

## Legislators Work To Help Improve Louisiana's Health

Once again state legislators are hoping to make improvements in the state's overall health and healthcare programs.

Last year *U.S. News & World Report*, ranked Louisiana last in all states, a result driven in part by poor scores in health care quality—41st, health outcomes—44<sup>th</sup> and health care affordability—45<sup>th</sup>.

A variety of bills are proposed to help Louisiana's health. Senator Barrow is proposing a measure for Assistive Outpatient Treatment, which would add "gravely disabled" as a category for determining if a person is in need of involuntary outpatient treatment, and also expand who may file a petition for involuntary outpatient treatment.

Representative Hodges is proposing to expand treatment for mental health in the substance abuse probation program in the Department of Safety & Corrections. Estimates note the high rate of mental or substance abuse issues in



The Senate H&W Committee

those who are incarcerated, with estimates up to 82 percent.

Representative Leger is asking for Medicaid standards in treatment programs and Representative Norton is trying to help those with serious mental illness again this year with her measure, HB 647.

Factors leading to the state's low ratings include health and healthcare disparities, notes Christoph Leonhard, PhD, ABPP, health psychologist and a professor in the clinical PsyD program of TCSP at Xavier University of Louisiana.

"I would consider any health disparity with behavioral implications fair game for psychological interventions," he said.

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### People

## Dr. Lewis-Todd, Red Cross Leader, Joins Community

Dr. Tracy Lewis-Todd, Disaster Mental Health Regional Lead for the American Red Cross, has joined the Louisiana psychology community, relocating from Illinois to New Orleans over the last year.

"Louisiana has historically had an unmet need for Disaster Mental Health (DMH) staff to serve the clients and communities affected by the many small and large disasters which impact our region," Dr. Lewis-Todd said. "DMH volunteers consist of currently licensed or retired mental health professionals," she explained. "The Red Cross offers online and classroom training to prepare clinicians to utilize their skills and expertise in the context of the Red Cross mission."

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## Magistrate Says Lack of Federal Jurisdiction in Cerwonka v LSBEP

Magistrate Judge Carol B. Whitehurst of the U.S. District Court Western District has recommended that a federal lawsuit against the state psychology board filed by Dr. Eric Cerwonka, be dismissed based on lack of federal jurisdiction.

In August 2017, Cerwonka filed a lawsuit in federal court against the Louisiana State Board of Examiners of Psychologists (LSBEP) alleging violations of his Constitutional rights. This followed a July 2017 ruling by 19<sup>th</sup> Judicial District Court Judge Michael Caldwell negating a February 2017 LSBEP disciplinary decision against Cerwonka, on grounds that the board's methods "... violated the Constitutional rights of Dr. Cerwonka."

In Whitehurst's "Report and Recommendation," filed March 26, she finds that the Louisiana State Board of Examiners falls under the umbrella of state immunity provided by the Eleventh Amendment.

Dr. Cerwonka and his attorney have fourteen days from service of the Report and Recommendation to file specific, written objections.

In Whitehurst's Report, she wrote, "The Eleventh Amendment bars an individual from suing a state in federal court unless the state consents or Congress has clearly and validly abrogated the state's sovereign immunity," wrote Whitehurst. Citing *Fairley v. Louisiana*, (5<sup>th</sup> Cir. 2007), a

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### Science & Education

## LSU's Dr. Zhang Helps Consulting Psychologists with Data Visualization

Louisiana State University Assistant Professor Dr. Don Zhang is taking on a decades old problem—how do psychologists meaningfully communicate their findings to others, so that the value of research is clear and used properly?

Dr. Zhang was highlighted by author Michael Litano in two

recent issues of *The Industrial Psychologist*, published by the Society of Industrial-Organizational Psychologists. Litano interviewed Zhang and other experts for, "Lost in Translation: Visually Communicating Validity Evidence." The aim was to better describe and understand the critical role data visualizing

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Dr. Don Zhang, LSU Assistant Professor, at the IO psychology track of the Louisiana Psychological Association in 2017. Dr. Zhang is helping psychologists find ways to better describe their validity results with data visualization methods.



# Editorials and Opinions

## Prosecutors

by Times publisher, J. Nelson

I reported on some of the facts of what happened to Beverly Stubblefield in the March issue (*Psychology Times*, Vol 9, No 3). Her story adds to my concerns about today's "prosecutors" and if we have slipped off into a social dynamic that is dangerously cooking under the surface of our society.

I present below some of my opinions about what happened to Beverly (and the others) noting that I have no legal training at all. I do have, however, a pocket copy of the Constitution. Several copies as a matter of fact.

First, by way of introduction, I will say that I am a bit taken back by the lack of critical-thinking displayed in the trial transcripts I reviewed. This might be because by the time of the trial, there was no more "investigation," but only "prosecution," and the motivated reasoning overwhelmed coherent themes emerging that could then organize the facts or test them by logical analysis.

Of central importance to this was the charge of "conspiracy," which is used for drug lords, terrorists and organized crime bosses. This charge empowers the government to "cut the legs out from under the defendants," and they did this to Beverly by seizing her house, bank accounts, retirement and cash. She had to plead guilty because she had no way of defending herself. Neither did the others.

The government framed and primed this idea of big-time crooks, right from the beginning. The first thing any of us heard was a sensationalized press release: "... \$25.2 Million Fraud Scheme..." and "...a large-scale Medicare Fraud takedown..." The names of the attorneys involved were prominent in the news release and they congratulated their team, called the " Medicare Fraud Strike Force."

I know that the government's priming and framing worked, because it worked on me. I immediately assumed guilt because the news

release seemed to say so. I even avoided reporting on it, because I believed what I read. Shame on me.

The Hesson companies were not "large-scale" anything. The company was by standard measures, a "small business" with yearly revenues more around \$2.8M and an even less impressive profit considering the 20 or 30 employees, whose payroll could cost 80% of revenues.

The prosecution seemed to hang the defendants on the total number of "units" of testing being billed, and a few of what Dr. Ralph Dreger called, "the extraordinary case of one," where some elderly person had been evaluated a few days before they passed away or someone too cognitively impaired to complete a test, was evaluated.

The prosecutors made hay with these examples, anchoring the concepts of fraudulent work—some type of nest of 20+ greedy, psychopathic psychologists participating in overt, organized crime. This is an extremely low probability event, low enough to be virtually impossible, sort of like pigs flying.

I do think that Beverly's Constitutional rights were violated. I have no legal training but the 4<sup>th</sup> Amendment prohibits unreasonable search and seizure, the 5<sup>th</sup> protects due process, the 6<sup>th</sup> ensures Miranda, and the 8<sup>th</sup> prohibits excessive fines or cruel and unusual punishments.

Beverly was interviewed by the FBI without being informed that she was being charged or investigated. She was not read her Miranda rights. She was never informed that she had been indicted. She learned of it when a patient told her they'd read about her in the newspaper.

In the trial transcripts there were many charts and facts presented that defendants did not understand or did not know where the data came from. There were also charts that were shown to be calculated wrong or data displayed incorrectly.

Her punishment having to do with "restitution" seems excessive and cruel. She made \$89K for five years. Her restitution comes to \$1,733,378 *more* than she ever received. In fact, all the defendants' restitution was set at more than was billed, so they are even "paying back" what Medicare didn't pay. How is that reasonable?

How is it that she and the other defendants got a fair trial? The prosecutors were motivated to create the charge of "conspiracy" because it extends their powers and they are rewarded with the seized resources. With the "conspiracy" charge, the psychologists never had a chance at a defense. Also, I saw in the transcripts what I consider evidence of the Stockholm syndrome in John Teal and to a lesser extent Beverly—understandable since their lives depended on it. Both have been destroyed professionally and financially.

It is ridiculous to think that Beverly got together and "conspired" with other psychologists to break the law. If these psychologists were "conspiring" they were the worse criminals ever, because their billing practices waved red flags right in the face of Medicare. I didn't see any evidence that anyone tried to hide anything. Personally, I believe that Rodney Hesson probably believed he was being a good entrepreneur, providing an innovative, low-cost service, and meeting an important need. Apparently the nursing homes thought so.

Despite some screwball billing being submitted to Medicare (you have to ask who had the professional death wish) I wasn't at all persuaded that "not medically necessary" meant fraudulent, which was part of prosecution's case. Especially given these services were ordered by physicians.

When my dad was in his last years I took him to a physical therapist who after six visits termed him to "not be improving" so that he did not qualify for treatment. I told the therapist that we'd just pay ourselves, but apparently that was not allowed, either. When my father was depressed and causing trouble, they put him on Geodon and turned him into a brittle diabetic, and there was never any comprehensive evaluation. I would have appreciated one, a great deal.

