last year Dr. Jesse Lambert explained to the *Times* concerns about a related problem. He noted that forensic psychological evaluations, typically those forensic assessments requested by the Department of Child and Family Services to help answer legal questions, were being inappropriately processed through the behavioral health system.

Lambert was named by LPA in fall 2011 to head a task force to look more closely at concerns that forensic and legal assessments had been viewed as health screening tools, rather than as an aid to legal decision-making. Lambert explained to the *Times* that he and this team were concerned that the placement of forensic services under Magellan was going to create quality problems in forensic services for the citizens in this group who have legal matters. Lambert also explained concerns about fewer referrals for forensic psychologists.

In September 2011, Magellan was named the Behavioral Health Statewide Management Organization (SMO). As the managing organization, Magellan falls under the Louisiana Behavioral Health Partnership, which was created by the Department of Health and Hospitals (DHH). The Partnership incudes four state agencies: Office of Juvenile Justice, Department of Children

and Family Services, Department of Health and Hospitals and the Department of Education.

According to the government website, “Magellan manages behavioral health services for Medicaid and Non- Medicaid eligible populations served by the Office of Behavioral Health (OBH), Department of Children and Family Services (DCFS), the Department of Education (DOE) and Office of Juvenile Justice (OJJ) and funded through state general funds and block grants, including services for individuals with co-occurring mental health and addictive conditions.”

The Partnership is designed to serve: 1. Children with extensive behavioral health needs, either in or at-risk of out-of-home placement; 2. Medicaid-eligible children with medically necessary behavioral

health needs who need coordinated care; 3. Adults with severe mental illness and/or addictive disorders who are Medicaid eligible; and, 4. Non-Medicaid children and adults who have severe mental illness and/or addictive disorders. This is according to state website communications.

Based on information from Kaiser Foundation, Louisiana has 1,202,000 people living in poverty out of a total state population of 4,455,200. Kaiser notes that 906,800 people are uninsured and 13 percent of the population are adults with disabilities.

Kaiser reports that 42 percent of Louisiana citizens have health insurance from their employers, while 20 percent are covered under Medicaid

and 13 percent covered with Medicare. Twenty percent are uninsured.

Additionally, with the next stage of implementation of the Affordable Care Act some observers say that more people will be included in the Medicaid program. According to Betsy McCaughey, PhD, former Lt. Governor of New York, Medicaid roles will increase on January 1, 2014 when the employer mandates take effect. She calculates that at that time an addition of \$1.79 per hour will be added to the cost of a full-time worker. Some expect this will cause small business owners to shift to part-time employees and drop health coverage,

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Service	Medical Doctor	Psychologist and Medical Psychologist	Master’s Professional	Advanced Practice Reg. Nurse
Interactive psychiatric diagnostic interview	\$117.31	\$93.85	\$82.12	\$82.12
Individual psychotherapy 20 – 30 minutes	48.35	38.68	33.85 (substance abuse)	33.85
Ind. psychotherapy 20-30” w/medical management	53.89	43.11 (Med Psychologist)	--	43.11
Individual psychotherapy, 45 to 50”	68.06	54.45	47.64 (substance abuse)	47.64
Ind. psychotherapy, 45-50” with medical mgt	76.10	60.88 (Med Psychologist)		60.88
Psychoanalysis	59.84	--	--	--
Family psychotherapy without patient	63.53	50.82	47.47 (substance abuse)	47.47
Family psychotherapy with patient	78.80	63.04	55.16 (substance abuse)	55.16
Interactive Group Psychotherapy	25.12	20.10	17.58	17.58
Pharmacological management	39.48	31.58 (Med Psychologist)	--	31.58
Hypnotherapy	77.07	--	--	--
Psychological Testing	61.73	43.21 (Psychologist) 49.38 (Med. Psych.)	--	--
Neuropsychological Testing	77.45	61.96	--	--
Health & behavior intervention (no psychiatric illness) 15”	15.30	12.24	--	--
Office Visit: Evaluations & Management Services for New Patients, 10”	25.73	--	--	--
Office Consultation: Eval & Mgt , new and established patients --15” expanded, low complexity	43.43	--	--	--

Above: Selected items from the 2012 reimbursement schedule used to plan services in the state. Some psychologists in the community asked for explanations from state decision-makers about the difference in fees for psychological testing, depending on if the psychologist was a medical psychologist. Some also asked about the lack of reimbursement for certain services. This 2012 list did not include changes in coding that went into effect in 2013.

Magellan, cont'd

so that workers in this group will likely seek out government coverage.

Some estimates suggest that in 2014 nearly 50 percent of those covered will come through government sources.

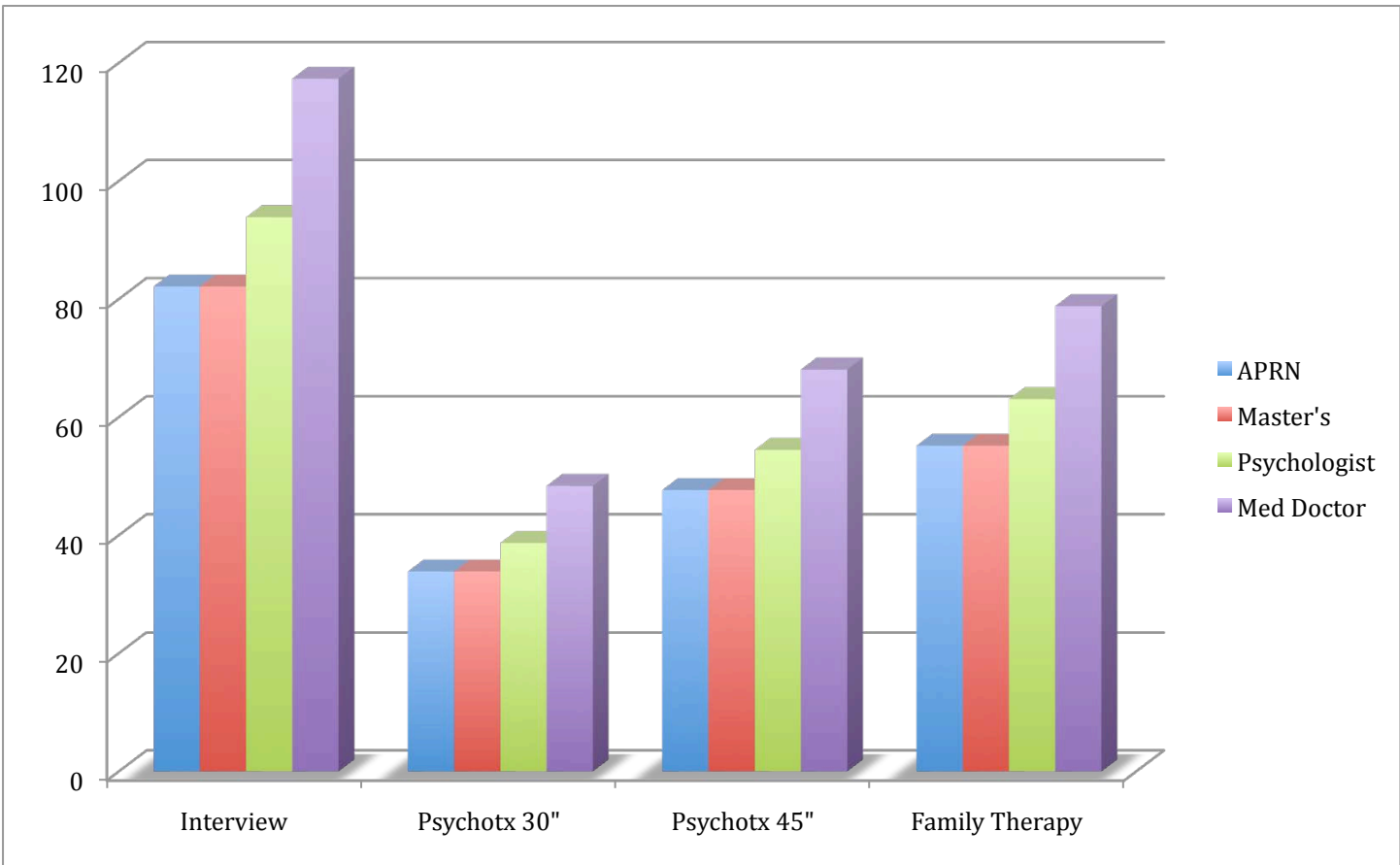
The 2012 Magellan reimbursement schedule also illustrates general pay differences between the professionals. For example, for a 30-minute psychotherapy session, medical doctors are reimbursed \$68.06, psychologists are reimbursed \$54.45, and master's professionals are reimbursed \$47.64.

The *Times* compared average reimbursements for some selected services and found that providers benefit more financially if they deliver shorter services, such at the 10-minute evaluation, when compared to a 50-minute psychotherapy service.

Additionally, service categories having to do with behavior and health offered the lowest reimbursement rates, while pharmacological management are reimbursed at the highest hourly rates.

Magellan is similar to other states in this approach, based on reimbursement sheets posted on the web for New York City government.

In communications from the state to explain Magellan's goals, state sources note: "In their role as the SMO [State Management



The *Times* staff looked at a comparison of fees for different disciplines: advanced practice registered nurse (APRN); master's professionals which include social workers and counselors; psychologists; and medical doctors. The graph compares who receives the higher reimbursement for the same service. The diagnostic interview generally takes an hour or more so the reimbursement is higher overall, as is the family therapy service.

