

PRESIDENT'S MESSAGE

By Debra D. Rojas, M.A. | *Licensed Marriage and Family Therapist and President, Santa Clara Valley Chapter of California Association of Marriage and Family Therapists*



When was the last time you stepped out of your comfort zone? For me it was in April at Disneyland's California Park. Early one morning I jumped on the California Screamin roller coaster with my daughter. After securing myself with the over-shoulder harness, the coaster slowly rolled out of the station, curved to the left and briefly stopped. I looked up into the sky and felt the gentle sun warm my face, the sky was blue and clear, and the early morning air was still. It was a serene moment and I felt great peace.

Suddenly, a voice, sounding like a carnival barker, counted down 5....4....3....2....1.... and I was catapulted forward from zero to 55 mph in 4 seconds! I was careening toward the sky, twisting and turning with music blaring in my ears! At one point as we propelled through a "scream tube" there was a brief moment when I thought I could catch my breath, but nope, we dropped, hurtling down in a free-fall and into the 360 degree loop-de-loop. My synapses were firing rapidly, my adrenaline pumping, and I was laughing while others were screaming. Sheer euphoria! When the ride ended (and I could feel my legs again) I said "I can ride that thing all day!"

I can't recall when I became averse to riding roller coasters, but I do know I was afraid because most are wooden and the only security is a bar across the lap. It just wasn't

enough protection for me to enjoy the experience. This coaster is different because it's made of steel and passengers are secured with an over-shoulder restraint.

It was a thrilling experience and I felt deep satisfaction because I allowed myself the full experience of speed, height, unexpected twists and turns, ascending, inverting and dropping at a top speed of 60+ mph. Once the harness was snapped into place, there was no way of stopping that coaster or turning back, so I just allowed myself to be one with the coaster. Out of my comfort zone and physically safe. Great freedom.

When I agreed to accept the position as chapter President, I knew I was stepping out of my comfort zone. As any former chapter president will tell you a great responsibility comes with the position. I would love to tell you the experience offers the same adrenaline pounding euphoria as I experienced on the roller coaster, but that would be an exaggeration.

All board members feel out of their comfort zone at some point. Over the past three years, major issues have challenged all of us. We have had to examine the issues, survey the membership, and take action for the benefit of our chapter members. This requires board members to balance their own feelings regarding issues and remain respectful to the needs of chapter members and take decisive action for the benefit of the



Debra Rojas and Mary Ellen Edwards-McTamaney

membership and the profession.

As SCV-CAMFT President I feel the weight of the responsibility of the position, and at the same time I feel secure because I am privileged to work with a fantastic board of directors who is equally committed to you, our members, and our profession.

Part of the responsibility of being a board member is to become involved in all our chapter and CAMFT have to offer. This year, I went to the CAMFT Conference in Burlingame but did not attend any sessions. Instead, I volunteered to sit at our chapter's

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host table where I had the opportunity to meet many CAMFT members from other chapters, as well as say hi to our own chapter members.

The first morning guess who I had the privilege of meeting? Drum roll, please: Mary Ellen Edwards McTameney, our third chapter president! What a delightful opportunity for me.

We had a nice chat and I've been able to learn more about Mary Ellen since that morning. She told me she was very gung-ho for a number of years, serving as President of our chapter for two years, 1984 and 1985. She later ran for the CAMFT Board of Directors and became President. Mary Ellen ultimately served on the CAMFT board for a total of 5 years.

Here are some facts and highlights from Mary Ellen's years as president of our chapter:

- Our chapter was still known as California Association of Marriage and Family Therapists, Santa Clara Valley Chapter
- The chapter had 188 members
- They started the newsletter
- Meetings were held at night
- Luncheon meetings were born as they moved meetings from nights to noon
- Meetings were held in members' homes, at local venues such as YWCA, and in churches
- Annual events such as summer barbecues and holiday parties were held for members and their families
- The cost for fundraising events was a mere \$4 for members and \$7 for nonmembers
- By 1985, our chapter was the largest in the state and half of state CAMFT members belonged to our chapter
- The chapter board financially supported the state's political action fund and allocated funds to educate the public about the scope and variety of our services

Here is a sample of programs presented in 1984 and 1985:

- "Gestalt Family Therapy," a fund-

raising event presented by Lou Pambianco

- A mini-program with a representative of the state board to discuss and answer questions about insurance reimbursement. It was an informal event held on a Friday evening at Dennis Facchino's home in Los Gatos
- An evening event sponsored by the Santa Cruz Chapter featured Ruth McClendon speaking on "Multiple Family Therapy & Chocolate Pudding"
- "Toward Healthy Couple Relationships: A Search for the Positive Creative Force in Couple Life," presented by Martin Kirschenbaum, PhD
- Dr. June Singer introduced the new Singer-Loomis Inventory of Personality (SLIP), a new instrument combining Jung's theoretical framework with recent empirical findings
- A Brief Therapy Mini-Workshop on Depression led by Juliet Melamid, M.A., LMFTCC and Allan Ritchie, PH.D., MFCC
- "Treating Victims of Domestic Violence" presented by Alexandra Gotach, M.S., MFCC, clinical coordinator for the Mid-Peninsula Support Network for Battered Women
- "Healthy Couple Relationships" by Martin Kirschenbaum, Ph.D., President of the California Graduate School of Marital and Family Therapy
- "Counseling Clients with Psychosomatic Problems," a mini-workshop presented by Fran Scruggs
- "Stress, Love & Personal Fulfillment: Healing in the Larger Social Context of Family and Community" by Emmet Miller, M.D., noted lecturer, healer, and writer
- "Building a Successful Practice! Marketing Strategies for MFCC's," by Troy Challenger (provided inside secrets about what works and what doesn't in launching a new practice)

By 1985, Mary Ellen desired to facilitate more interchange between the state and local chapters and

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to encourage the state to do more promotion of MFCC's with the public. To pursue these endeavors, she ran for the board of state CAMFT. She described the board as sincere and dedicated.

At her first state Board meeting in Sacramento she met Mary Riemersma, who was CAMFT's new Executive Director and they remain friends today.

Mary Ellen is retired but remains active. She serves on CAMFT's Advisory Committee and the Nominating and Elections Committees for next year.

You can read more about Mary Ellen's presidency and our chapter activities in the 1984 and 1985 newsletters on the chapter website at www.scv-camft.org.



BOARD HIGHLIGHTS

April 2015 Board Meeting

CAMFT's proposed Chapter Affiliation Agreement: After consultation with an attorney the board reviewed and unanimously approved proposed revisions and comments to CAMFT's Proposed Chapter Affiliation Agreement. Debra emailed a letter outlining the proposed changes to the CAMFT board of directors, Jill Epstein, Executive Director, and posted it on the CAMFT Chapter Leadership Exchange.

A new Mentor Program Policy was unanimously approved. Catherine Rodriguez, program coordinator will submit a number of articles in upcoming newsletters explaining the new program.

May 2015 Board Meeting

Membership Fees: The board unanimously approved new Membership Tiers which encompasses a change in categories and increase in some of the fees. [See page 11.](#)

CAMFT Annual Conference: Debra commended Melissa Risso, business development director, for coordinating the SCV-CAMFT host table at the conference. She also recognized the following members who volunteered their time at the host table: Eileen Kinney Lindgren, Eleanor Scott, Jacqui Gerritsen, and Dierdre Samuelsson.

Chapter Affiliation Agreement: Debra reported she has received many

positive responses to SCV-CAMFT's proposed changes from other chapters in the state.

New Policies: The board is in the process of reviewing and drafting a new Refund Policy and new Grievance Policy for luncheons and special events, to comply with CAMFT requirements for chapters.

Melissa Risso, business development director, is looking for members to join a new sponsorship committee. Please contact Melissa at business@scv-camft.org.

Dear Readers,

As you may or may not be aware, the May-June issue of the Newsletter was my last issue as Editor. Volunteering to be Editor felt like the right thing to do when I signed on in December of 2014, but I had not considered fully the time commitment the position required, nor the transition of the Newsletter to a new editor and editorial committee, as well as to a new look and design (that I think you will agree is a welcome one). In the end, I felt I needed to prioritize my practice and step down as Editor. I enjoyed helping my colleagues polish their prose and get their points across, as well as writing some articles myself. And I also enjoyed doing my part in the process of generating and publishing the first two issues of the 2015 Newsletter. Thank you SCV-CAMFT for this opportunity to serve as Editor, however briefly.

Sincerely
Janine R. Reed, LMFT





ETHICS ISSUES

Ethical Dilemmas: Answering Your Questions

By Nancy B. Andersen, LMFT, SCV-CAMFT Ethics Director

This is the first in an occasional column on ethical issues that arise in the course of practicing as licensed marriage and family therapists.