Overall, I'm saying the same as Judge Caldwell said—I don't care what Beverly did or didn't do, she deserved a Constitutionally valid process, fair trial and if found guilty, *reasonable* punishment.

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

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# Magistrate Says Lack of Federal Jurisdiction, continued

lawsuit involving the state medical board, Whitehurst wrote, “A suit against a state agency or department is considered a suit against the state under the Eleventh Amendment.”

Whitehurst recommends that the motion to dismiss for lack of federal jurisdiction be granted, and that the plaintiff’s claims against the Board be denied and dismissed without prejudice. (In a civil case, dismissal “without prejudice” is a dismissal that allows for re-filing of the case.)

Since Whitehurst recommends dismissal on jurisdictional grounds, she explained that she makes no recommendation on the LSBEP’s request for a dismissal based on failure to state a claim.

“When a district court finds it lacks subject matter jurisdiction, its determination is not on the merits of the case, and does not bar the plaintiff from pursuing the claim in a proper jurisdiction,” she wrote.

In the Report, Whitehurst stated that the party asserting jurisdiction bears the burden of proof for a 12(b)(1) motion to dismiss, such that, “the plaintiff constantly bears the burden of proof that jurisdiction does in fact exist.”

“The plaintiff’s argument that the Board’s financial autonomy prohibits the Board from being a state agency is not persuasive,” wrote Whitehurst.

“A legally sufficient complaint must establish more than a ‘sheer possibility’ that plaintiffs’ claim is true. Id. It need not contain detailed factual allegations, but it must go beyond labels, legal conclusions, or formulaic recitations of the elements of a cause of action.”

“Although acknowledging there is no jurisprudence directly finding that the Louisiana State Board of Examiners of Psychologists, which was created by the Louisiana Department of Health and Hospitals (“LDHH”), is a state agency, defendant argues the Board is similar to the Louisiana

State Board of Medical Examiners, which was also created by the LDHH, and which has been held to be a state agency entitled to Eleventh Amendment immunity. Because the Board argues it has not waived its immunity from suit, it asserts the plaintiff’s claims against it are barred.

In *Fairley*, the Fifth Circuit recognized that the Louisiana State Board of Medical Examiners is a state agency for purposes of Eleventh Amendment Immunity.

“The Louisiana State Board of Examiners of Psychologists argues that the statute creating its existence and the statute creating the Board of Medical Examiners are similar, with similar powers and rights being granted to each Board, and with each Board being subject to the provisions of La. Rev. Stat. 36:803.4. Each board is created within the Louisiana Department of Health and each is given oversight over their respective fields.”

Attorney for Cerwonka, Brown Sims attorney Mr. L. Lane Roy, had argued in the “Opposition of Plaintiff to Defendant’s Motion to Dismiss,” filed on November 30, 2017:

“An important case for this Court’s consideration on the issue of the Eleventh Amendment Immunity is the United States Supreme Court decision in the matter of *North Carolina State Board of Dental Examiners vs. Federal Trade Commission*, 135 Sup. Ct.1101(2015). While the *North Carolina State Board* case involves as one of its principal issues federal anti-trust laws, one of the main topics decided by the court was whether the State of North Carolina possessed Eleventh Amendment immunity from application of the federal law and its being subject to suit before the federal courts. In a lengthy discussion, the court found that North Carolina did not possess Eleventh Amendment immunity.” [...]

“Here, there is absolutely no showing whatever that the State of Louisiana had active control over the Board in this matter and in fact, the exact opposite is correct.”



Federal Court in Lafayette  
(US Gov. photo)

“The State has virtually no control of this agency as shown by the decisions that its rendered in this matter, not involving a state person but private attorneys hired for the persons, private investigators, private members of the community acting as judges at the hearing before the Board, private employees acting as persons, though illegally, who made decisions on interim suspension without a hearing whatsoever,” Mr. Roy wrote.

Counsel for the LSBEP, Attorney General Jeff Landry, signed for by Jeremiah Sams, Assistant Attorney General, wrote that, “Under the Eleventh Amendment of the United States Constitution, an unconsenting state is immune from any lawsuit seeking monetary damages or equitable relief brought in federal courts by her own citizens or by the citizens of another state ...” And, he wrote, “The Board is an agency of the State of Louisiana.”

In another section of the Attorney General’s “Motion to Dismiss,” Sams wrote, “Alternatively, Plaintiff has failed to state a claim against the Board under 42 U.S.C. §1983, as the Board is not a “person” under the meaning of §1983.

“To state a claim under §1983, a plaintiff must establish that a *person*, acting under color of law, deprived him of some constitutional right.

“State agencies and state officials acting in their official capacity are not ‘persons’ within the meaning of the statute, and it is a well settled point of law that a state is not capable of being sued under 42 U.S.C. § 1983, as the state is not a “person” under 42 U.S.C. §1983.34” [...] “Accordingly, Plaintiff’s §1983 claims against the Board should be dismissed.”

Cerwonka also filed an amendment to the complaint adding Ms. Jaime Monic, current Executive Director, to the lawsuit.

The matter of state supervision of the boards has been a topic for some legislators since the 2015 Supreme Court decision. In 2016 Senator Fred Mills put forth a measure creating the Task Force on Meaningful Oversight to help address compliance with the *North Carolina v. FTC* and minimize exposure to antitrust claims. In the Task Force’s report, in this case having to do with antitrust laws, authors wrote, “a board must satisfy two prongs in order to claim state action immunity.” One involves the “inherent, logical, or ordinary result of the exercise of authority delegated by the state legislature.” The second prong is “active supervision,” satisfied by having a state review and approval of board’s policies. Mills put forth legislation in 2017 to help remedy the supervision issue and also this year, in his SB 40.

According to a report by the Louisiana Legislative Auditor published in 2017, individuals can file general liability claims against the state because Louisiana waived sovereign immunity in the 1974 Constitution. State law limits damages to \$500,000 for personal injury and wrongful death claims. However, there is no cap on economic damages or medical expenses, according to the report, “Types and Costs of General Liability Claims, Office of Risk Management.”

Between 2010 and 2015 the state paid over \$42M in Constitutional and Civil Rights violations, the Auditor reported.

## Corrections & Clarifications

Nancy Arnold, the Administrative Coordinator for Graduate Studies at LSU Psychology strikes again. She corrected Dr. Tucker’s title as Assistant Professor, page one. Thank you Ms. Arnold, once more. Send your corrections to:  
[psychologytimes@drjulienelson.com](mailto:psychologytimes@drjulienelson.com)



# Suicide Prevention Act Passes House Vote

HB 148 by Representative Reid Falconer, the “Louisiana Suicide Prevention Act,” was reported favorably in a 9 to 0 vote out of committee on March 22 and passed the House this week in an 85 to 0 vote.

The initiative requires the office of behavioral health to ensure that administrators of all healthcare facilities licensed by LDH and that all healthcare professionals licensed by any Louisiana board or commission have ready access to informational resources and technical assistance necessary for implementation of the zero suicide initiative.

The office of behavioral health is to examine and coordinate the use of existing data to identify priority groups of patients, improve the quality of care for persons who are suicidal, and provide a basis for measuring progress in the ongoing operation of the zero suicide initiative.

According to the Legislative Fiscal Office, the proposed law will increase SGF expenditures for the LA Dept. of Health, Office of Behavioral Health by an indeterminable amount. Cost estimates provided by OBH indicate that expenditures are anticipated to total approximately \$748,950 in FY 19 with a phase-up of to approximately \$792,900 in FY 20 before leveling off at approximately \$790,000 in FY 22 and in subsequent years.

## Bill to Assist Incarcerated Women Pending

SB 374 by Senator Regina Barrow is scheduled to be heard in Senate Judiciary B this week and would require the Department Public Safety and Corrections to provide for incarcerated women in a manner that address their particular needs. These would include: Health screening and projected health care needs; Plan of care for a child or children; Wellness education program; Pregnancy; Counseling and support services; Geriatric care; Mental health screening; and Mental health services.

The proposed law expresses the legislative intent and desire that services offered to state and private correctional institutions and facilities should address the unique issues of incarcerated women based upon female specific health issues, social and psychological needs, family commitments, and issues surrounding children.

OBH reports a need for 2 positions for expanded personnel associated with the initiative. The 2 positions contemplated are a program manager (\$123,617 salary and related benefits annually) and a program monitor (\$108,015 salary and related benefits annually) for annual total costs of approximately \$232,000. Personnel expenditures will be prorated for 9 months in FY 19, which will total \$174,000. A majority of the projected recurring expenditure increases (\$438,000), will be undertaken by the Human Services Districts and Authorities that will implement the initiative at the local level statewide via interagency transfers from OBH, reported the Fiscal Office.