Organization], Magellan is improving access, quality and efficiency of behavioral health services for children not eligible for the Coordinated System of Care (CSoC), and adults with Serious Mental Illness (SMI) and Addictive Disorders.

And they note in web communications, "selecting Magellan as the SMO, is necessary to assist with the State's system reform goals to:

1. Foster individual, youth, and family-driven behavioral health services;
2. Increase access to a wider array of evidence-based home- and

community-based services that promote hope, recovery, and resilience;

3. Improve quality by establishing and measuring outcomes;
4. Manage costs through effective utilization of State, federal, and local resources;
5. Foster reliance on natural supports that sustain individuals and families in homes and communities."

Dr. Alicia Pellegrin is currently serving as Legislative Chair for the Louisiana Psychological Association and can be reached for further information through the association.

Wants to engage community, says Director Psych Board To Develop Long-Range Plan in March

The psychology board will hold an open meeting next month to develop and continue its work on a long-range plan. The meeting is scheduled for Thursday, March 14, 2012 at Louisiana Municipality Administration Building, 700 North 10th Street, Baton Rouge.

"The agenda is not posted because it is not final," Executive Director Kelly Parker said to the *Times* last week. "However, I have a working agenda and it includes Telepsychology, Multi-level Licensure, child abuse reporting, professional wills, continuing education, and new board member orientation." Former board members have been invited to attend, and some have indicated that they will be coming to the meeting, said Parker.

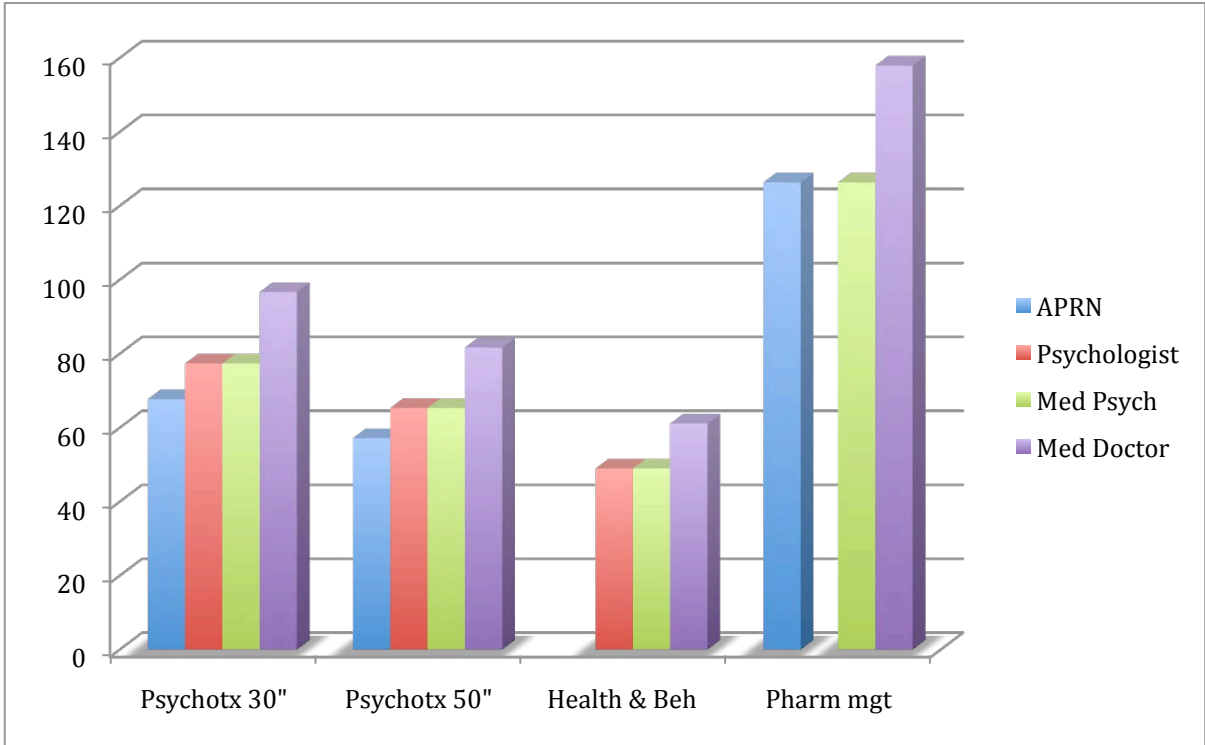
"We really want to hear what the psychology community has to say about these issues. We want to reach out and get their opinions to guide the decision-making," she said.

She explained that in 2012 the board put together a survey to ask psychologists' views on multi-level arrangements or having two levels of licensure, about APA approved programs, and supervision requirements. The board is hoping to receive information about what matters most to psychologists, especially in light of the upcoming long-range planning, Parker explained.

The Association of State and Provincial Psychology Boards encouraged its members to engage the community through a series of presentations, with a goal of public education, Parker said.

Ms. Parker also said that the psychology board is offering presentations around Louisiana this year, including colleges and universities. "We're making every effort to communicate with the community. We're offering board presentations around the state about how to get licensed, and how to stay licensed."

She explained that the board members hope to help psychology students at the various colleges and university to "create a plan to get their license." She said that if they know their options and they do an early plan, "before, instead of after the fact" making educational decisions, "it would be better for the psychology students.



Above is a general analysis of the fee per hour that is possible for the type of service delivered. The *Times* selected certain services, such as various 30 and 50-minute psychotherapy sessions for comparisons by likely average hourly reimbursement. This perspective shows slightly less reimbursement for the 50-minute psychotherapy session than the 30-minute, for all disciplines. Highest average hourly pay comes from medication management services, which over a range of types of services are typically shorter and more highly reimbursed. Health and behavior codes are reimbursed at a lower average hourly rate.

Report goes to Senate

BA Study Commission Holds Final Meetings in Jan

Behavior Analysts Licensure and Regulation Study Commission met twice in January to finalize their recommendations in a report due to the Louisiana Senate on February 1, 2013. The commission was established by Senate Resolution 159 authored by Senator J. P. Morrell, who led opposition to a failed measure proposed by the state psychology board to place behavior analysts under the state psychology board.

In the January 25, 2013 meeting of the Commission, held at the Bienville Building in Baton Rouge, the group reviewed the proposed changes to their report, and made final corrections. The meeting was relatively short, about 45 minutes, compared to previous meetings.

Several quick decisions were made and one longer discussion occurred regarding the wording for an exemption about visiting Behavior Analyst Academic Professionals.

The members reviewed some changes and approved the report, which included in the executive summary, "This regulation regards only those individuals who perform behavior analysis and who are not licensed by another regulatory authority and/or those who hold themselves out as a Louisiana Licensed Behavior Analyst, Behavior Analyst, Louisiana Licensed Assistant Behavior Analyst or Assistant Behavior Analyst."

The report is due February 1 to the Louisiana Senate.

The report gives a definition of Applied Behavior Analysis and identifies the Regulatory Authority, probably the most debated of the decisions made by the group, as the Louisiana Licensed Professional Counselors Board of Examiners (LPC board).

The report also sets out the scope of practice for the practice of behavior analysis as:

"... the design, implementation, and evaluation of systematic instructional and environmental modifications by a behavior analyst, to produce socially significant improvements in behavior. It includes the empirical identification of functional relations between behavior and environments. It uses direct observation and measurement of behavior and environment, the empirical identification of functional relations between behavior and environmental factors, known as functional assessment and analysis. Applied behavior analysis interventions are based on scientific research and the direct observation and measurement of behavior and

environment. They utilize contextual factors, establishing operations, antecedent stimuli, positive reinforcement, and other consequences to help people develop new behaviors, increase or decrease existing behaviors, and emit behaviors under specific environmental conditions."

The recommended scope of practice goes on to note, "The practice of behavior analysis expressly excludes psychological testing, neuropsychology, cognitive therapy, diagnosis of psychiatric conditions, psychotherapy, sex therapy, psychoanalysis, hypnotherapy, and long term counseling as treatment modalities."

Also defined is the title "Licensed Behavior Analyst," "Licensed Assistant Behavior Analyst," and "Applied Behavior Analyst

Direct Contact Technician," all to be regulated by the LPC board as regulatory authority, according to the report.

The terms BACB, BCBA, BCBA-D, and BCaBA are defined as being certified by the national accreditation agencies.

According to the report, the regulatory structure for the behavior analysts will expand the LPC board by two people, and who will also compose part of a subcommittee under the board. The subcommittee will be four individuals, appointed by the governor.

The report indicates, "The Title and Practice Act governing licensure of behavior analysts in Louisiana should recognize the practice of applied behavior analysis within the scope of services provided by the regulatory

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Staff photo M.Dooley

Members of the BA community attended the Study Commission during the second half of 2012. Above are (L to R) Renee Guidry, BCBA, Cassie Bradford, BCBA, Janice Huber, BCBA, and Dolleen Day-Keohane, PhD, BCBA-D. Ms. Huber, BCBA, is Secretary for LaBAA, the Louisiana Behavior Analysis Association. Ms. Huber noted to the *Times* that many of the behavior analysts would have preferred an independent licensure board because they believe it would have been the best course for consumers and practitioners. However, given to the current political and economic climate, and small numbers in the profession at this time, she explained, it was not feasible. Dr. Grant Gautreaux, president of LaBAA, represented the wishes of the group in the December 7, 2013 meeting when he voted for a merged board structure with the LPC board.