Are Dual Relationships Illegal or Unethical?

I received an email from a recently retired chapter member who was helping a client find a new therapist. Much to my correspondent's dismay, the client was considering treatment with a therapist with whom she had a social relationship. Doesn't the pre-existing social relationship rule out a new therapeutic one, asked the therapist?

In researching this question, I found that the answer isn't as clear-cut as my correspondent expected. I discovered that many of us have different ideas about dual relationships and whether they are ever permitted. It seemed important to share my findings with the chapter members.

Here's the situation as described by Katy Grischy, LMFT:

"A former client of mine is seeking a new therapist, as I retired at the end of 2014. She found a member of her church who is a licensed MFT and asked what I thought. I informed her that, while I didn't know this therapist, I believed she could not see my client because they have a dual relationship – they have been out to dinner as couples with their husbands and the therapist knows my client's children. But the therapist gave her the following information about dual relationships:

Despite a popular perception, not all dual or multiple relationships

are unethical or avoidable. Therapy never involves sexual or any other dual relationship that impairs Dr. X's objectivity, clinical judgment or can be exploitative in nature. Dr. X will assess carefully before entering into non-sexual and non-exploitative dual relationships with clients. It is important to realize that in some communities, particularly small towns, military bases, university campuses, etc., multiple relationships are either unavoidable or expected. Dr. X will never acknowledge working with anyone without her written permission. Many clients

Despite a popular perception, not all dual or multiple relationships are unethical

have chosen Dr. X as their therapist because they knew her before they entered therapy with her, and/or are personally aware of her professional work and achievements. Nevertheless, Dr. X will discuss with you the often-existing complexities, potential benefits and difficulties that maybe involved in dual or multiple relationships. Dual or multiple relationships can enhance trust and therapeutic effectiveness, but can also detract from it and often it is impossible to know which ahead of time. It is your responsibility to advise Dr. X if the dual or multiple relationships become uncomfortable for you in any way. Dr. X will always listen carefully

and respond to your feedback and will discontinue the dual relationship if she finds it interfering with the effectiveness of the therapy or your welfare and, of course, you can do the same at any time.

"I am completely unaware that dual relationships are allowed in any but the most unusual circumstances (if you live in a town with only one therapist). I would like your feedback on this issue, mostly for my own clarification. I have asked several of my colleagues and they are all shocked that a therapist could actually advertise and condone dual relationships. Additionally, my former client has a long history of co-dependence and during her treatment with me, she constantly tried to push the boundaries by inviting me to family functions, weddings, graduations, etc."

As I pointed out to Katy, CAMFT membership includes free consultation with the staff attorneys; however, I agreed to research the matter and share the results with our members. My CAMFT consultant, paralegal Alain Montgomery, pointed out that the definition of dual relationships does not prohibit them. The CAMFT Code of Ethics defines dual relationships this way:

"Marriage and family therapists are aware of their influential position with respect to patients, and they avoid exploiting the trust and dependency of such persons. Marriage and family therapists, therefore, avoid dual relationships with patients that are reasonably likely to impair professional judgment or lead to exploitation.

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A dual relationship occurs when a therapist and his or her patient engage in a separate and distinct relationship either simultaneously with the therapeutic relationship, or during a reasonable period of time following the termination of the therapeutic relationship. Not all dual relationships are unethical, and some dual relationships cannot be avoided. When a concurrent or subsequent dual relationship occurs, marriage and family therapists take appropriate professional precautions to ensure that judgment is not impaired and that no exploitation occurs."

Dual relationships are ethical provided the potential risks of exploiting the patient and/or impairment of the therapist's judgment are avoided, said

Montgomery. A therapist takes a risk when entering into a dual relationship because it "makes it easy to question the therapist's boundaries," according to Montgomery. "The actual social dates [in this situation] could be used to the disadvantage of the therapist." Should the patient later file a complaint stating she was harmed, Montgomery said, the social relationship "makes it look bad and could create more suspicion." As for attending the same church, Montgomery noted that this does not automatically create a dual relationship – there must be a personal relationship.

So while the dual relationship in this case is neither illegal nor unethical, it does introduce risk to both members of the therapeutic relationship.