If passed, the proposal will require a “State Suicide Prevention Plan” to be created and office of behavioral health shall collaborate with criminal justice and health systems, including mental health and behavioral health systems, primary care providers, physical and mental health clinics in educational institutions, colleges and universities, community mental health centers, advocacy groups, emergency medical services professionals, public and private insurers, hospital chaplains, and faith-based organizations to develop and implement all of the following, which shall be included as elements within the state suicide prevention plan.

# Resolution Asks Law Institute to Study Child Custody Evaluations

Senate Resolution 46, authored by Senator Jonathan Perry, requests the Louisiana State Law Institute to review state laws, rules, regulations, policies, and procedures relative to mental health evaluations used in child custody and visitation proceedings. The measure is pending for Senate Judiciary A and scheduled for this week, April 3.

The measure notes that Louisiana has two statutes, R.S. 9:331 and 9:355.15, that govern mental health evaluations in child custody and visitation proceedings, and these were enacted in 1993 and 1997.

No modifications or updates have been made since that time, “on conducting mental health evaluations in child custody and visitation proceedings, including the expertise of the mental health professional conducting the evaluation...” and according to reported decisions, mental health evaluations have increased at least ten-fold since the 1990s, and more recently have doubled in the last eight years.

Included in the topics for review requested are selection of a particular professional to conduct the evaluation, qualifications of the professional to conduct the evaluation, and communications between counsel and the professional conducting the evaluation. Specifically the measure notes, “... there is confusion as to whether R.S. 9:331 or Code of Civil Procedure Arts. 1464, 1465, and 1465.1, relating to experts, apply in a child custody and visitation proceeding,” and “there is further confusion as to whether, when, and how Code of Evidence Arts. 702 through 706 regarding experts and 801 through 804 regarding hearsay apply in child custody and visitation proceedings when a mental health evaluation is ordered.”

*Please welcome*  
**Heather Pedersen, PhD**  
*to the community!*

Dr. Pedersen is a clinical neuropsychologist with experience assessing memory disorders, dementia, multiple sclerosis, and other neurocognitive problems. She will be joining us at Algiers Neurobehavioral Resource, LLC in May 2018 when she moves here from Arizona.



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# Several Bills Focus on Occupational Regulation

A number of bills are being reviewed by lawmakers that concern the occupational boards, regulations, supervision, and other matters.

Representative Julie Emerson's bill to review and control occupational licenses was adopted on the House floor and is now HB 748. The bill was heard in committee and reported by substitute in a 14 to 0 favorable vote. It is scheduled for floor debate on April 5.

The proposed law creates the office of supervision of occupational boards "office" within the office of the governor. According to the digest, the measure causes a review of occupational licenses and reports to the legislature and attorney general so to recommend the legislature enact legislation that may do any of the following: (a) Repeal occupational regulations; (b) Convert the occupational regulations to less restrictive regulations as defined in R.S. 37:42; (c) Instruct the relevant licensing board or agency to promulgate revised regulations reflecting the legislature's decision to use a less restrictive regulation. One aim is to increase economic opportunities, promote competition, and encourage innovation.

SB 494 is pending and would establish the Occupational Licensing Review Act. The measure is proposed by Senator Thompson and similar to HB 748. The proposal creates the office of supervision of occupational boards with the office of the governor and provides for repeal of occupational regulations and less restrictive regulations, similar to HB 748. Proposed law provides for interpretation of statutes and rules Proposed law provides for interpretation of statutes and rules so that occupational regulations shall be construed and applied to increase economic opportunities, promote competition, and encourage innovation; that any ambiguities in occupational regulations shall be construed in favor of working licensees, aspiring licensees, and persons aspiring to work in regulated occupations, and that the scope of practice in occupational regulations is to be construed narrowly so as to avoid its application to

individuals who would be burdened by regulatory requirements that are only partially related to the goods and services they provide.

Senator Fred Mills' bill to restructure health care boards remains pending in the Senate Health and Welfare Committee.

He has paired down last year's effort to restructure the health care boards, and is proposing SB40 which contains several of the components of last year's SB75, including adding a consumer member to each board and removing the professional associations from

the board's nomination process.

SB40 would transfer the extensive list of boards, commissions and agencies to the Louisiana Department of Health (LDH). Included will be the boards for psychology, counselors, social workers, and the other 22 healthcare boards. These are the boards for dentistry, nursing, optometry, pharmacy, medicine, physical therapy, speech-language, addictive disorders, vocational rehab, behavior analyst and others.

**Cont'd next pg**

# AG Seeks to Ramp Up Medicaid Fraud Prosecutions

In a March 29 press release the Attorney General, Jeff Landry, asked congress to expand the authority of Medicaid Fraud Control Units to “be able to go after Medicaid patient abuse in non-institutional settings.”

The AG joined 48 other state Attorneys General in a letter supporting new legislation to expand the Units, U.S. House Resolution 3891, “a proposal to permit MFCU/s to detect, investigate, and prosecute Medicaid patient abuse.”

According to the release, Landry said, "Those involved in Medicaid welfare fraud, either recipient fraud or provider fraud, must be brought to justice."

"We commend this bipartisan Resolution that will assist us in ramping up our efforts to protect Louisiana citizens."

## Bill to Limit Factitious by Proxy

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# Senator Luneau Proposes “Behavioral Health Services Provider Licensing Reform Law”

Senator Luneau filed SB 519 this week that appears to provide for additional service providers in counseling, social work, or psychology, and to support treatments in Medicaid areas of “Community psychiatric supportive treatment,” or CPST, and “Mental health rehabilitation,” and “Psychosocial rehabilitation” or PSR.

The Act shall be referred to as the "Behavioral Health Services Provider Licensing Reform Law" and it outlines qualifications for providers for CPST and PSR for Medicaid reimbursement, according to the digest.

## Occupational Regulation, cont'd

The proposed law adds at least one consumer member to any board that did not previously have one and provides standardized eligibility criteria of consumers to serve on any board.

Present law provides for professional trade associations and other entities to select and submit nominees to the governor for board appointment.

The proposed law opens board nomination eligibility to any member licensed by the board who is interested and eligible. Proposed law requires the board to send notice to its licensees to fill board positions and submit the names of those interested and eligible to serve to the governor for board appointment.

Representative Connick has put forth HB 372 aimed to also address aspects of the anti-trust matters surfaced by a 2015 Supreme Court decision.

The measure would create the Occupational Board Compliance Act. Policies provided in proposed law, are intended to ensure that occupational licensing boards and board members will avoid liability under federal antitrust laws. If passed the law would create the Occupational Licensing Review Commission to be composed of the governor, the secretary of state, and the attorney general or his respective designee. Establishes the governor as the chairman of the commission and the secretary of state as the secretary.

HB 372 would establish the commission's responsibility for active supervision of state executive branch occupational licensing boards controlled by active market participants to ensure compliance with state policy in the adoption of occupational regulations promulgated by an occupational licensing board, according to the digest.

The present law provides for licensing of behavioral health services providers by the Louisiana Department of Health. The proposed law adds definitions for certified mental health professionals, community psychiatric supportive treatment (CPST), mental health rehabilitation, and psychosocial rehabilitation (PSR) to the definition provisions of present law.

If passed the law would be named the "Behavioral Health Services Provider Licensing Reform Law." At this point is would focus on qualifications for providers for CPST and PSR for Medicaid reimbursement.

“Proposed law provides that only a certified mental health professional or an individual who is not certified, but who met present law criteria for providing PSR services and did so on a full time basis for a year prior to August 1, 2017, may provide PSR services and be reimbursed by the department for providing the services.

“Proposed law provides that CPST shall be provided by a certified mental health professional with a master's or doctorate in counseling, social work, or psychology from an accredited university or college.

“Proposed law provides that in order to receive Medicaid reimbursement for CPST or PSR services, the provider agency, certified mental health professional, or other individuals allowed by law, shall have a national provider identification number, be fully accredited by a nationally recognized accrediting organization, be licensed by the department, and be credentialed by the Medicaid managed care organization in which the provider intends to submit claims for services.”

CPST is a face-to-face intervention with the individual present. A minimum of fifty-one percent of CPST contacts must occur in community locations where the person lives, works, attends school, or socializes. "Mental health rehabilitation" means outpatient behavioral health services which are medically necessary to reduce the disability. These services are home- and community-based and are provided on an as-needed basis. PSR is designed to assist the individual with compensating for or eliminating functional deficits and interpersonal or environmental barriers associated with mental illness.

# APA Council Reps Votes to Accredit Masters Programs

On March 9 at a meeting of the Council of Representatives for the American Psychological Association, held in Washington DC, delegates passed a motion for the association to seek accreditation of master's level programs in psychology.

Current Representative for the Louisiana area, Dr. Lucinda DeGrange told members of the Louisiana Psychological Association that it was a “historic motion.”

The vote, representatives from each state and each Division, endorsed the move by a 92 percent to 6.6 percent margin.