Commission, Cont'd

authority as a distinct, independent profession.”

Exemptions suggested by the authors include undergraduate, graduate, and doctoral students who are directly supervised by a Louisiana Licensed Behavior Analyst or an instructor in a BACB or otherwise approved course sequence.

Also, those pursuing experience consistent with a BACB or otherwise certified agency’s experience requirements, as long as the individual is registered and supervised by a Louisiana Licensed Behavior Analyst.

Non-human behavior analyst practice, such as animal behaviorists, are to be exempted.

And, visiting academic professionals will have exemptions, the exact wording changed in discussions at the January 25 meeting.

Exemptions for “Other Professionals.” notes, “Members of professions who are licensed or certified under the laws of this state should be permitted to render services consistent with their professional training, course work, experience and code of ethics, provided they do not represent themselves as Behavior Analysts (BAs), Assistant Behavior Analysts (ABAs), Licensed Behavior Analysts, Licensed Assistant Behavior Analysts, or use any such terms which may be misconstrued by the public as a Louisiana Licensed Behavioral Analyst or a Louisiana Licensed Assistant Behavior Analyst. The individuals of any professions who have earned the BCBA, BCBA-D, or the BCaBA credentials ay designate themselves as such.”

The section on exemptions also includes a paragraph precisely on psychology. “Psychology: An individual authorized to practice Psychology within the state, so long as the applied behavior analysis services provided by the licensed psychologist are within the licensed psychologist’s education, training, and expertise.”

Qualifications for licensure include applications, fees, to “be of good moral character,” a background check, and to pass a jurisprudence examination. The qualifications include



Staff photo M.Dooley

Members of the Study Commission taking a break between discussions at the December 2012 meeting. On left is Mary Alice Olsan, Executive Director of the Counselors’ board. Dr. John Courtney, center, speaks with Dr. Robert Marier, the Executive Director of the State Medical Board. Dr. Courtney was a member of the state psychology board but resigned his position in December.

that the applicant must pass the national exam set forth by the BACB or another certifying agency. The report also indicates that the applicant must be certified by the BACB or other approved certifying agency.

Qualifications for the Assistant Behavior Analyst is similar to the qualifications of the Behavior Analyst, but the assistant is to submit documentation that he or she is directly supervised by a Louisiana Licensed Behavior Analyst.

The “Registration Criteria for the Louisiana Behavior Analyst Direct Contact/Line Technicians,” include a high school diploma or GED, criminal background check, education or training required for meeting needs of the individuals they will be working with, and be registered with the LPC board.

The report notes, “Direct contact/line technicians work directly with the patient/consumer to implement applied behavior analysis services under the direct supervision of a Licensed Behavior Analyst and are pivotal in the field of applied behavior analysis. In order to insure protection of the public, Licensed Behavior Analysts will be charged with ensuring any line technician working with them is registered with the regulatory authority ...”

Other matters covered in the report included reciprocity, temporary or emergency licensure, disciplinary guidelines, licensure appeals process, complaints and investigations, license renewals and reinstatement.

From the previous meeting on January 11, the commission made some changes and additions, such as including the phrase “as recommended by the behavior analyst committee,” in sections on licensure appeals, complaints, and renewals.

The latest version of the commission’s report also includes titles for documents in the appendices. These are the list of members and attendance, structure of the Louisiana Behavior Analyst’s Regulatory Authority, link to the BACB Guidelines for Responsible Conduct and standards for examination. Also included was a section for a “Dissenting Opinion from the Louisiana Psychological Association.” Details of this opinion were not yet available.

In the spring, Senator J.P. Morrell said to the Senate Committee that he planned on taking the recommendations of the Study Commission forward in legislation this year.

Psych Board May Finalize Cont Ed Changes at Long Range Meeting

The psychology board is planning on finalizing changes regarding the continuing education requirements for licensed psychologists at their March long-range planning session, Executive Director Kelly Parker told the *Times* last week.

The changes will likely increase continuing education hours from the present biannual requirement of 30 hours, to 40 hours. The board had also proposed to expand the types of activities that can be submitted for credit.

These new types of educational activities include practice monitoring, peer consultation, journal clubs, and work on committees, for example, to be added to the traditional classroom style education.

Ms. Parker explained that the board has been working through the comments since they were received in September. “The board may complete the work at the long-range planning meeting,” she said. This meeting is to be held March 14, 2013, in Baton Rouge, and is open to the public.

After publishing the proposed changes in the Louisiana Register, the psychology board received about thirty comments.

The most common feedback asked the board to consider maintaining the allowances for traditional type training, such as workshops and seminars. At present, these are allowed to account for 100 percent of a psychologist’s continuing educational training.

The board’s plan, generally following the suggestions of the Association of State and Provincial Psychology Boards, proposed to reduce the traditional classroom training activities to a maximum of 50 percent of the total hours allowed.

Dr. David Kidder Ahead In Outcomes Research, cont'd

In outcomes-informed care the client's responses and improvements are surveyed on a regular basis. The process allows therapists like Dr. David Kidder, licensed counseling psychologist practicing in Slidell, Louisiana, to measure his effectiveness with his clients. Dr. Kidder can review the outcome results for a single patient to better understand that particular individual's progress and to make adjustments.

He can also review his own global results, the overall combination of outcome measures from all his patients in the outcomes program. And, the method allows a clinician to be proactive with the 5 to 15 percent of the typical caseload that are at high risk for a poor treatment results.

Dr. Kidder is currently participating in an outcomes-informed care program provided by Value Options (VO). The program is called "On Track" and provides clinicians with the psychometric tools to use for clients covered by VO. But also a VO practitioner can use the same tools with his or her clients who are not VO members.

Dr. Brown told the *Times*, "David's outcomes are extraordinarily high, even when compared to those getting very good results." Brown said that the program at VO is voluntary and there is a self-selection occurring. Overall, those clinicians who have opted into this new methodology may be some of the most secure about their therapy approaches, and also some who are most open to this kind of feedback.

How is this approach implemented? "There are a number of ways this can be done," Dr. Kidder explained to the *Times*, "and some of the managed care companies are providing avenues to gather this data on treatment effectiveness. I began using the protocol that Value Options provides on its provider web site."

"I have each patient complete a Global Assessment of Functioning Scale before each session," he said. "I give each patient an ID number that only I know, and fax these forms to Value Options. They enter the data and perform computations to determine effect size of treatment for each patient over the course of treatment, and I can access graphs of the patient's progress."

"I can access aggregate data to see how well I am doing compared to other practitioners participating in the program. I can use the individual GAF ratings to discuss with my patient areas that are getting better or worse and how we might work together to improve treatment."

A measure called the cumulative severity adjusted effect size, from the Value Options On-Track program, provides an estimate of Dr. Kidder's results after adjusting for the differences in types of problems, demographics of the clients, and severity of symptoms.

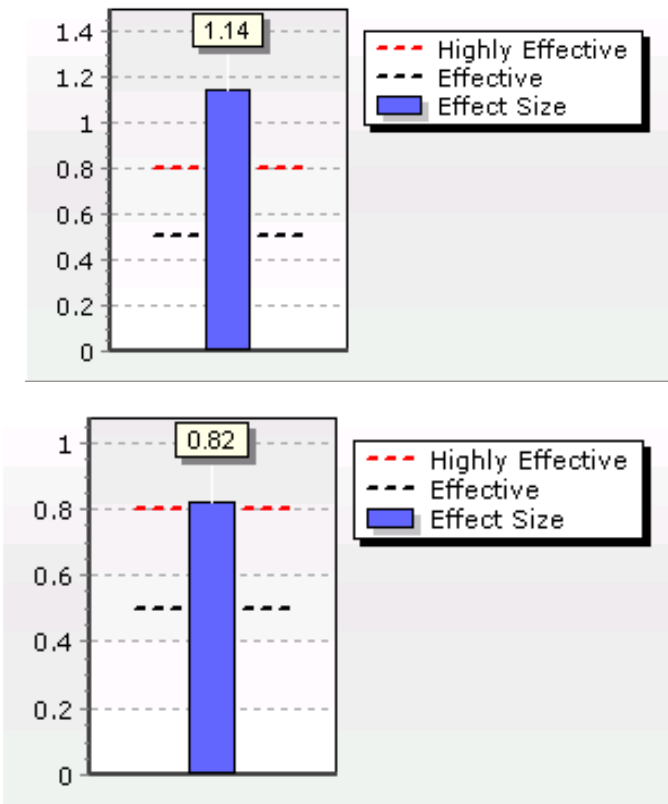
The cumulative severity adjusted effect size for all Dr. Kidder's clients who submitted repeated assessments was 1.14. Effect sizes of 0.8 or greater are considered large, while effect sizes of 0.5 to 0.8 can be considered moderately large. Effect sizes of less than 0.3 are small and might well have occurred without any treatment, he explained.

Dr. Brown and Clinical Informatics uses 0.5 effect size as the threshold for "effective". Dr. Kidder's 1.14 effect size can be interpreted as reflecting consistently positive behavior change in his clients.

Another statistic derived from the Global Distress Scale data is the percentage of clients who have improved. Eighty one percent of Dr. Kidder's clients who have completed multiple Global Distress Scales have shown improvement in their symptoms over the course of their treatment.