Actions that would result in un-

ethical dual relationships include, but are not limited to, borrowing money from a patient, hiring a patient, engaging in a business venture with a patient, or engaging in a close personal relationship with a patient. Such acts with a patient's spouse, partner or family member may also be considered unethical dual relationships.

Do you have an ethical dilemma that needs an answer? Please send your questions to me at ethics@scv-camft.org.

Nancy Andersen, LMFT has a private practice in Los Altos. She can be reached at ethics@scv-camft.org.

Are You Ethical? Are You Sure?

by Nancy B. Andersen, LMFT, SCV-CAMFT Ethics Director

Make sure your practices meet professional standards by attending the annual Law and Ethics Workshop Friday, October 9 from 9am–4pm at Michael's at Shoreline, featuring CAMFT staff attorney Dave Jensen.

Jensen will review the 10 fundamentals of the psychotherapy profession in a 6-hour presentation that meets the BBS continuing education requirement for license renewal.

The workshop is designed to help you:

1. Identify the 10 fundamentals of practicing legally, ethically, safely, and confidently
2. Describe ethical conduct within the therapist-patient relationship
3. Compare how confidentiality is addressed differently under law and ethical codes
4. Identify what it means to be ethical in terms of personal conduct
5. Describe particular ethical standards and how they relate to supervisor, student, and supervisee relationships and responsibilities
6. Describe the ethical obligations that you may owe to colleagues
7. Identify ethical obligations you owe to your profession
8. Identify ethical obligations you owe to the legal system
9. Describe the ethical standards and how they relate to your financial arrangements with your patients
10. Compare and contrast the laws pertaining to advertising with the ethical standards for advertising



The Girl Who Hid Behind Her Hair & The Woman Who Emerged

By Matthew May, MD

Dr. Matthew May was our speaker at our March luncheon in Mountain View. Dr. May kindly submitted this article outlining his presentation.

This is a story about “Wendy,” a young woman from rural Virginia who sought treatment for Social Phobia (SP) the year after she graduated from college. Wendy’s problems began in middle school, when the “mean girls” would make fun of her and call her “fatty.”

In retrospect, Wendy believes that her response to the bullies at school played almost as much a role as the bullies themselves, in creating her problems. Afraid of being teased, she would call her mother from school every day rather than going to recess and facing her tormentors. Her fears increased such that it became emotionally challenging to be in any social setting. She never attended any dances or social functions during high school and felt lonely, isolated and terrified she would never meet anyone to date or marry.

In college she developed an infatuation with one of her classmates and experienced a devastating breakup. She moved home after this and withdrew even more. She was convinced that the few friends she had left would look down on her, judge her, and reject her because she had failed to succeed in her relationships. She was fearful of job interviews and remained unemployed, worsening her shame and sense of hopelessness.

Noticing her depression, a family member recommended the book, *Feeling Good*, by Dr. David Burns. After reading this, she began to feel better and develop more hope for her future. She reached out to Dr. Burns, who spoke with her and empathized with her experience. Through him, she was referred to my practice in

Menlo Park, California. She came to therapy every day, two hours per day, for five days.

Wendy and I worked together using the methods described by Burns in his books, *Feeling Good*, *Intimate Connections* and *When Panic Attacks*. At the time she began treatment, she was dressed in dark, baggy clothing, avoided eye contact, spoke haltingly and, as the title suggests, appeared to be hiding behind her hair. By the end of therapy she had a new look, a new wardrobe, a new hairstyle and had the confidence and social skills to go out in public, talk with strangers, eat meals, even to act in silly and

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spontaneous ways. On her last day, she noticed an attractive man in a pet store working behind the counter. She approached him and asked for his phone number, leading to a wonderful romantic date and a lasting friendship.

Social Phobia is the third most prevalent psychiatric diagnosis, with around 15 million suffering from this disorder in the United States. Individuals with SP worry about social situations, such as public speaking, entering a crowded room, or talking with strangers. The symptoms interfere with activities of daily living and with the attainment of those things we

hold most dear: meaningful relationships, gainful employment, pleasurable recreation, creative play, and the ability to feel good about ourselves in public and in private. Individuals with SP have worse medical outcomes and are more likely to have legal difficulties or to commit suicide.

Therapy that includes social exposure and response-prevention has robust evidence supporting its efficacy in treating individuals with SP. Despite the effectiveness of available treatments, several barriers prevent care from reaching those in need. These include feelings of shame and avoidance behaviors characteristic of individuals with SP and the reality that many therapists lack familiarity, practice and skill in utilizing the methods that are required for successful treatment of SP.