Accreditation of educational programs may be a first step in credentialing of master's level providers, a topic researched by the Louisiana Psychological Association. Last year the state psychology board reviewed the topic with public attendees, at its Long Range meeting in the late fall, 2017.



## American Board of Medical Psychology

### The Specialty for the Coming Integrated Care Models in Primary Care Centers and Hospitals

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State & National News

Legislators Work to Improve Louisiana’s Health, continued

There are a number of disparities that in his view may have mental health implications. One is poverty. The rate for African-Americans is roughly double that for Whites—30% vs. 14%, and disparate from US averages—22% and 9%, he noted.

African-Americans have double the death rate from diabetes—40/100,000 population vs. 20/100,000 for Whites, he said. “Diabetes is a condition very much related to behavioral health including nutrition, exercise, and compliance with treatment regimens.” Related to this, 75% of African-Americans are obese vs. 66% for Whites, he said.

He is concerned that future changes in Obamacare could reverse the gains made in the uninsured rates, now almost even. But, regarding type of insurance, 40% of African-Americans have Medicaid vs. 21% of Whites and Medicaid behavioral health benefits are much less available than through private insurance, he noted. More than 50% of African-Americans have either no health insurance or Medicaid only.

Dr. Leonhard is a member of the Louisiana Psychological Association (LPA) task group to study innovations in healthcare, a committee chaired by Dr. Lacey Seymour. LPA members worked in concert with the team created by Representative Norton’s 2017 House Concurrent Resolution No.55.



Dr. Missy Bonnell (R) speaking about health and psychology at previous conference. Health psychologist Dr. Chris Leonhard (L) chairs the panel with Dr. Erin Reuther (left of center at table) and Dr. Robin Chapman (right of center), also panelists and health psychologists, listen to the presentation.

Norton asked for a study to evaluate Louisiana’s current system of healthcare delivery for Medicaid enrollees, and especially with concern for those with serious mental illness. She noted that people with mental illness are more likely to have chronic health conditions, such as high blood pressure, asthma, diabetes, heart disease, and stroke.

In her Resolution she noted that 50% of Medicaid enrollees have a mental health diagnosis and people diagnosed with mental illness and common chronic health conditions have healthcare costs that are 75% higher than those without a mental health diagnosis.

Representative Norton has proposed help for those with

serious mental illness again this year with HB 647. Her bill defines "Medicaid health home state plan option" as the option which allows states to design health homes to provide comprehensive care coordination for Medicaid beneficiaries with chronic conditions.

HB 647 would require a health home state plan and set the minimum required services for Medicaid enrollees with a serious mental illness, the creation of an interdisciplinary team for each participating Medicaid enrollee, and demonstrating clinical competency and evidence-based protocols.

HB 647 requires health home services that operate under a "whole person" approach to care using a comprehensive needs assessment and integrated person-centered care planning.

This type of whole person approach is at the center of the work of Dr. Deborah Palmer-Seal, who also served on the LPA task force. She is Lead Psychologist with the Health and Education Alliance of Louisiana (HEAL) and their program, the Coordinated Care for the Whole Child program or CCWC.

The CCWC Program includes physical health screenings, student action plans developed with school staff to address academic and behavioral concerns, and appropriate medical referral activities are provided to improve the academic achievement and physical well-being of each child.

Last year HEAL gathered results on the benefits to youngsters in the program. They studied outcomes of 6,262 children, screened over the three-year program period. Most children

were African American (74.1%), followed by Hispanic (14.3%), Caucasian (10.1%), and other (1.6%).

Statistically significant improvements were found in academic achievement, in behavior and discipline, and in attendance.

In a previous interview, Dr. Palmer-Seal explained the importance of the coordinated care and whole person model. “The multidisciplinary nature of our project ensures that we are addressing the whole child, and not just an isolated symptom of a larger issue,” she said. “The integration of mental health services into the school setting makes so much sense in terms of access to services, but also in maximizing student outcomes.”

Palmer-Seal provides classroom observations so she can identify a student’s triggers & behaviors, as well as teacher related behaviors and strategies. She also provides behavior management strategies, small group interventions for social skills, emotional literacy, emotional regulation, grief, and anger management, for example. She provides, “a clinical psychology ‘lens’ in meetings addressing students’ with challenging behavior to ensure that real mental health issues aren’t missed or misrepresented,” she noted.

Dr. Leonhard said, “There is much psychologists already know about seizing opportunities as health service psychologists in interprofessional care settings,” he said. “Our skills in being team players with other allied health professionals as we collaborate to prevent, assess, and improve health conditions will be particularly helpful.”



Dr. Deborah Palmer-Seal presenting about the Whole School Whole Community Whole Child model at a previous conference.



# Psychologists and Psychological Scientists Present at Southeastern Psychological Association in Charleston, SC

A group of psychological scientists, practitioners, professors and students exhibited their research at the 64<sup>th</sup> Annual meeting of the Southeastern Psychological Association, held March 6–9 in Charleston, South Carolina.

Drs. Michelle Moore, Kristin Callahan, and Jennifer Hughes from LSU Health Sciences Center and Stacy Kurtz, Adelphi University, presented, “Effective and Supportive Clinical Supervision.

In this Continuing Education workshop, the presenters discussed that supervision is an opportunity for personal and professional growth, and for many years, was learned through on the job training.

Effective supervisors establish a safe, supportive relationship with a trainee. The purpose of this workshop was to provide an overview of the models of clinical supervision and to discuss recent changes to course requirements and training expectations.

Researchers from across the state presented poster presentations at SEPA, these included, “The After-effects of Intentions: Spontaneous

Retrieval, Commission Errors, and Cost,” presented by Jason L. Hicks, Samantha N. Spittler, & Megan H. Papesch, Louisiana State University.

Daniella Cash, Samantha Knotts, Bryanna Jones, Hailey Allo, Alora Cleere, Niels Dickson, Louisiana State University, Deah Quinlivan, Florida Southern College, & Sean Lane, Louisiana State University, presented, “Evaluating Pre-Trial Publicity for Both Victim and Defendant on Verdicts.”

“The Unrecognized Benefits of Attention Allocation in Prospective Memory,” was presented by Marissa Lass, Juan Guevara Pinto, & Megan Papesch, Louisiana State University.

“TMI: Justifications Detract from Expressions of Confidence,” was presented by Daniella Cash, Niels Dickson, Alora Cleere, Hailey Allo, Bryanna Jones, Samantha Knotts, & Sean Lane, Louisiana State University

Laura Gomez, Ana N. Longo Colon, & Erin Dupuis (Faculty Sponsor), Loyola University New Orleans, presented, “Effect of Political Statements on Attitudes and Behavior Toward Women.”



Dr. Michelle Moore (L), seen above at a previous conference with Toni Tyson, presented at SEPA in South Carolina, along with colleagues Kristin Callahan and Jennifer Hughes from LSU Health Sciences Center.

“Retirement Goal Self-Concordance and Subjective Well-Being,” was presented by Charles Nichols, Loyola University New Orleans.

And research titled, “Examining Lay Perceptions of Intergroup Stressors and Well-Being,” was presented by Lisa Molix, Tulane University, & Charles Nichols, Loyola University New Orleans.

## SB 411 on Insanity Verdict Reported Favorably

Senator White’s measure was reported favorably out of the Committee on Judiciary C and is pending Senate vote.

The present law provides that when a verdict of not guilty by reason of insanity is returned in a capital case, the court is to commit the defendant to a proper state mental institution or to a private mental institution approved by the court for custody, care, and treatment. Present law provides that when the superintendent of a mental institution is of the opinion that a person committed pursuant to present law can be discharged or can be released on probation, without danger to others or to himself, he is to recommend the discharge or release of the person in a report to a review panel comprised of the person's treating physician, the clinical director of the facility to which the person is committed, and a physician or psychologist who served on the sanity commission that recommended commitment of the person. Present law further provides that after review the panel is to make a recommendation to the court.

Proposed law retains present law and adds that a recommendation that the person be discharged or released on probation requires a unanimous vote of the panel. Proposed law further provides that the panel must render specific findings of fact in support of its recommendation. Proposed law makes present law applicable to persons found not guilty by reason of insanity of the enumerated present law crimes.

Proposed law retains present law and adds that the 10-year "cleansing period" contained in present law applies to persons found not guilty by reason of insanity of the enumerated present law crimes.



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# LSU’s Dr. Zhang Helps Consulting Psychologists with Data Visualization

efforts have for psychologists, who must find meaningful ways to visually and verbally communicate complex issues like validity, to clients, customers, students, and others.

Don Zhang, PhD, is an Assistant Professor in the Department of Psychology at Louisiana State University, was interviewed for part one, and helped author part two of the “Lost in Translation” article.