Dr. Brown and his team are currently working with very large samples of outcome referenced data, he said to the *Times*. "We have very large samples, with good information. We know the level of severity, we know which service, we know the costs, we know the credentials, we know what drugs. We've looked at these variables in great detail in very large data bases."

Brown described that it was not until the last decade that the advances in statistical analysis caught up with the problem of where the variance came from in therapy outcomes. For a long time people studied the type of therapy, and thought it must come from the type of therapy. But when



Outcomes measures for Dr. Kidder, allowing him to monitor both his clients' outcomes and his effectiveness.

researchers began to use hierarchical linear models that allowed researchers to better understand the therapist as a variable, things became much more clear. "Across the board it is the therapist that explains the outcomes," Brown said, "not age, not experience, not credentials, or the type of therapy."

Traditional psychotherapy research is often based in clinical trials that look at the effectiveness of a specific treatment method.

Brown and others point out that the question is not whether cognitive behavioral or Jungian or Psychoanalysis or exposure therapy works best, but if the particular therapist can produce optimal outcomes with a particular client as well as across a range of diverse clients in real world settings.

His research, explained Brown, suggests that the positive results in studies across different types of therapy is most likely not due to the type of therapy, but due to the therapist and the relationship. "Therapist effects, this is what is driving things. It resides with the therapist."

Outcomes-referenced methods appear to dovetail with the new educational options being put forth by the state psychology board. In particular, the client-monitoring approach that is likely to be accepted for continuing development credit.

These new continuing education regulations are scheduled to be reviewed at the March 2013 Long-Range Planning meeting of the LSBEP will likely include this type of competency assessment. Included in the proposed new regulations last year was "2. Practice Outcome Monitoring (1 completed questionnaire equals 1 credit). This is an activity where the psychologist assesses patient/client outcomes with a questionnaire that is shown to be of empirical value. Up to 50 percent of total credit hours is allowed."

Dr. Brown told the *Times* that his group can support a limited number of "sponsored clinicians" on a first come first serve basis. Those interested may go to <https://www.cci-acorn.org/register.asp> In the pull down menu for "Sponsoring Organization" have them choose "CCI Sponsored". Once our staff has validated their registration, we will send out a new user email with their login information and password, along with links to help files and instructional videos.



Dr. David Kidder, licensed counseling psychologist practicing in Slidell, Louisiana, works with Value Options to collect data to measure his effectiveness with his clients.

Dr. LaHoste & UNO Biopsychologists

Cont'd

In their article, the authors explain, "The objective of the present study was to examine whether the inhibition of Rhes would attenuate or delay the symptoms of HD in vivo. We used a transgenic mouse model of HD crossed with Rhes knockout mice to show that the behavioral symptoms of HD are regulated by Rhes. HD+/Rhes2/2 mice showed significantly delayed expression of HD-like symptoms in this in vivo model. Drugs that block or inhibit the actions of Rhes may be useful as the first treatments for HD."

Dr. LaHoste and graduate student Brandon Baiamonte conceived and designed the experiment. Along with Franklin Lee and Steve Brewer, also from the UNO Applied Biopsychology Program, who helped conduct the experiment. Baiamonte wrote the paper. Daniela Spano from the Biotechnologie Mediche, Università di Napoli and the CEINGE Biotechnologie Avanzate, in Naples, Italy, contributed analytic tools.

Dr. Gerald LaHoste explained to the UNO press, "I believe that these findings are important because they may lead to the development of the first treatment for this horrible disease."

LaHoste is Associate Professor of Psychology at UNO, formerly the Villere Endowed Chair for Research in Neuroscience, Emeritus. He received his Ph.D. in Physiological Psychology from Tulane University in 1985. He received postdoctoral training in Bordeaux, France and at the University of California, Irvine, where he served on the faculty for eight years before coming to UNO. His work has led to the discovery of the link between a dopamine-related gene and Attention Deficit Hyperactivity Disorder, a line of research replicated in laboratories worldwide and cited over 500 times in scientific journals.

Dr. LaHoste's applied biopsychology program at UNO is unique in the goal to understand the biological underpinnings of behavior, by examining the many levels of organization of this system. This effort spans from molecular genetics to behavior, with all variables in between, such as gene and protein expression, neuroanatomy and physiology.

In a phone conversation with the *Times* yesterday, Dr. LaHoste explained that the biopsychological approach is important for uncovering the connections between behavior and other levels of investigation, connections that other scientists may often miss.

His goal as stated on the website is to use "a comprehensive view of the complexity of normal and pathological human behavior."

At the LaHoste Laboratory, a website that can be found under Dr.



Dr. Dardard recently told her "Kana and the Gourd Dance Blessings" story at the Louisiana Indian Heritage Association powwow. Here she explains to a participant how the rattle is used in gourd dances to call the ancestral good spirits, and ward off the bad. Dardard is working in media and is preparing her South River Stories® series.

LaHoste's faculty listing at UNO, the work is described as a subfield of psychology that is defined not by the subject matter but by its methods.

"We clone genes, we breed genetically engineered mice, we do DNA fingerprinting, we study changes in gene expression, we use state-of-the art microscopy to visualize the protein products of genes and, most of all, we meticulously observe and test rats and mice in their normal and drug-stimulated behavior using paradigms that have been validated as models of human mental and neurological illness," noted authors of the site.

"But we are not molecular biologists, nor are we neuroscientists, we are Biopsychologists, first and last."

The LaHoste Lab includes the Schizophrenia Project, Huntington's Project, and Chemo-Brain Project. UNO offers a doctoral degree in applied biopsychology, a rapidly evolving discipline within psychology that can be defined as the scientific study of the biology of behavior.

On the LaHoste Lab website, the researchers note that the legendary folk singer Woody Guthrie suffered from the Huntington's Disease, as did the fictional character Dr. Remy Hadley on the popular T.V. show *House*. The team cross-breeds Rhes knockout mice with the transgenic mice that show Huntington's. This is how they study the role of Rhes in human Huntington's disease.

"As *Applied* Biopsychologists, our hope is that our work will lead to a treatment for this terrible illness."

They seem to have made a huge step in that direction.

The article is available at <http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0053606>

Dr. Susan Dardard Launches New Blog

Dr. Susan Dardard has launched a new blog, www.southriverstories.tumblr.com, in advance of preparation for her new television show, South River Stories®.

Dr. Dardard told the *Times* that she is in the early stages of developing the T.V. pilot, after which she will seek sponsors. She explained that she will be looking for a best-fit local media outlet, and she said, "eventually seek a national network home."

Dardard's blog features videos of several of her stories. So far she has posted "My Three Chickens," "Kana and the Gourd Dance Blessings," and "Indian Santa, The True Story," all based on her life in the country and her Native American heritage.

"Stories about crops and critters and horses are coming soon," she explained.

"The television show will use a reality format," she said, "with a heavy emphasis on rural adventures and relationships."

These themes, which are represented in her blog as well, will have relevant musical and psychological material woven into the episodes, she explained. Similar to her earlier productions, Dr. Dardard expects that the show will prompt some viewers to ask about how to get help from a psychologist.

Because of this, Dardard is inviting colleagues who are child and family specialists and who would like to be considered for referrals to please contact her.

Also, she noted that since music will feature prominently in the show, Dr. Dardard hopes to feature the recordings of her musically-inclined psychologist friends, especially those who are song-writers.

"I've written the theme song for the show and hope to get the pilot completed this summer," she said, "with a premiere in late 2013 or early 2014. Stay tuned!" Dr. Dardard can be reached at drsusan@auduboncable.net.

Dr. Dardard has worked as a media psychologist over the course of her career. In 2009-2010 she wrote a column for the *Times*.

Pennington Researchers Take Aim At Bedroom TV

Researchers from Pennington Biomedical Research Center found that having a bedroom TV and TV viewing time were related to childhood obesity, and specifically high waist circumference, according to a recent news release by the Center.

In the study, “Television, Adiposity, and Cardiometabolic Risk in Children and Adolescents,” published in December in the American Journal of Preventive Medicine, the researchers, Dr. Peter Katzmarzyk, Ph.D., and post-doctoral research fellow, Dr. Amanda E. Staiano, Ph.D., M.P.P., discovered some interesting links between the variables.



Dr. Amanda Staiano
(courtesy photo)

The average American child from age 8 to 18 watches about 4.5 hours of TV each day. Seventy percent have a TV in the bedroom and about one-third of youth aged 6-19 is considered obese. Previous studies have shown that TV viewing time during childhood and adolescence continues into adulthood, resulting in overweight and elevated total cholesterol. This study, led by Pennington Biomedical researcher Peter Katzmarzyk, Ph.D., professor and LPFA Endowed Chair, found that TV viewing time was related to visceral adiposity, and bedroom TV was related to cardiometabolic risk in children.

According to the news report, statistical analysis of the data developed produced two models, which together revealed that children with a TV in the bedroom were more likely to watch more TV. These children also were shown to have more fat and subcutaneous adipose tissue mass, as well as higher waist circumference, when compared with their peers who did not have a bedroom TV. Study participants with a TV in the bedroom and those who watched TV more than two hours a day were each associated with up to 2.5 times the odds of the highest levels of fat mass. Viewing five or more hours a day produced an association of two times the odds of being in the top quartile for visceral adipose tissue mass. Further, a bedroom TV associated with three times the odds of elevated cardiometabolic risk, elevated waist circumference, and elevated triglycerides.