Dr. David Burns has spent a large part of his career addressing these problems. A wide array of materials and information is available for therapists through his website www.FeelingGood.com. Additionally, there are training opportunities at the Feeling Good Institute in Mountain View, California: www.FeelingGoodInstitute.com. The model developed by Dr. Burns is based on tenets of Cognitive Behavioral Therapy (CBT) but goes beyond typical CBT paradigms. It is called TEAM therapy, which stands for Testing, Empathy, Agenda Setting, and Methods.

CBT proposes that one way to understand our emotions, including anxiety, is the cognitive model, which states that our feelings are caused by automatic negative thoughts (ANTs). According to the cognitive model, we “feel the way we think,” and the thoughts which create our suffering are distorted and can therefore be

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refuted, leading to improvement in mood. Just as importantly, the behavioral model states that we must change what we do in order to change how we feel and includes exercises that boost motivation and eliminate our fears.

TEAM therapy incorporates several other models, in addition to those of CBT. The author believes that the most important of these, and what accounts for the profound and rapid responses seen in patients treated with TEAM, is Paradoxical Agenda Setting (PAS). PAS acknowledges that therapists are powerless to overcome both types of therapeutic resistance:

Outcome Resistance: Not wanting change, even if it were as easy as pressing a button.

Process Resistance: Being unwilling to do what is required to recover.

Paradoxically, when therapists acknowledge that they are powerless to make the patient's decisions for them, and let go of the need to convince and change their patients, is when they are most effective.

The magic of therapy is not in the therapist. It is within the individual who is seeking help.

For example, in the initial phone call with Wendy, I allowed her to decide whether she wanted the type of help I was offering:

"I'm very optimistic that you can recover using some combination of these methods. However, I'm not sure you would want to work with me. Some of the required methods for overcoming anxiety involve facing one's fears. I would be willing to face them with you. However, there would be a temporary increase in anxiety while we did this. I would understand if that is too high of a price for you to pay. At the same time, I would be very eager and willing to work with you."

On the phone, Wendy was able to convince me that she wanted change and that she was willing to pay the "price," including feeling more afraid before she felt relief. However, when I met her, I realized there was another problem that was going to defeat our work.

Question: Based on what you know, why would Wendy NOT benefit from social exposure?

The clue is in the title of the talk, "The Girl Who Hid Behind Her Hair." When individuals have anxiety, it is natural for them to respond by avoiding their fears and protecting themselves in a variety of different ways. A patient with a phobia of germs and contamination will "respond" by washing his or her hands excessively. Those with a fear of losing control will count their steps and engage in repetitive checking behavior. For Wendy, she tended to hide herself by covering her face with her hair and wearing baggy clothes. This "response" was intended as protection and was a reflection of her



belief, common to those with SP, that people are judgmental and critical. Someone who engages in exposure exercises without letting go of their "protective" responses and self-defeating beliefs will not benefit. They often will continue to think "yes, but if I hadn't protected myself by [washing my hands/counting and checking/concealing my appearance], then I would have [become sick/lost control/been judged and rejected]." In this way, the thoughts that cause the fear are not defeated and the fears persist.

What this meant, for Wendy, was that her recovery depended on not only facing her fears, using social exposure exercises, but also giving up her protections and preventing her natural "responses" to anxiety (response prevention). Giving up these safeguards increases anxiety, however, so there is usually an element of "process resistance" when asking whether patients are willing to do this (see above).

As soon as I told Wendy that this would be an additional price for her to pay, she became extremely fearful and refused to agree to this approach. After empathizing with her new anxiety and the unfairness of this previously unmentioned "cost," I utilized a PAS method, "open hands": "You don't have to continue further in our work if you don't want to. I am curious, however, what you would be afraid of if you were to wear a nice dress, makeup and pull your hair back?"

The patient was horrified by this idea and said, "I couldn't dress that way. People would think I'm a prostitute!"

Realizing that this belief was holding back the therapy, I suggested we address it through a safer form of exposure called the "Feared Fantasy." She accepted and we took turns practicing responses to a judgmental and critical stranger:

Critic: "Eww, what are you doing? I can't believe you're out in public!"

Patient: "Wow, I'm a little hurt and angry you would say that. You're definitely a straight shooter, though. Perhaps you have some good fashion tips for me? After all, you do look fantastic in that outfit!"