Zhang’s current research focuses on data visualization, specifically communicating validity information to relevant stakeholders. His research involves the application of psychological principles to the workplace. He is also interested in the individual differences in risk taking propensity and the relations to life and work outcomes such as job performance, counter productivity, and safety compliance. His work has been published in various international journals and books.

In “Lost in Translation,” Litano and experts point to the meaning of reliability and validity, and review the different types.

“In psychology, we are trying to measure more elusive characteristics such as personality, interests, et cetera, and we have to settle for a less precise scale than the bathroom scale,” Dr. Zhang said in the article. “In those situations, we use surveys or expert judges to measure characteristics that we cannot see. But our measurement instruments function very similarly. Like a bathroom scale, we want our psychological instrument to produce consistent results every time, which is a lot more difficult. Our job is to create the most accurate scale as possible even though we are trying to measure more elusive things.”

Regarding types of validity, Dr. Zhang said, “Content-related validity answers the question: ‘Is the content of my test relevant to the construct we are trying to measure?’” and used an NFL example, showing that all tests used need to be relevant to the construct of athletic ability.

“The 40-yard dash would be a better test than a hot dog eating contest because, in theory, speed is one aspect of athletic ability, and hot-dog eating is not. You also need to make sure all aspects of athleticism are measured: If you only use the bench press but do not ask the players to run, you are missing out on important aspects of a person’s athletic ability. [...] Psychological measures work the same way. If a survey is designed to measure conscientiousness, it needs to have all the items related to the concept of conscientiousness.”

“Construct validity is the degree to which the instrument is measuring the construct it intends to measure,” he said. “It’s easy to look at the numbers on a bathroom scale and be confident that it is your weight. But if you get a 4.5 on a conscientiousness test, how can we be sure that the score reflects your

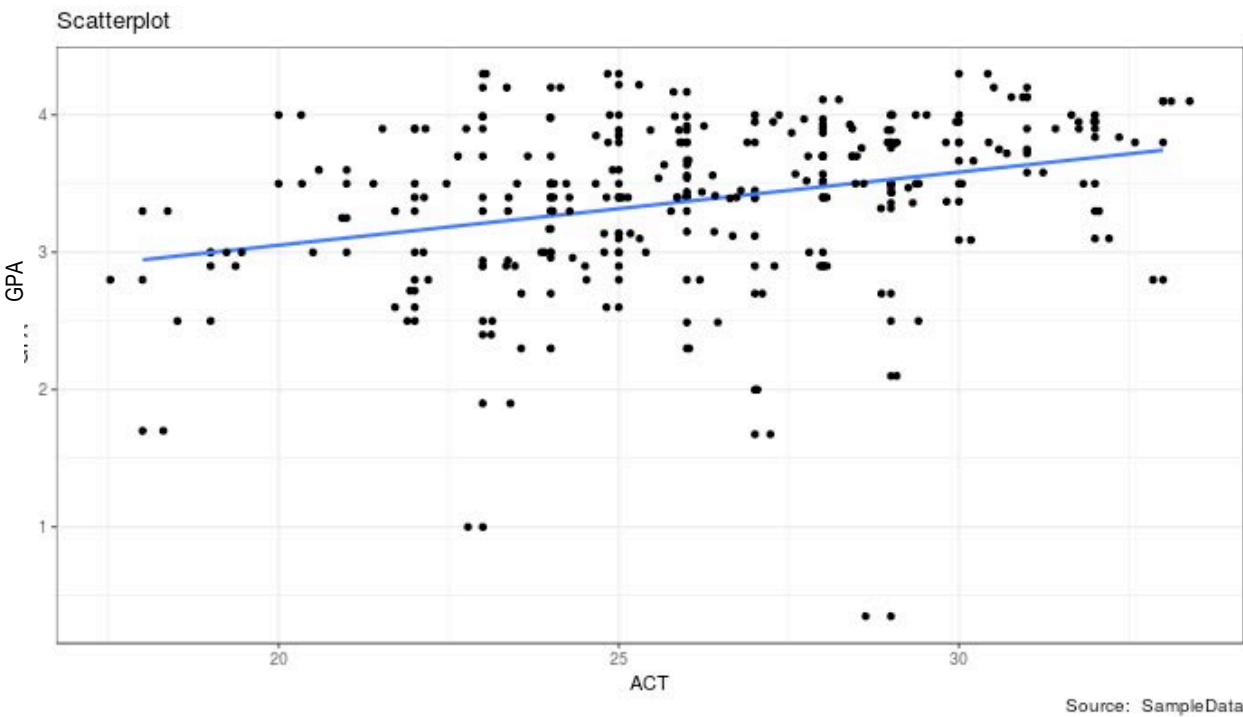


Figure I. Dr. Zhang’s example of traditional scatterplot, and a .30 correlation between ACT scores and GPA. “Not particularly impressive,” he points out in the TIP article.

## Expectancy Chart

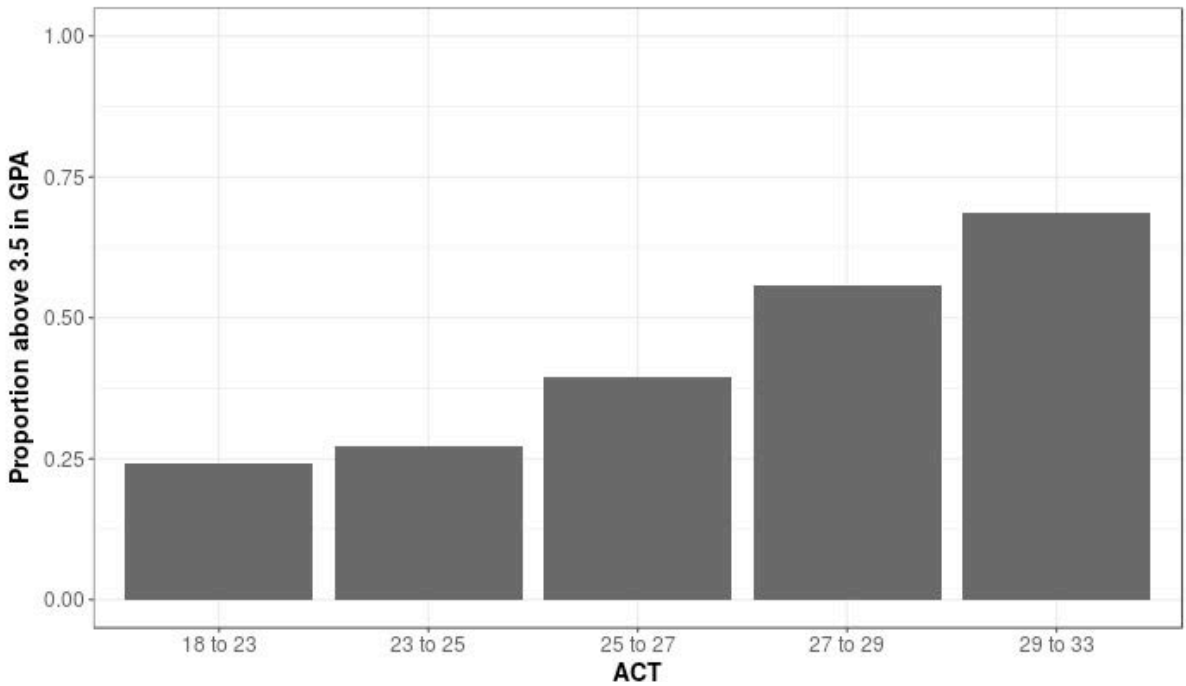


Figure II. Same data placed in expectancy chart. Clients can much more easily see the students in the top quintile of ACT have 70% chance of making Dean’s List while those in the bottom quintile have less than a 25% chance. (Charts courtesy of Dr. Zhang.)

conscientiousness and not something else?”

Do the test results predict behaviors in the real world? “This is called criterion validity,” Dr. Zhang said. “...we want to know is if a particular characteristic is related to the outcome of interest. Does athletic ability relate to success in the NFL? If they have nothing to do with each other, then we know that athletic ability is not important criteria when predicting NFL success.”

In part two of “Lost in Translation,” authors try and answer the question. “How does one effectively communicate validity evidence using only visualization?”

The authors noted the difficulty they had obtaining good examples of validity visualization from volunteer psychologists. Most were too academic

and technical, confusing, or poor examples of validity.

For the second article Dr. Zhang takes on the challenge, using an example of how the information in a typical scatterplot is understood and then he compares the same data being explained in an expectancy table.

“The plot ... [see Figure I] illustrates the relationship between ACT and college GPA, which has a validity of  $r = .30$ : not particularly impressive,” he wrote. “At a glance, the relationship depicted in the scatter plot appears equally unconvincing. Yet, scatter plots are the primary method for visualizing linear relationships.”