“There was a stronger association between having a TV in the bedroom versus TV viewing time, with the adiposity and health outcomes,” noted study co-author Amanda Staiano, PhD. “A bedroom TV may create additional disruptions to healthy habits, above and beyond regular TV viewing. For instance, having a bedroom TV is related to lower amounts of sleep and lower prevalence of regular family meals, independent of total TV viewing time. Both short sleep duration and lack of regular family meals have been related to weight gain and obesity.”

Staiano earned her PhD in Developmental Psychology from Georgetown University in 2010, her M.P.P. in Public Policy from Georgetown in 2009, and her B.S. in psychology from LSU Baton Rouge in 2007 with a minor in nutritional science and also sociology.

Dr. Staiano told the *Times*, “I’ve been interested in children’s media use for years – in fact, my prior research showed that obese adolescents who played exergames –active video games like Nintendo Wii– actually lost a few pounds over a 7 month intervention. But I also am aware that a lot of screen time and media use is associated with obesity and negative health outcomes. So when we did this large study of over 400 children and teens from the Baton Rouge area, I jumped at the chance to see if the children’s screen use was related to their obesity status, waist size, and health risk factors.

“What’s exciting about this sample is it’s so diverse – half African American and half white, children from 5 to 18 years of age, boys and girls, about one third normal weight, one third overweight, and one third obese. Plus we have a lot of data on them – blood lipids, blood pressure, waist circumference, and precise body composition from MRI and DXA so we know how much fat is on their bodies and where they store the fat.”

Dr. Staiano is currently working on ways to better detect and diagnose Type 2 diabetes in adolescents. One example may be helping find ways that physicians can ask a teen about a TV in the bedroom, which could be a risk factor for diabetes, she explained.

Dr. Staiano is a post-doctoral fellow in her third year, and in the Division of Population Science at Pennington.

LSBEP is Booked With Exams, Psychology Licensees Up to 671

The state psychology board is “back-logged with oral exams” said the Executive Director of the Louisiana State Board of Examiners of Psychologists, Ms. Kelly Parker. She said that the board is hearing all they can at a single meeting, which is six oral examinations per meeting. The have a waiting list of applicants. Also, Parker told the *Times* that the number of licensees has risen from the previous 641, up to 671. Some of these may be applicants who are trying to get in under the fee increase that goes from \$450 to \$600 this March.

Dr. Lucinda DeGrange Chosen APA Diversity Delegate for LA

APA has chosen Louisiana’s Dr. Lucinda DeGrange as a fully supported Diversity Delegate, according to an announcement made recently by Dr. Bryan Gros, Louisiana Psychological Association president.

awarded full funding through APA.

As one of the delegates Dr. LeGrange will be involved in diversity matters for her state. According to president Dr. Gros the group is especially excited and proud for this award. “Lucinda will take a lead role in the enhancement and development of programs within LPA related to the recruitment and retention of those from diverse backgrounds, as well as the involvement and leadership development of psychologists from diverse and minority

Nominees from 18 state organizations competed for the American Psychological Association’s Committee for the Advancement of Professional Practice grant to send top individuals to the APA State Leadership Conference. Only four individuals nationwide were

BESE Considers Cuts To School Counselors

In January the Louisiana Board of Elementary and Secondary Education (BESE) was due to discuss changes to Bulletin 741, the Louisiana Handbook for School Administrators.

be no public hearing per se on the proposed changes. He also noted that Beebe said “many of the proposed changes are rationalized by State Superintendent John White and department staff as offering flexibility to school systems.”

At a recent meeting of the Counseling Association, members voiced concerns about the proposed changes and asked members to attend the January 15 meeting of BESE.

Aswell wrote, “But at a time of increased focus on school bullying (both physical and electronic) and concerns about student mental health and safety, ‘cutting counselors and replacing them with untested teams is contrary to good public policy and a danger to our kids,’ Beebe said.

BESE has been discussing changes that could reduce school counselors, along with physical education teachers and school librarians, according to reports by Tom Aswell, from *Louisiana Voice*. Aswell noted that Board member Lottie Beebe of Breaux Bridge said there will

The complete article can be found at Louisiana Voice, search Bulletin 741.

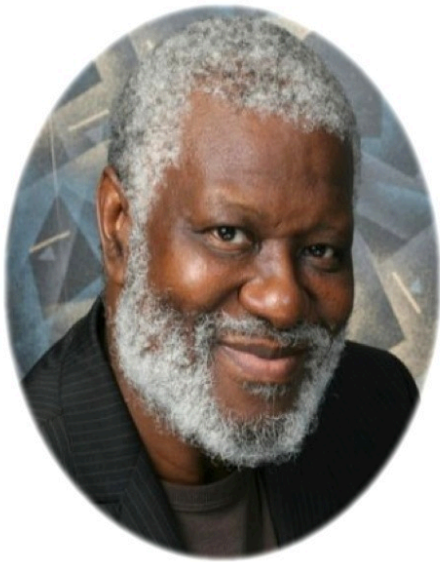
Three Self-Nominate for Temporary Position On State Psychology Board

Three psychologists have submitted their names for an election to fill an unexpired position on the Louisiana State Board of Examiners of Psychologists.

Dr. Jessica Brown, Dr. Thomas Fain, and Dr. Beverly Stubblefield submitted their names for the upcoming election. Dr. John Courtney, who resigned in December, left the position vacant. Whomever is appointed by the Governor will fill Courtney’s term, which ends in 2014.

Ψ We Remember

Dr. Ivory Lee Toldson



Dr. Ivory Lee Toldson died suddenly on December 25, 2012, in Baton Rouge. He was 69.

Throughout a rich and diverse career, Dr. Ivory Toldson illuminated the paths of African-American men and women with his wisdom and humanity. As educator, clinician, philosopher, friend and colleague, he offered his insights with a deep understanding and a poetic style that honored differences. He shared his creative gifts with those he taught, expressed compassion for those who suffered, and nurtured the ideals of character and discipline for those he treated.

His understanding of the journey in this country of African-American men and women was profound, and this depth and respectful knowledge inspired his writings, teachings, and his psychological and clinical services.

Among his many professional duties, Ivory was Chair of the Behavioral Studies Department at Southern University in Baton Rouge, where he later became Dean of the College of Education.

"He was my colleague," said Dr. Kenneth O'Rourke, Interim Chair of the Behavioral Studies Department, "but ... *he was my friend.*" And he said, "If I had to sum it up, he was quite a person, quite a human being." He knew Ivory for over three decades.

Dr. ValaRay Irvin, licensed psychologist, current Director of the University Counseling Center at Southern University, and adjunct professor for the Psychology Department, was both Ivory's student at one time and later became his colleague. "He was wonderful at understanding emotionalism and spirituality and rhythm, and how people relate to that," she said, describing Ivory's exceptional talent in language and expressionism. "I can't even count how many people he taught and affected."

Dr. Harry Albert, who also served as Chair in Behavioral Studies and was friend and colleague for 36 years. "I can picture him as a concerned, serious minded, adventurous black male," Dr. Albert said. "If you met him initially, you would have thought him shy, reserved. He said little that was wasted, but he always had a punch-line."

Dr. Ivory L. Toldson earned his bachelor's degree from Southern University and A&M College in Education in 1966 and began teaching in Indianapolis, Indiana that same year. He went on to earn a Master's in Educational Psychology from Butler University in 1968 and Doctorate of Education in Counseling Psychology from Ball State University, Indiana. He taught as assistant professor of counseling psychology at Temple University.

In 1975 Dr. Toldson accepted an associate professor position at Southern University in Baton Rouge. He remained at Southern for the next 36 years, as full professor, as Chair of the Behavioral Studies Department from 1975 to 1988, and as Dean of the College of Education from 2000 to 2005.

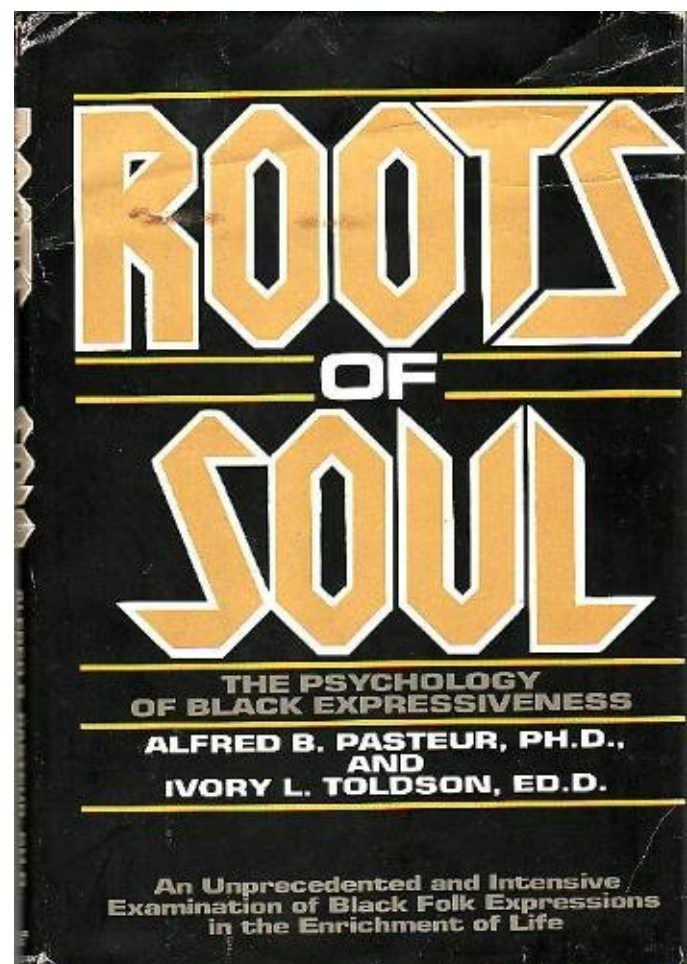
He was a licensed psychologist in both Louisiana and Pennsylvania, and provided expert testimony in forensic and medical cases. He was also certified in school psychology, and held a secondary teaching certificate.