Critic: "No way! You look like a prostitute! I'd never be seen talking to a tramp like you!"

Patient: "It's true; I've been dressing more adventurously, to help overcome my shyness. That has been a thrill and I'm much more confident about myself. To be honest, your feedback is a tad hurtful and I'm a bit wary of you. Have I done something to offend you?"

Critic: "You've offended my senses with that terrible outfit. You need to get away from me as soon as humanly possible."

Patient: "I'm waiting to meet someone, actually. I see an exit sign in that direction, though, if you need to get going. I'm still confused, though. What part of my outfit is most off-putting to you?"

Critic: "Everything about it is gross and weird."

Patient: "Yikes! I suppose I am

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in need of an urgent fashion consultation. I'm glad someone as sophisticated and savvy as you was around to make me aware. Is there anything else you wanted to add?"

Critic: "I reject you!"

Patient: "Rejection accepted!"

Practicing like this led to laughter as Wendy realized that the "critic" was ridiculous and just a figment of her imagination. Even if someone were to respond like the "critic" of her "feared fantasy," they would be the one with the problems.

After this exercise, she did multiple social exposure exercises while wearing attractive outfits and makeup. She emerged from beneath her hair and eliminated her social anxiety. These exposure activities included "Smile and Say Hello" practice and "David Letterman Technique" (asking questions and paying compliments). After success with these, she tried more difficult exercises, like "Self Disclosure" (sharing vulnerable feelings and truths about ourselves, like, saying, "I'm a shy person" or "I feel a bit nervous") and "Survey Method" (asking what other people really think). Wendy even did the most difficult social exposure exercises, "Rejection Collection" and "Shame Attacking."

In "Shame Attacking," the therapist and patient will intentionally do ridiculous (but safe) things in public, challenging the idea that people are judgmental and critical. Wendy, for example, went running around in circles in a crowded coffee shop, victoriously pumping her fists and whooping happily. This led to the realization that people were remarkably non-judgmental and frequently wanted to join in the fun! It also helped generate confidence that if she encountered judgmental people she could tolerate the judgment or even tease them back.

The results were impressive, as indicated on the measurement of the patient's mood and feedback of therapy, where she stated that it was hard, now, for her to understand what she was afraid of in the first place! Years later, the patient is now in great

spirits. Shortly after the treatment she developed the urge to move out of her parent's home and she now enjoys a vibrant social life and is successful in her work. She maintains her gains by continuing to socialize and engage in shame-attacking and rejection practice.

Other techniques discussed included common automatic negative thoughts in SP, tactics to "talk back" to these ANTs, use of the cost-benefit analysis tool, and uncovering techniques such as the "what-if" exercise to understand deeper fears, beliefs, and values that underlie a patient's patterns of thinking and feeling.

Two other important aspects of TEAM therapy include Homework and Relapse Prevention. Homework is a requirement for patients in TEAM therapy to actively participate in their recovery by doing daily homework exercises. Research has shown that active participation and practice is required for recovery from depression and anxiety, just as it is required to learn a musical instrument, new language, or martial arts.

Relapse Prevention is a necessary part of psychotherapy because of the "inevitability of relapse." When we feel better, it is tempting to imagine that a permanent state of enlightenment has been achieved. This unrealistic expectation is a "setup" for prolonged and severe relapse, rather than brief, self-treatable relapses. Patients will think to themselves, when they relapse, "even that therapy didn't work, I really am a hopeless case" unless they are prepared for this eventuality and given the reminder, when they feel that way, to use the methods that worked for them. Just like our physical health, our mental health is a work-in-progress, requiring regular maintenance. Developing healthy mental habits is part of Relapse Prevention.

The remainder of the talk was focused on identifying problems and risks associated with exposure exercises for anxiety. The speaker noted that many therapists were understandably reluctant to use exposure methods and acknowledged that there were

problems associated with these methods, including:

- a. Forcing exposure on the unwilling patient, which is ineffective and damaging
- b. Inadequate duration, frequency and intensity of exposure
- c. Failure to address co-morbid problems like depression and substance-abuse
- d. Inappropriate use of "anti-anxiety" medication, defeating the exposure work
- e. Excessive focus on the exposure model when other models are more appropriate
- f. Failure to include "response prevention" as part of the "exposure"
- g. Failure to include "relapse prevention" to prepare the client for relapses
- h. Exposure to the wrong stimulus, failing to address the appropriate fears

Also, many therapists, due to a lack of experience and training, feel uncomfortable using these methods despite the strong evidence for their efficacy. Therapists treating individuals with anxiety can increase their familiarity and skill with TEAM methods by participating in training and certification through the Feeling Good Institute in Mountain View, California (www.feelinggoodinstitute.com).