“Alternatively, one can use an expectancy chart [...]. Expectancy charts communicates the relationship between



# LSU’s Dr. Zhang’s Data Visualization continued

two variables (e.g., ACT score and GPA) by presenting the proportion of the sample with score above a cut-off criterion (e.g., GPA above 3.5) at a given score interval on the predictor (e.g., ACT score between 25 to 27).”

“Believe it or not, the expectancy chart ... [Figure 2] is generated with the same data as the scatter plot. Based on the expectancy chart, one can easily see the predictive efficiency of the ACT.”

“Students in the top quintile of ACT have approximately 70% chance making the Dean’s List (GPA above 3.5) at most universities, whereas students in the bottom quinile of ACT have a less than 25% chance (25% takes on a whole new meaning in this context).”

Dr. Zhang says that despite the benefits of these types of displays for communicating about validity, there are no accessible tools available.

So, he’s developed his own.

“In order to facilitate the calculation of nontraditional effect size displays, I’ve created a free-to-use web application that allows scholars and practitioners to easily generate and visualize a variety of nontraditional effect sizes such as expectancy charts, CLES, and binomial effect size displays with their own data,” Zhang says.

The site is Shiny Alternative Effect Size Calculator or ShinyAESC, found at <https://dczhang.shinyapps.io/expectancyApp/>).

Don Zhang, PhD, Assistant Professor in the Department of Psychology at Louisiana State University, received his PhD in Industrial and Organizational Psychology from Bowling Green State University.

He works closely with organizations to create evidence-based plans and deliver solutions that are tailored to their unique needs. He can be reached at [zhang1@lsu.edu](mailto:zhang1@lsu.edu) (Twitter: @zdon89). His lab web page is <https://sites01.lsu.edu/faculty/zhanglab/>

# Stress Solutions

by Susan Andrews, PhD

## What’s New About Stress?

Actually, I was about to say, “Practically Nothing,” when I happened upon an article in the HuffPost entitled, “20 Scientifically Backed Ways to De-Stress Right Now.” Okay, I agree that we have scientific evidence that a lot of methods work, but 20 ways to de-stress immediately might be pushing it. So, read on and discover a couple of new ways that you might not have known about.

The early part of the list was now new. Although these are great techniques to reduce stress, most everyone knows them, and few enough actually DO them. Number 1 is Go for a 10 Minute Walk, in a park or green space if you can. Number 2 should probably have been listed first as everyone knows the value of breathing. Deep slow breathing stimulates the parasympathetic nervous system, you yawn and feel better. Number 3 on the list was to do a short self-guided visualization or imagine a vacation you enjoyed or one you are looking forward to. The suggested visualization in the HuffPost list is to “picture yourself in an elevator, happily sandwiched between two hot actors of your choice.” Might work!

Taking advantage of the newly labeled “gut-brain-axis” is the 4<sup>th</sup> scientific way to de-stress immediately: Eat a Snack (Mindfully). The article draws on Dr. Drew Ramsey’s new book, *The Happiness Diet*. In Dr. Ramsey’s words, “After all, stress is a brain and immune system mediated phenomena, and your gut is the largest organ in your immune system.” Dr. Ramsey is an assistant clinical professor of Psychiatry at Columbia University College of Physicians and Surgeons.

But the surprise was that the Number 5 suggestion on the list was totally new to me: Buy Yourself a Plant. According to this article, Houseplants are not just beautiful air purifiers; they actually can help induce a relaxation response just by being around them. The science is that a Washington State University study found that a group of stressed-out people in a room full of plants experienced a 4-point drop in their blood pressure, while the control group in a plant-less room only dropped by 2 points. HuffPost included an article on the 10 Best Houseplants to De-Stress Your Home. They also quote a 2008 Dutch study that found that patients in a hospital with plants in their rooms reported lower stress levels than patients in rooms without plants. And, the # 1 top stress-reducing plant is the dangerously sharp-leaved Aloe plant. Not only does it have the ability to help heal burns and cuts, but also it cleans the air and the leaves act like canaries in a mine by displaying brown spots on the leaves when there are a lot of pollutants in the room air. (Important FYI, the aloe plant has other relaxing uses.) They list English Ivy as Number 2 and a Rubber Tree as Number 3. Number 4 is a Peace Lily and Number 5 is the Snake Plant. The only one I knew about was the Snake Plant or Mother-In-Law Tongue. And, I only knew about its air purification qualities. The bamboo palm made NASA’s list of top clean-air plants with a score of 8.4 for clearing out benzene and trichloroethylene. And, if those chemicals are in your house, you will need more than a plant to relax.

I kinda got sidetracked on the List of 20 Scientifically Backed Ways to De-Stress Right Now. And, I am running out of column space. So, I will quickly finish the list without much comment. Number 6 is Step Away from the Computer Screen – frequently. Number 7 is Pucker Up. Enough said. Number 8 is Try this Naam Yoga Hand Trick; it totally works. Apply pressure to the space between your pointer and middle fingers; it creates a sense of instant calm. Number 9 is Hang Up, Then Turn Off Your Phone. And, Number 10 is Put on Some Music. That is one of my favorites. I’ll save the other 10 for another time. These tips for instant relaxation are easy to do and I hope try them out.



Dr. Susan Andrews, Clinical Neuropsychologist, is currently Clinical Assistant Professor, LSU Health Sciences Center, Department of Medicine and Psychiatry, engaged in a Phase III study on HBOT and Persistent PostConcussion Syndrome. In addition to private clinical practice, Dr. Andrews is an award-winning author (*Stress Solutions for Pregnant Moms*, 2013) and 2016 Distinguished Psychologist of the Louisiana Psychological Association.



People

# Dr. Lewis-Todd, Red Cross Leader Joins Community

continued

Dr. Tracy Lewis-Todd is a Clinical Psychologist and Family Therapist with thirty plus years of experience as a clinician in multiple treatment modalities, as well as positions as Clinical Director, and in Program Development and Supervision. Her areas of specialization are high-risk adolescents and families, addictions and dual-diagnoses.

Last November, Lewis-Todd provided, "Disaster Mental Health Worker Certification Training," last November for the Louisiana School Psychological Association. She plans on participating with the disaster relief discussion and strategic group at upcoming convention of the Louisiana Psychological Association this May.

The American Red Cross of Louisiana has a volunteer team of DMH professionals, Dr. Lewis-Todd explained, who are essential to the emotional and physical health and safety of volunteers, clients and employees affected by disasters.

"DMH volunteers may provide on-call phone support to survivors and responders in need of emotional support after local or regional disasters by providing psychological first aid," she said. They make "referrals to local behavioral health resources and other DMH interventions as appropriate."

She also said that some DMH volunteers will also engage with the Disaster Action



The Flood of 2016. Flooding east of Baton Rouge was considered ground zero, with areas that had over 30 inches of rain. Thousands lost their homes. (Courtesy of Coast Guard)

Teams (DAT) and respond on-scene to local disasters, such as home fires, floods, tornados, etc.

"When a major disaster or mass casualty incident occurs in Louisiana or in another state," she said, "DMH volunteers can deploy for 7-10 days to provide support at the site of the disaster. Pre-response staff support, staff mental health and disaster mental health instruction are also important roles of DMH."

"The American Red Cross also has a Services to the Armed Forces division which provides support and resources to our military personnel and their families," Lewis-Todd said.

"Licensed mental health professionals can be trained to teach Reconnection Workshops, offering guidance in coping with pre- and post-deployment stressors. These courses address issues including depression, management of stress and trauma, anger management and communication skills. Much of the focus is upon partners and families of the military."

Dr. Lewis-Todd said that recently this has been augmented by workshops teaching mind/body skills. In Louisiana, there has also been a significant emphasis on suicide prevention through the Applied Suicide Intervention Skills Training program, teaching principles and techniques of suicide first aid, she explained.

"The Red Cross is an excellent way to give back to your community based on your interests and availability," she said.

Dr. Tracy Lewis-Todd and her husband (also a Clinical Psychologist) retired to New Orleans in January of 2017 and immediately started volunteering for the Red Cross during the tornados in East Orleans. Since then she has volunteered for several other small and large disasters including a 3-week deployment to the US Virgin Islands after Hurricane Maria. Although her professional skills have transferred to her role in DMH, she said the most gratifying part "has been being part of a multi-faceted team of responders and experiencing the resilience, generosity and sense of community that emerge at times of disaster despite the disruption, grief and loss that impact everyone involved."

Those interested in learning more about the role of psychologists in Disaster Mental Health are invited to contact Dr. Lewis-Todd at [tracy.lewistodd@redcross.org](mailto:tracy.lewistodd@redcross.org).

For information about Services to the Armed Forces those interested can contact Thomas Todd, PhD and SAF Resilience Lead at [tom.todd@redcross.org](mailto:tom.todd@redcross.org).