Roots of Soul

In 1982, Dr. Toldson coauthored with Dr. Alfred B. Pasteur of City U. of New York, the the pioneering work, *Roots of Soul: The Psychology of Black Expressiveness*, published by Doubleday.

In *Roots of Soul*, Toldson and Pasteur introduced an original theory of African-American expressiveness, and looking at emotionalism, spontaneity, and rhythm. They examined how these characteristics run through the fabric of Black culture, and presented a holistic view of the connections between music, dance, poetry, drama, oratory, folklore, and how these expressions in the AA community have influenced the world's culture.

The work was "An Unprecedented and Intensive Examination of Black Folk Expressions in the Enrichment of Life," and affirmed the



Dr. Toldson coauthored *Roots of Soul*, an unprecedented look at African-American expression and meaning.

Black culture with chapters such as, "On Havin Been to the Mountaintop," "Do Blacks Have a Natural Rhythm?" and "Do You Have Your Head On Straight?" as a description of the healthy personality and Black expressiveness. "Rock Steady Baby," examined expressive movement and, like the entire text, explained and celebrated differences.

The authors wrote, "Our primary purpose is to present new explanations regarding the nature and characteristics of black expressiveness. We define 'black expressiveness' as the readiness and predisposition to express oneself in a manner characterized by vital emotionalism, spontaneity, and rhythm. Often these traits act in combination with one or more other essential characteristics close to naturalistic attitudes, style, creativity with the spoken word, and relaxed physical movement. These interact to produce human behavior that, when expressed or perceived registers images, sounds, aromas, and feelings of beauty to the sense. It is the intensity, duration, frequency, and utilitarian features of the behavior, resembling those of traditional African people, which make it unique."

"He was a very prolific writer, it was very interesting working with him," said Dr. Albert. "*Roots of Soul* was a very good book because it deals with black expressiveness. When we deal with different cultures we can't mold them in to one another," and this book helps us to see that, he explained.

Part III of *Roots of Soul* focused on "Express Your Way to Good Health and Happiness Guides for Positive Living and Learning," and it was these type of ideas about emotionalism, rhythm, and spirituality that Toldson brought to his techniques.

"He was very immersed in using methods from the black culture," said Dr. Irvin. "He simply brought in all sorts of methods, he was wonderful at that."

Ivory's applications merged with his enjoyment and involvement in music. "He had a collection of music that many people would envy, from the classics to rhythm and blues," said Dr. O'Rourke.

Dr. Toldson's biography is published in the book, *Successful African-American Males: Teachers Make a Difference*, published by Educational Resources Press in 1998. Served as contributing editor to the publication *Community of Caring* (a teenage pregnancy curriculum), authored by Eunice Kennedy Shriver and published by the Joseph P. Kennedy Foundation

During his career he also authored two book chapters, over twenty articles published in scholarly journals, numerous papers, seminars, and symposia at professional societies. He traveled extensively on, including on behalf of the Rockefeller Foundation. He was awarded the International Counseling Award and the

Dr. Ivory Lee Toldson ---

Research Award by the Association for Multicultural Counseling and Development, among others.

Dr. Irvin explained that her training in cognitive behavioral therapy was important, but her training and connection with Dr. Toldson allowed her to integrate evidenced-based methods with these multicultural techniques. “It helps,” she said. “The connection is better, and respectful.”

It was when Dr. Irvin was at the Louisiana Correctional Institute for Women, in her master’s program studies that she was introduced to Toldson’s methods. “It was then that I worked with ‘spoken words,’ visualizing with women in prison. She had learned from Dr. Toldson the ways to “Give voice to the feeling,” she said. “Ivory talked about it as –poetry, spoken words, and journaling.”

The Center

Dr. Toldson designed and developed a comprehensive center with outpatient and residential treatment services, in Baton Rouge called the Center for Psychological Health Care, Inc. He based the Center on a commitment to capitalize on the richness of human differences.

Guided by Ivory’s principles, the Center’s residential treatment program, “Manhood Training Village,” is a multiple modality approach, providing a “structured, value-based, rule-governed, safe environment ...” for young males. The residential services include individual, group, and family therapy, and the program staff “comprise a surrogate parental system ...” with rewards, consequences, and a “regimented system of adaptive values inculcation aimed at developing character for successful manhood.”

“Values clarification, empathy, anger management, school adaptation, sex education/ awareness, age-relevant hygiene and grooming, conflict resolution with emphasis on alternative to violence, character education.” And the approach includes involving in “Tutored library study, visits to museums, planetarium, historical sites and monuments.” These were just some of the approaches Toldson used.



Dr. ValaRay Irvin talking with Dr. Toldson at a state psychological convention.

Dr. Murrelle Harrison, Professor and Chair of Psychology at Southern University in Baton Rouge, told the *Times*, “What a worthy contribution to the Baton Rouge metropolitan area Dr. Ivory Toldson made both as an educator who trained students from Southern University as well as supervised them to become professionals.”

“Our Department, as well as my home, continuously receive calls for information about an African American psychologist and Dr. Ivory Toldson was our only referral. Despite being our only resource, we were confident that he was capable and culturally sensitive to provide the most appropriate services available.”

Stolen Innocence

Along with *Roots of Soul*, Dr. Toldson authored *Stolen Innocence: Preventing, Healing, and Recovering from Child Molestation*, a work providing help for children who have been sexually victimized and a text to “raise the awareness of children to prevent sexual abuse victimization.”

It is a story of “Kiki,” a story that helps answer questions in the minds of children and informs caregivers about the many symptoms a child may exhibit. The work also provides understanding about the “tragedy of life that befalls some children and their heroic pathways to healing...”

Ivory wrote, “Many questions arise in the minds of young people who are hurting. More questions arise when there has been the discussion about taking child victims to a professional to get help. This book helps to define what a therapist is and what he or she does. It untangles, with humor and agony, what happens in the therapy room. Hearing what your child has to say about relationships and events that occur in the story certainly can be useful because it helps you communicate with your child about thoughts and feelings the story might arouse.”

Dr. ValaRay Irvin told the *Times*, “I do a lot of work with women from abusive backgrounds. After our time together,

when I felt she was ready to develop a healthy relationship with a male, I would refer her to Dr. Toldson. He did a wonderful role for women to bridge that gap, for women to find trust. His book was having to do with childhood abuse. He did wonderful work.”

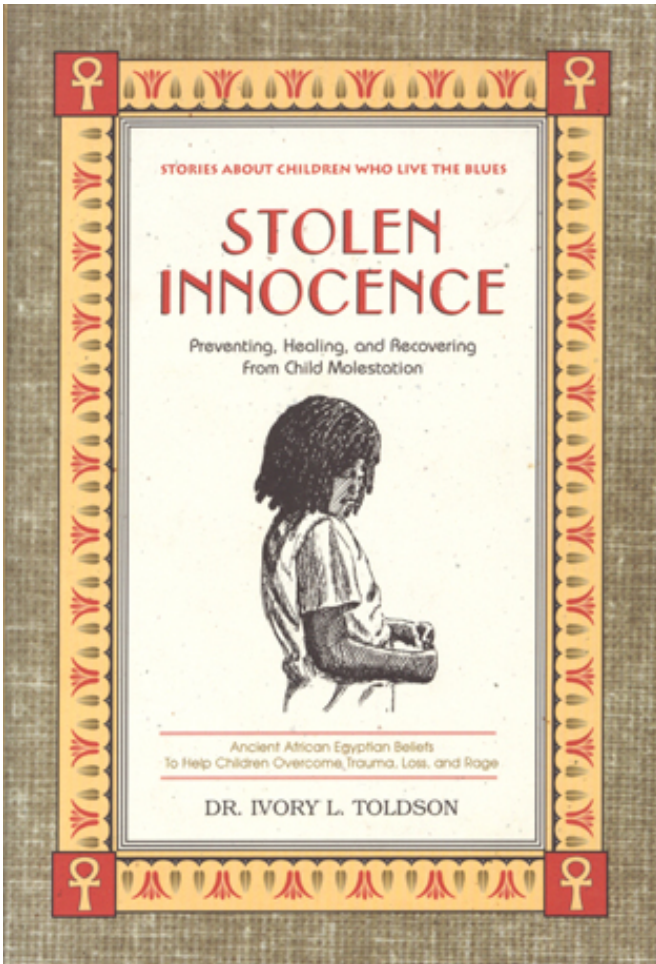
“If there was a lesson that I learned early on from him it was that emotion deserved expressing,” said Irvin. “I think that’s really what he did in his book, *Stolen Innocence*, for young people who come from an abusive background.”