In conclusion, the speaker expressed concern that Social Phobia (SP), like many psychiatric diseases, remained under-diagnosed and under-treated, with approximately 13 million un-treated cases in the United States. Fortunately, there are now powerful and rapidly-effective forms of treatment available to patients who are willing to participate in the type of treatment outlined and described by the author.

Dr. Matthew May is a board-certified psychiatrist and an adjunct clinical faculty member at Stanford's Department of Psychiatry and Behavioral Sciences. He has a private practice in Menlo Park. He can be reached at matthew-maymd.com.



LUNCHEON REVIEW

Domestic Violence in the Affluent Community

By Janine Reed, LMFT

Domestic Violence in Affluent Community, was presented by Ruth Patrick, M.A., Domestic Violence Outreach Specialist and Director of the Women/SV Program at Family & Children Services in Palo Alto, on February 26, 2015.

Ms. Patrick began her talk by outlining the Women/SV Mission, which is to “eliminate domestic violence and abuse by

- providing support, education and resources that empower women and children to more safely and effectively address abusive situations, heal from the emotional and physical health consequences of all forms of abuse, and create a new and healthier life;
- educating professional providers and the public; [and]
- promoting women’s and children’s basic right to live in peace, safety, and freedom in their own homes.”

Ms. Patrick reviewed some key points about domestic violence (DV): DV occurs in all walks of life, all neighborhoods, and includes not just physical abuse, but emotional, financial, legal, and technological abuse, these last four most common in affluent communities. Ms. Patrick provided statistics about children affected by DV, and noted that while some DV victims are men, “85-95% of . . . victims are female,” and that DV is “the leading cause of injury in women in the U.S. between the ages of 15 and 44.” Ms. Patrick, who is a DV educator and not herself a therapist, reminded the group that “marriage counseling and assertiveness training are . . . contraindicated” when abuse is present. [Ms. Patrick was pleased to learn that our BBS training directs us NOT to engage in couples counseling when we suspect DV, but to guide both partners into individual therapy.]

After reviewing the effects of abuse (trauma, shame, helplessness), the cycle of abuse, and the “power and control” wheel, Ms. Patrick reviewed trauma-informed ways to help DV survivors recover (safety first, respect boundaries, collaborate, empower, and minimize re-traumatization). She introduced the “Equality” wheel as a tool to use with survivors of abuse, to help them recognize the elements of a healthy relationship.

Ms. Patrick focused the rest of her talk on DV in affluent communities. Many people believe that DV doesn’t happen among upper class individuals, and that even when it does, women have all the resources they need to combat it. One of the goals of Ms. Patrick’s organization is to correct this misperception. An affluent abuser, according to Ms. Patrick, may not “look” like an abuser because he can use his “power, money, influence, [and] technical expertise” to present a very polished public image. The abuser then hides behind this public image. Ms. Patrick painted a picture of the affluent abuser based on her DV work with over 300 women in the affluent community. The abuser is often “highly educated or has an advanced professional career,” “looks good on paper,” presents or performs well in public or in court, and is often “involved in philanthropic work.”

The victims of DV in the affluent community are often as educated and professional as their abusers and vice versa. Both include engineers, lawyers, religious leaders, entrepreneurs, CEOs and stay-at-home parents. Affluence makes it difficult for the DV victim to admit that anything is wrong because she has so much to lose (reputation, image, status in community, a beautiful home, good schools for her children, a privileged lifestyle).

Money magnifies the power imbalance, for “the distribution of money . . . is sharply skewed in the man’s favor,” putting the woman at an “enormous disadvantage.”