August 22, 2016. Breaux Bridge, St. Martin Parish, Louisiana. "The majority of people are making it through this because they're working together," says Jodi Bocco, a Red Cross disaster mental health volunteer. Bocco is working in communities, meeting people like Miranda Melancon who were affected by the flooding.

(Photo by: Marko Kokic/American Red Cross. Courtesy of Red Cross.)



People

Dr. Janet Matthews Remembers APA President Ron Fox

Dr. Ron Fox, a past president of the American Psychological Association (APA), and whom many consider a key leader and “Founding Father” in psychology, passed away March 14.

Dr. Fox had a significant role in establishing the APA Practice Directorate, Div. 29 (Psychotherapy), Div. 55 (Psychopharmacology), and the Association of Psychology Postdoctoral and Internship Centers (APPIC). He advocated in Ohio for the founding of one the first Doctor of Psychology programs in the U.S. He was instrumental in establishing one of the first psychology licensing boards in the U.S. (Ohio) and he is considered the “grandfather” for prescription authority in psychology.

Louisiana’s Dr. Janet Matthews, PhD., ABPP-CL, clinical psychologist and retired Professor from Loyola University, came to know Dr. Fox through her long standing involvement and service to APA, including serving on the APA Board of Directors.

When she learned of his death, Matthews reminded psychologists that Dr. Fox was instrumental in developing a way for Louisiana to have a voice on the APA Council of Representatives, by conducting a conflict management activity at the national level.

“It was one of the most productive work groups I have ever experienced,” she said. “He explained the process of ‘interest-based bargaining’ to us. He then told us we would not be leaving that room until we had agreed on a proposal, that none of us would leave happy, and that it would at times be really uncomfortable in that room. That meeting led to the accepted plan giving each SPTA its own voice on the APA Council.”

Dr. Matthews has also served as Chair of the APA Board of Educational Affairs and as President of Division 31. She is a Fellow in APA Divisions 1, 2, 12, 29, 31, 35, 40, 42, and 52.

The *Psychology Times* asked Dr. Matthews to share more of her experiences with Dr. Fox and APA and she agreed.

**Psychology Times:** When did you first get to know Ron Fox and what was your role at that time?

**Dr. Janet Matthews:** When I was first elected to the APA Council of Representatives in 1985 (representing Division 2 – Teaching), the Council was filled with people who had a understanding not only of the history of the issues we were addressing but also of the various potential outcomes of our actions. I listened carefully to their varied discussions in order to make more informed decisions. One of those leaders was Ron Fix. He became APA’s Recording Secretary the following year and served in that role for 6 years. During those 6 years, we interacted on Council as well as my role on several APA committees. During my second term on Council (again from Division 2) starting in 1994, Ron was APA President. His term as APA Past President ended as I was getting my orientation to being a newly elected member of the APA Board of Directors.

**PT:** How did your friendship grow over time and why?

**JM:** Perhaps the most important point is that I respected Ron. Although I did not always agree with him, I listened to his opinions, asked questions, and actually got answers

(rather than vague platitudes). For many years there was an annual practice midwinter meeting sponsored by APA Divisions 29 (Psychotherapy), 42 (Independent Practice), & 43 (Family). As a strong advocate for practice, Ron attended these meetings and we were often in discussion groups together. These meetings offered more opportunities for personal interaction than traditional conventions. Although Ron received his Ph.D. in clinical psychology from a traditional research program (UNC Chapel Hill), he was an early advocate for psychology’s PsyD degree. He served as the first Dean of the School of Professional Psychology at Wright State University (1977), one of the early PsyD programs. I liked his combination of education & practitioner interests.

**PT:** What are some of your most clear memories about him?

**JM:** I have two very clear memories of Ron. The first occurred when he was APA President & I was chair-elect of APA’s Policy & Planning Board (P & P). P & P is unique among APA’s boards in that the by-laws allow it to go directly to the membership without prior approval of either the Council of Representatives or the Board of Directors. When the APA by-laws were developed this was part of the checks and balances

process. It was assumed that P & P would be comprised of very senior APA people, such as past presidents, those who had served on many other governance groups, etc. Although I don’t remember the specific issue, we wanted to use this function which had not been used before. Our position was different from the Board of Directors and Ron did not want us to go forth. He came to our meeting and was rather adamant about the Board’s ability to stop us. We explained the by-laws provision and eventually reached a compromise.

The other one was the Board of Directors Task Force on Council Representation (1996-1997). For years, attempts had been made to develop a method for determining who got how many seats on the APA Council of Representatives. Although a system of apportionment balloting was developed, no one was really happy with it. The APA Board of Directors appointed an equal number of people known for being from states and from divisions. The issue, however, was how to find a chair who would be able to handle this group of rather strong personalities. Ron was known for his work on conflict resolution and

Con’t next pg



L to R: Dr. Alesia Williams, Dr. Lee Matthews, Dr. Janet Matthews and Dr. Christopher Parkinson, after a panel discussion on telepsychology at the 2017 Louisiana Psychological Association convention.



Dr. Janet Matthews Remembers APA President Ron Fox, continued

agreed to chair the task force. I was a member of this task force. When we entered the meeting room, Ron explained the basics of “interest based bargaining.” He had a number of flip charts already for us to use. Each of us had to write what we considered our most important position on the chart. He then told us we would not be allowed to leave the room until we had developed a plan that actually had a chance of being accepted by both constituencies. He also told us that no one would be completely happy about the final product but it needed to be something for which we could advocate. This ability to be strong but not a bully was so typical of what I saw from Ron.

**PT:** What are the most salient characteristics that stand out in your mind that impress you?

**JM:** The breadth of Ron’s interests and contributions to psychology are something I do not often see in our profession. Many of my colleagues have made strong contributions in their specific area of interest. Ron’s work in practice, advocacy, and organizational functioning were so strong. In addition to those I have already noted, Ron served on the Board of The Trust for over 15 years. He was involved in the establishment of the psychology licensing board as well as the APA Practice Directorate. Ron married while still an undergraduate (Since I did as well it was meaningful to me). Margaret died in 2005. Ron remarried in 2009. Judy was a long-time APA employee who coordinated many of the functions of the Board of Directors and was a psychologist’s widow. Judy and Ron were frequently seen at APA conventions and activities.

**PT:** What was it like for you to serve with him?

**JM:** We did not serve on the Board of Directors at the same time. Because incoming Board members attended the final meeting of their predecessors as observers, I was there for Ron’s last meeting as Past President. Watching the way he handled leaving the Board and continuing to be an active contributor was a great role model. Although it was not discussed, I am sure the fact that he was being succeeded by APA’s first Psy.D. president, Dorothy Cantor,

probably added to the ease of transition for him. For me, Ron provided a model for diplomacy and civility.

**PT:** Anything else?

**JM:** For those who may wonder about Ron’s childhood, I would just add that he was the first member of his family to attend college, his BA major was English, he received all 3 of his degrees from UNC - Chapel Hill, and he was an Eagle Scout.

...

Dr. Matthews said to colleagues after learning of the loss, “I feel fortunate to have worked with Ron in a range of APA activities over my career. Our profession has lost a leader whose personality allowed him to make a range of people comfortable while accomplishing momentous tasks. In my experience he was among a very small handful of truly gifted leaders.”

Dr. Matthews has served as President of Division 2 and Division 12 sections IV & IX in APA, and Secretary-Treasurer of Division 2 and Secretary of Division 12. She has served as Chair of the APA Committee Undergraduate Education, Board of Professional Affairs, Policy & Planning Board and Membership Committee; on the Council of Representatives for both Division 2 & Division 12, Ethics Committee for Division 2, among many other contributions to the national organization.



Dr. Janet Matthews, retired Professor of psychology at Loyola, served on the American Psychological Association’s Board of Directors and also as Chair of the APA Board of Educational Affairs. Above, she attends a conference with husband and colleague, Dr. Lee Matthews.

While serving as a full professor at Loyola she published numerous books and articles including *Introduction to Clinical Psychology* and *Your Practicum in Psychology: A Guide for Maximizing Knowledge and Competence*

She has served on numerous editorial boards and Louisiana State Board of Examiners of Psychologists. She is married to Dr. Lee Matthews, also a clinical and neuropsychologist.



Dr. Tramontana Named Fellow of American Society for Clinical Hypnosis

Dr. Joseph Tramontana was conferred Fellowship status at the 60th annual convention of the American Society for Clinical Hypnosis (ASCH) in Orlando, Florida, in March. Dr. Tramontana has served as Secretary of ASCH, President of the Louisiana Psychological Association, President of the New Orleans Society of Clinical Hypnosis, on the Board of Directors of Southern Pain Society. He has provided numerous ASCH workshops and at the Society for Clinical and Experimental Hypnosis, authored two books on hypnosis, one on Addictions and one on Sports Hypnosis, as well as authored peer reviewed journal articles on hypnotically augmented psychotherapy. Dr. Tramontana will present “Hypnotically Enhanced Psychotherapy” at the International Society for Hypnosis in Montreal in August, 2018, and a two-day workshop on Hypnotically Enhanced Addictions Treatment for the Canadian Hypnosis Society in Banff, Canada in May 2019.