Along with all its other services, Dr. Toldson’s Center addressed treatment for the adolescent sex offender, based in taking personal responsibility and honesty. “The issue is to help the offender come to terms with his behavior, to look at and own responsibility for the worst in himself. It cannot be done without extensive, ongoing confrontation,” wrote Toldson. “We believe that victims are never, under any circumstances, responsible for their victimization.”

Dr. Ivory Lee Toldson brought his compassion, creativity, and humanity to his roles of teacher, clinician, administrator, author, and friend. He embraced some of the most profound issues of our times, gracefully sharing his wisdom, insight, and strength of character, to teach and to heal. He will be deeply missed.

Dr. Ivory Lee Toldson is survived by his wife Frances Muse Toldson; daughters, Nicholy Johnson and Kilah Toldson; sons, James (Linda) Haynes, Dr. Ivory Achebe (Marshella) Toldson, and Ivan Toldson. He is preceded in death by daughter Angela Adjoa Toldson.

(The Times wishes to thank Ms. Toldson for her assistance with this article.)



Dr. Toldson’s therapeutic book for and about children.



LPA Legislative Chair Dr. Alicia Pellegrin Speaks With *Times*

(Editor's note: The Times caught up with Dr. Alicia Pellegrin who is the current Legislative Chair for the Louisiana Psychological Association. She took on the job during one of the most complex times in the association's history. She agreed to shares some of the news of what her group is working one, and some plans for the future.

She also agreed to allow us to use the photo of Zack, her therapy dog. Alicia says that Zack helps her with both the decisions and the stress of her volunteer position where she works to help the profession of psychology in Louisiana.

PT: Dr. Pellegrin, can you tell me something about the legislative issues you intend to be working on in 2013?

AP: "We are working on many things at the moment, and we don't see that changing. We have a lot of catch up work to do and we don't want to lose any time. We're working on and monitoring important issues that affect our members and the public.

"First, there is a great deal of concern and confusion regarding the state Medicaid restructuring, not only getting the current evaluations authorized but in our research we are finding out that services that psychologists perform, that are included in our practice act, aren't reimbursed, including psychoanalysis, multifamily group—but we are reimbursed for single group sessions— hypnotherapy, and biofeedback, as well as a few others, all of which are covered for physicians. This is a major concern.

"We have also seen a rate differential between medical psychologists and those regulated by LSBEP, even when the training and services provided are the same.

"We learned in our meeting with DHH that those who spearheaded this 3-year plan did not know of these problems. We are checking in to all of that. The Magellan representative told us that many of the codes were for inpatient services, and because of that, contributed to the confusion. But even so, these are serious omissions.

"Fortunately, our attorney Kevin Hayes was able to get together with Jerry Phillips [Under-secretary and Director of the states Office of Management and Budget] and look more closely at these issues. DHH seemed genuinely confused by this state of affairs, told us several times that our questions were quite reasonable and that they would be investigated immediately.

"We have already received encouraging news, with more information to follow, and we are keeping a very close watch on it and it depends on what they tell us, as to what will happen next.

"The forensic issue is another, much more complicated problem. It looks like it is a clear budget issue, but it is much more complicated.

"Specifically, we have seen a drop in the number of referrals for forensic and clinical evaluations for such important purposes as risk assessment for adolescent offenders, termination of parental rights, and other critical issues.

"Despite the impressive work of Dr. Jesse Lambert, who has spearheaded this for us, our attempts to reach out to Magellan and DHH have not been successful. Dr. Lambert, is a forensic psychologist, and he understands these



Dr. Alicia Pellegrin here with her therapy dog, Zack. Dr. Pellegrin is involved in the Louisiana Psychological Association Legislative Chair. She told the *Times*, "Zach the wonder dog is included in all major decisions regarding legislative matters.

issues very well, but we're still concerned. PT: What other issues are you and your team watching?

AP: "We're still watching the ABA issue closely. The commission is still meeting and will have a final report soon. We were very fortunate that our representative to that commission, Dr. Lacey Seymour, was able to have an exception for psychologists included, meaning that licensed psychologists who have been doing behavioral analysis will be exempt from whatever is the final outcome.

"We have to decide how we want to go forward with this and the Executive Council is meeting this Saturday, with Kevin Hayes, our lobbyist to discuss this further.

"The main priority of the legislative committee, and this is an ongoing effort, is to educate the legislators and let them know who psychologists are and what psychology has to offer in terms of mental health services and other types of contributions from our field and profession, to the general public.

"Many of them don't actually even understand that we are a wholly separate entity from the state board, that we are not the LSBEP [Louisiana State Board of Examiners of Psychologists], and that we don't necessarily have the same interests as the board.

"This was one of the problems that came about in the ABA issue, many in the community thought that the state association was in lockstep with the board. We are different. Of course both entities —LPA and the LSBEP— are interested in public welfare, but we are able to do much more in terms of lobbying and educating.

PT: Do you have a plan for the next few years that are different from past years?

AP: "Yes. In addition to our ongoing efforts of getting out and letting legislators know who we are and what we do, we are looking for prosocial opportunities to demonstrate that we are not just a trade or guild organization, but that one of our main goals is to serve and to be a part of the community.

"We will be much more visible and have a presence at various local educational and service oriented venues to show the public

that we are ready to provide help where help is needed. We are always looking for volunteers to help with these projects. This is especially important now, given the severe cut backs in mental health services, especially for those who can least afford such cuts. In addition to serving the community, this will help legislators understand the depth and breadth of what the science and profession of psychology has to offer the citizens of Louisiana.

"We are also very excited about our efforts, led by our President, Dr. Bryan Gros, to reach out to students and the academic psychologists, looking at how we can help one another. LPA has a new committee for student concerns and we are looking at ways to engage our academic colleagues and we want to include them and their ideas in our overall legislative strategy.

"We also plan to reach out to the LPC community to look for ways in which our interests are aligned legislatively. Dr. Gros is already meeting with them and I will be reaching out to the legislative people on the LPC board. I believe we can discuss our mutual concerns, in a collaborative manner. And, develop ways to resolve issues without legislative battles and to show that not only are we capable of working with others, but that we actively look for opportunities in which to do so.

"We are looking at another couple of initiatives that we are working on, where we are a bit too early in the process to comment.

"We did obtain a small but important legislative grant from APA. But we are hoping to engage more psychologists and more LPA members in legislative goals. We want everyone to understand that we are in this for the long term, and that we welcome input and participation. We think we are headed in an exciting and positive direction, not only for LPA members, but for our larger community. We'd like to invite all of those in our psychologist community to join and help us.

"If psychologists want to know what they can do to help, please contact us. We are asking for new members and also PAC contributions, and most importantly, we'd like everyone to share their thoughts and ideas with us."



-- WEBPAGES --

Also on the home page he lists the main services: *Medication Management, Psychological Testing, Individual Counseling, Acupuncture, and Biomarker and Nutritional Assessment.*

Practice

The website’s next page, “Practice,” helps to explain his philosophy: “Prescription for Wellness.”

There are so many alternative approaches today for different conditions. When do patients know which approach is the best for their situation? My first goal is to remove any barriers to wellness and watch nature work. Some of my patients feel better with lifestyle changes, acupuncture and counseling. Others take a more comprehensive approach with laboratory and biomarker testing. Some need additional psychological testing. I never take progress for granted with a written prescription alone.

MInd-Body Connection

This page is dedicated to explanation for the “Mind-Body Connection,” framed by sunsets and Bonsai tree.

The mind and the body have an interactive effect on one another. This effect is powerful and is present whether or not you are aware of it. The mind-body connection can be utilized to help you feel less stressed, relieve depression, improve sleep, and lead a more relaxed life. Depending on your condition, you may need medication, supplements, acupuncture or other botanical medicine supplements. However, by using mutually supportive therapies your path to wellness can be more rewarding and less difficult than before.

Acupuncture and Chinese Medicine

Next is acupuncture, ancient Eastern medicine technique and philosophy, with the description of how this treatment helps in treating chronic pain, balancing hormones, stress.

Acupuncture applies traditional Chinese medical theory to diagnose and treat illness, prevent disease and improve well-



being. By inserting sterile, extremely thin, steel needles at specific points throughout the body, acupuncture activates the body’s self healing capacity. By using Eastern medicine concepts of how the body functions it can be used to treat a wide variety of medical problems.

Acupuncture stimulates the body’s innate healing mechanisms. It promotes a response that stimulates the body’s ability to spontaneously heal injuries to the tissue through nervous, immune and endocrine system activation.

The description helps those with chronic pain understand if the method might be helpful to them.

The site also gives information on the stress and illness connection.

“Acupuncture reduces stress. Due to my training, I view this as the most important systemic effect of acupuncture. Research suggests that acupuncture stimulates the release of hormones and signaling substances that regulate the parasympathetic nervous system. [...] The parasympathetic nervous system has been called the ‘rest-and-digest’ and the ‘calm-and-connect’ system. Research implicates impaired parasympathetic function in a wide range of autoimmune diseases, including arthritis, lupus, rheumatoid arthritis and inflammatory bowel disease as well as diabetes, heart disease, and many chronic health conditions.”

Biomarkers

A page to describe biomarker assessment, help visitors to



learn more about guiding choices in psychotropic medications, a topic of importance in the literature.

Nutritional Evaluation in the Laboratory

Nutrition affects many aspects of your health. Some of the diseases and conditions affected by nutrition are gastroenterological, autoimmune, neurological, cardiovascular, and orthopedic. Nutritional imbalances can affect your body in many ways.

Fertility

The last page introduces the visitor to what can be offered in to improve the often complex, mind-body issues involved in fertility.

“Acupuncture is able to help address a wide variety of conditions such as elevated FSH, endometriosis, PCOS, amenorrhea, painful or irregular menstrual cycles, recurrent miscarriage and male factor infertility.”

Dr. David Thomason’s website is an eye-catching and educational overview of this innovative and holistic practitioner, with solid descriptions of complex health issues and an array of interesting, sometimes even surprising, approaches offered to help individuals truly regain and maintain their health.

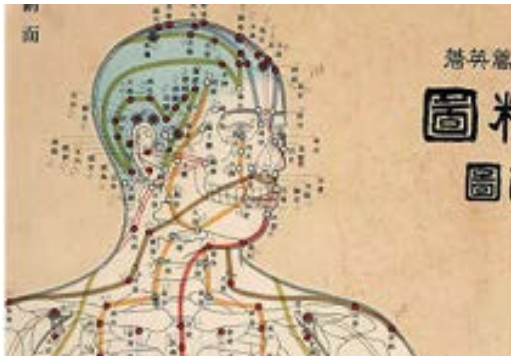
See the entire website at: www.drdavidthomason.com

Dr. David Thomason, medical psychologist, is one of those rare individuals who loves the really big picture. He also loves to learn. He has put himself through a comprehensive series of educational programs. His studies have taken him up, down, and around the sides of today’s health issues, and it allows him to provide his patients with valuable choices that many do not have in today’s health industry.

Dr. Thomason has earned a doctorate in clinical psychology, a Masters’ in psychopharmacology, a Doctor of Naturopathic Medicine, and a Master of Science in Acupuncture. He is well known in the Monroe area for his holistic approach. He is also well known in the psychological community, having served on the Louisiana State Board of Examiners of Psychologists and as chair in 1999. He’s seen the shifts and changes in medicine, psychology, and the alternative health field.

His website is straightforward and gives a clear descriptive of where he sits on the forefront of healthcare. For those open to and hoping for the alternative, whole person healthcare approach, the sections of the website lay out Thomason’s credentials, philosophy, and treatments very simply. While explaining his services, the various pages of his site also give some guidance and education for the visitor. The welcoming page gives the visitor information on medical psychology and acupuncture:

“Medical Psychology is a specialty trained at the post doctoral level and designed to deliver advanced diagnostic and clinical interventions. Acupuncture is a technique from Traditional Chinese Medicine that Dr. Thomason uses to treat a wide variety of problems. He utilizes his combined knowledge in these fields to give his patients expert care and attention.”



Images and photos from Dr. Thomason’s Webpages.

Up-Coming Events

American Group Psychotherapy Association National Meeting New Orleans Feb 25 – March 2, 2013

“Overcoming Obstacles: The Power of Group” is the theme for the February 25-March 2, 2013 meeting of the American Group Psychotherapy Association, to be held in New Orleans at the New Orleans Marriott.

“This is a huge conference,” Dr. Chris Garner told the Times, “One of our members is trying to secure a grant from BCBS to fund some students to go to the conference. Additionally, several local people will be presenting on a few topics.”

The events include Special Institute Presentation on Monday, February 25, the Two-Day Institute, on February 26 and 27, and the Three-Day Conference, on February 28, March 1, and March 2.

Some of those presenting at the conference are Drs. Sue Jensen and Darlyne Nemeth. A selection of those from the Louisiana mental health and consulting community includes the following from the Association’s conference materials.

Workshop 40: Finding Your Style as Group Psychotherapist. Chairs: Douglas W. Greve, MD, CGP, LFP, Clinical Professor of Psychiatry, Tulane Medical Center, New Orleans, Louisiana; Susanne M. Jensen, PhD, CGP, FAGPA, Private Practice, Baton Rouge, Louisiana.

The workshop will focus on the definition and clarification of style in the development of the group psychotherapist. Attention will be given to the relationship between gender and style. Further, if and how does the co-therapists relationship affect style. Changes of style as influenced by personal development and professional experiences and in theoretical orientation will be discussed. It is a demonstration-experiential-sharing of work experiences-didactic style.

Learning Objectives: 1. Evaluate their own style as group therapist. 2. Distinguish between style, technique and theoretical foundation. 3. Analyze the style of leaders in group development. 4. Discuss their own style as it is related to training, professional experience and Personality Adaptation.

Workshop 90: Using Group Process to Address Anniversary Reactions: The Katrina Story. Chair: Darlyne G. Nemeth, PhD, MP, MPAP, CGP, Clinical, Medical and Neuropsychologist, Baton Rouge, Louisiana.

Anniversary reaction group workshops were developed to address the unresolved emotional issues from Hurricane Katrina and to promote healing by encouraging belonging, comfort, security, and resilience. Participants were empowered to understand and resolve their anniversary reactions. These methods, with cultural adaptations, were subsequently presented in China and Australia. The style is didactic-sharing of work experiences-experiential-demonstration.

Learning Objectives: 1. Measure the outcome.2. Explore the interface of biological, historical, and environmental influences on traumatized individuals.3. Explain how the balance of work, play, love, and spirit is interrupted by chaos.

Session 21: Group Therapy with Latency-Age Boys Combined with Family Therapy. Presenter: Marvin Clifford, PhD, LCSW, MSW, CGP, Director of Group Therapy, Ochsner Health Systems, New Orleans, Louisiana

This open session will focus on a model of group therapy for boys ages 7 to 12. The model is effective for boys with varied problems in multiple settings. The problems boys have that this model has been helpful include ADHD, ODD, behavior, anger, school, family, peer, depression, anxiety, self-esteem, relationships, shyness, Aspergers, peer and social skills, and communication skills. The presentation will emphasize skills for therapists working with boys in groups,

a team approach, the wrap-around concept, and family therapy as an integral and important therapy along with the boy in group therapy. Evidenced-based practices will be presented for helping this population.

Learning Objectives: 1. Discuss interventions for helping boys in group therapy.2. Apply skills in helping families while their boy is in group therapy. 3. Use evidenced-based practices in helping boys and their families.

Workshop 87: Healing Ourselves: Using Mind-Body Medicine Groups in Difficult and Challenging Circumstances

Chairs: Toni Bankston, LCSW, BACS, Executive Director, Mind-Body Center of Louisiana, Baton Rouge, Louisiana, Jose Calderon-Abbo, MD, Faculty, Mind-Body Center of Louisiana, New Orleans, Louisiana, Therese Close, RN, Faculty, Mind-Body Center of Louisiana, New Orleans, Louisiana, Mindy Milam, LCSW, Faculty, Mind-Body Center of Louisiana, New Orleans, Louisiana, Marie O’Neil, LCSW, Faculty, Mind-Body Center of Louisiana, New Orleans, Louisiana

The founders and faculty of Mind-Body Center of Louisiana share the scientific foundation of the Mind-Body Medicine model as well as their experiences providing mind-body skills groups in many interesting and diverse settings, including: school-based, international communities affected by disaster and war, addictions treatment, summer camps, New Orleans and Gulf Coast communities impacted by the Oil Spill, FEMA villages after Katrina, medical schools and clinics, and inner city Baton Rouge and New Orleans neighborhood community settings. The MBCLA team will use a combination of didactic and experiential process to present the material and often invite the audience for personal sharing of their experiences. Style is demonstration-experiential-didactic-sharing of work experiences

Learning Objectives include: 1. Integrate mind-body skills into and enhance, their existing practice of group therapy.2. Incorporate mind-body skills as part of their daily self-care regimen and renew their desire to work in groups. 3. Adopt concrete strategies through this teaching in working in difficult settings and when faced with overwhelming obstacles and barriers. 4. Discover ways to relax into their work in groups and to convey an authentic presence with clients.

For all offerings go to <http://www.agpa.org/>



Dr. Sue Jensen (L) and Dr. Darlyne Nemeth (R) with Taighlor Whittington in back, at a past conference. Dr. Jensen and Dr. Nemeth will be presenting at the American Group Psychotherapy National meeting this month in New Orleans.

The Psychology Times CLASSIFIED ADS

Position Wanted: Research Associate, Health Psychology. Accomplished and dynamic masters level professional with degree in health psychology. Competencies include: Health Care · Patient Assessments · Patient Relations · Health & Safety Regulation · Care Coordination Policies / Procedures Compliance · Time Management · Needs Assessment · Email for more info at Neurology579@yahoo.com

Psychology Practice looking for professionals interested in joining our practice in **Metairie**. Two fully furnished offices in beautiful atrium building available 3 days per week. Rental includes telephone, fax, wireless internet, basic office supplies and receptionist. Contact Lynn at 504-455-0109.

Professional Shared Office Space for Rent: **Baton Rouge and Kenner** professional office space for rent by the hour, day, week, or month. Group room available upon request. No sublease required for part-time use. Utilities included. Support staff, services, and supplies available upon request and prior arrangements. Affordable rates. Please call 225-769-2533 for details.

Private Office Space for Rent in complex with other mental health professionals: **Baton Rouge, South Sherwood area**. Single office space with individual private waiting room. Entry door to waiting room and exit door from treatment room allows for your clients’ privacy. Utilities included. \$650 per month. Call 850-564-0077 for more information.

The Psychology Times

The *Psychology Times* is provided as a community service for those in the practice, teaching, 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.