Pictured Left: Dr. Tramontana with daughter Jody Hutchinson, LCSW, at the banquet for the Fellowship status award of the ASCH. Ms. Hutchinson has a social work practice in Lafayette and is studying hypnosis and working toward certification. She is very proud of her dad, she told Dr. Tramontana. (Courtesy photo.)



# A Shrink at the Flicks

## *The Black Panther* A Review

by Alvin G. Burstein, PhD

Once upon a time, centuries ago, in sub-Saharan central Africa, a group of tribes discovered a miraculous source of radioactivity, Vibranium. The competition for control of the lode was resolved when the leader of one of the tribes imbibed a tea concocted from an herb that the mineral had affected, acquiring superpowers. He used those powers to unite the tribes into a kingdom, Wakanda, and to initiate high-tech capabilities, all carefully concealed from the world at large. He called himself The Black Panther.

The Black Panther superhero made his first literary super hero appearance in a Marvel comic book, *The Fantastic Four*, created by Stan Lee and Jack Kirby in 1964. There is a remarkable synchronicity in his sobriquet. A black panther—and the motto, “Come Out Fighting”—was the icon of the all Black World War I 761st Tank Battalion.

Although Lee has said that there was no intention of referencing any political group in using the sobriquet, The Black Panther Party, founded in the mid 1960’s by Stokely Carmichael and Huey Newton had chosen the same icon. That revolutionary protest party was described by FBI chief J. Edgar Hoover as “the greatest threat to the internal security of the country.”

The current film spin-off is set in contemporary times. Complex tensions beset Wakanda. One of the five tribes, the Jabari, has Luddite objections to technology, seeing it as reflecting weakness. The current king’s brother argues for eschewing concealment and emerging from hiding to support oppressed Blacks world-wide. The Great Powers, Russia and the United States, have gotten scent of a possible African source of atomic power and are competing for access to it.

Guest Columnist,  
Dr. Alvin Burstein

Burstein, a psychologist and psychoanalyst, is a professor emeritus at the University of Tennessee and a former faculty member of the New Orleans-Birmingham Psychoanalytic Center with numerous scholarly works to his credit.

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



As the film opens, the Black Panther arrives in the United States to confront his brother about the latter’s scheme to make Vibranium available outside Wakanda. In the confrontation, the brother is killed, and the king returns home. Hoping to avoid stoking the policy disagreements by revealing what has happened, he leaves his brother’s son behind. The nephew ultimately becomes a lethal mercenary, adopting the name Killmonger. He is a brooding presence whose insatiable demand for vengeance makes him like Moby Dick’s Captain Ahab. Like Ahab, his purpose is “an iron rail on which my soul is grooved to run.”

After the King’s death, his son comes home to assume the throne and its super hero mantle. The succession requires him to meet any challenger from the other tribes in combat. Unexpectedly, he is challenged by the chief of the Luddite Jabari tribe. He defeats the challenger but spares his life.

The new Black Panther interacts with a cast of characters that includes a CIA agent, one of the few non-Blacks in this tale; a Dutch mercenary, also White, seeking to steal Vibranium to sell to the highest bidder; and Killmonger, who burns to return to Wakanda and overthrow the new king.

The movie’s initial popularity is deserved. Its plot is vivid and compelling. The action is suspenseful. The characters are fascinating. The cinematography is beautiful and the special effects impressive.

The film is remarkable, too, in cultural terms. The perhaps unintentional echo with the violent anger of the 1960’s Blank Panther protest stirs up uneasiness that could be usefully explored. At the very least, the presentation of a film with predominantly Black actors in complex and varied roles is an unobvious critique of Hollywood’s failure adequately to reflect cultural diversity. Wakanda’s epitomizing sci-fi high technology calls into question a stereotype of Africans as primitive. That country also has a highly disciplined military elite of women, the Dora Milaje, central to the story. These strong, powerful female figures endorse current cultural shifts toward women as subjects who act rather than as objects to be used. In the film the magnitude of that shift is unfortunately diluted by the fictional country’s strongly patriarchal tradition of authority, especially one validated by mortal combat.



70<sup>th</sup> Annual Convention of the Louisiana Psychological Association

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# Up-Coming Events

70<sup>th</sup> Annual Convention, May 18 & 19, 2018

## Dr. Bonnie Kaplan to Speak on Nutrients and Mental Health at La Psych Assn

Bonnie J. Kaplan, PhD, Professor Emerita in the Cumming School of Medicine at the University of Calgary, in Calgary, Alberta, Canada, and expert in the field of nutritional mental health, will speak through a virtual presentation format to attendees at the Louisiana Psychological Association, to be held May 18 and 19 at the Sheraton Metairie-N.O.

Dr. Kaplan will speak on nutrients and health and topics such as inflammation and mental health, the microbiome and mental health, oxidative stress and mental health, mitochondria and mental health and nutrient-treatment research.

Kaplan has published widely on the biological basis of developmental disorders and mental health – particularly, the contribution of nutrition to brain development and brain function. Her nutrition-related studies have focused on 1) broad spectrum micronutrient treatments for mental disorders, and 2) the effect of intrauterine nutrition on brain development and maternal mental health.

In her work, Kaplan outlines “a new model for understanding the etiology of the symptoms of mental disorders. In a healthy person with a healthy GI system, who eats a healthy diet and absorbs nutrients efficiently, there is usually sufficient nutrient availability for mitochondria to function optimally and produce adequate amounts of ATP to deal with the stresses of life. Our ATP provides a natural defense against the oxidative stress that occurs from normal metabolism and can help heal a compromised GI system. Our ATP also helps protect us from many environmental toxins and stressful life events.”

Representative research includes “Hospitalization cost of conventional psychiatric care compared to broad-spectrum micronutrient treatment: Literature review and case study of adult psychosis,” in *International Journal of Mental Health Systems*; “The emerging field of nutritional mental health: Inflammation, the microbiome, oxidative stress and mitochondrial function,” in *Clinical Psychological Science*; “Micronutrient treatment of emotional dyscontrol following traumatic brain injury: A case study,” in *Annals of Psychiatry and Mental Health*; and “A randomised trial of nutrient supplements to minimise psychiatric illness after a natural disaster,” in *Psychiatry Research*.

“A bright new future of understanding, preventing, and



Dr. Bonnie Kaplan  
(courtesy photo)

treating mental disorders awaits us, and these advances surprisingly will return us to what our ancestors knew and accepted a century ago,” writes Kaplan.

“In our current scientific era, it is essential that the mechanisms be understood to successfully shift the scientific paradigm from a primarily pharmacologic model of mental-health treatment to nutritional medicine, and understanding those mechanisms requires much more research.”

Originally from Ohio, Dr. Kaplan did all her training in the U.S., at the U. of Chicago, Brandeis U., in experimental and physiological psychology. Her interest in the biological basis of behavior led to postdoctoral training and then faculty research in neurophysiology at the West Haven, Connecticut, VA Hospital Neuropsychology Laboratory, and Yale University Department of Neurology, until she moved to Canada in 1979.

“We live in a transformational moment for understanding the etiology of mental disorders,” she wrote. “The previous leap in understanding occurred 60 years ago, which led us to incorporate psychopharmacology into our curricula to address the chemical basis of neurotransmitter function, especially as explained through the then-popular catecholamine hypothesis. The current revolution is broader, consisting of the rapidly accumulating knowledge of how inflammation, microbiome imbalance (gut dysbiosis), oxidative stress, and impaired mitochondrial output affect brain function.”

Kaplan encourages psychologists to stay abreast of this emerging model of the biological basis of mental illness, explaining that it has “particular relevance for alleviating the suffering of individuals with mental disorders.”

### Calendar

## Mindfulness Workshop April 7

Dr. John Pickering announced the Annual Mindfulness day will be held Saturday, April 7, from 8:00 am to 5:00 pm at the Tam Bao Meditation Hall, in Baton Rouge.

## Southwestern Psychological Assn April 13-19, Houston

“Tomorrow’s Challenges, Psychology’s Solutions,” is the theme for the 2018 Convention, to be held April 13 to 15 in Houston and Hilton Americas.

## APA Div 19, April 18-22, N.O.

The Division of Psychoanalysis, Division 39 of the American Psychological Association, will hold its spring meeting April 18–22 in New Orleans at the Intercontinental Hotel.

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