The kind of abuse that happens in affluent communities includes not just physical abuse, but emotional, financial, legal, and technological. Emotional abuse causes the most long-lasting damage because of shame, diminished self-esteem, and fear of being hurt or killed. Ms. Patrick gave the example of an abuser who was an MD, who held power over his victim by saying “I know ways to make it appear that a woman died naturally.” Abusers also maintain control through financial abuse, making their partner financially dependent and withholding funds, for instance, or “embezzling” their life savings, or depleting their partner’s resources in other ways. Abusers use legal abuse by using the court system to their advantage, making the victim look like she is the abuser or punishing her by seeking full custody of the children. Technological abuse includes using surveillance to keep track of a partner’s whereabouts, inventing false text messages, and using “spousebusters” spyware to listen to her phone conversations, manipulate her phone settings, or monitor her interactions on social media.

Ms. Patrick concluded her talk by making suggestions to help therapists address the needs of affluent clients who may be experiencing DV. First and foremost, as with all DV cases, create a safe environment that encourages clients to talk about their experiences. Help clients to see the abuse for what it is, to recognize and label “financial abuse,” “emotional

continued on p. 10



MENTOR CORNER

SCV-CAMFT Mentor Program is Now Live!

By Catherine Rodriguez, LMFT, Mentor Program Chair

I'm sure you've heard it before, but just to reiterate, having a Mentor is a fantastic opportunity for new professionals to benefit from the wisdom and expertise of those who have been in the profession longer. Being a Mentor provides the ability to give back to both the profession and to an individual who is just starting out. It is a win-win for everyone!

Mentoring can make all the difference in how a new therapist can make a transition into private practice, into an agency, or more fully into defining his or her professional identity. There are many ways in which a mentoring relationship can give support.

If you are interested in being a Mentor or Mentee, log into your SCV-CAMFT account and click on the Mentor Program link under Resources and Lists. You will see an overview on how the program works, the responsibilities of a Mentor and Mentee, a link to the Program Guidelines, and brief articles on how to make the most of your Mentoring experience. Be sure to take a look at these resources for more detailed instructions on partici-

pating in the program.

Next, select the link to complete the Mentor Profile, which will inform us that you are interested in being a Mentor or Mentee. Once you submit a profile, you will receive an email with the next steps. Generally speaking, the rest of the process will be initiated once a potential Mentee reviews the list of current Mentors and selects a few individuals who match their interests and goals. It is up to the Mentee to make contact with potential mentors and interview them to determine who is the best match for them.

Once an engagement is agreed upon, each person signs the Mentor Program Engagement Agreement. This is an important step in clarifying the Mentoring arrangement; it also helps the chapter keep track of participation in the program. From there, set up your meetings and get started!

Please note: if you are currently listed as a Mentor, you will need email the program at mentorprogram@scv-camft.org to confirm your desire to continue in the program; otherwise

your profile will be removed from the list. .

We will be featuring an article on the Mentor Program in each newsletter, found in the Mentor Corner. In addition, to help support the Mentor Program, we will be offering a Mentor Training in the fall. Watch for information in the September newsletter.

We hope that many members will take advantage of this valuable program. Mentoring benefits both Mentor and Mentee and is a powerful tool that develops contacts, confidence, competence, and clarity in the MFT journey.

On a personal note, for those of you have contributed to making this program a success (Kate Viret, Debra Rojas, Kelly Kilcoyne, Michael Jaret, Nancy Orr, and the rest of the board), a great big Thank You!

Catherine Rodriguez, LMFT, provides psychotherapy to midlife and older adults who are struggling with difficult life transitions. She is in private practice in Los Altos, and you can reach her at www.insight4growth.com.

Lunch Review, continued from p. 9

abuse," or "technological abuse." She provided lists of questions to ask clients when abuse is suspected, as well as lists of statements to make to let clients know we are concerned about abuse. Ms. Patrick cautioned never to ask a DV client why she hasn't left yet; instead, help her to assess for danger in her home and create a safety plan. Ms. Patrick emphasized doing individual therapy with a DV victim because couples counseling might inadvertent-

ly enable the abuser who might use the conjoint therapy to his advantage. When you suspect abuse, Ms. Patrick advises, find good resources for your client. Informal support groups have been most helpful in promoting safety and helping the women she has worked with to move forward.

The WomenSV Directory www.womensv.org; <http://www.fcscservices.org/> includes a list of providers. You can also reach Ms. Patrick at 650-543-5406 or rpatrick@fcscservices.org to ask

for referral resources, or for any comments or questions you have about her presentation.

Janine Reed, LMFT is bilingual Spanish/English and counsels individuals, couples, and families at her private practice in Mountain View. She also offers therapy groups that focus on writing-to-heal.

New Membership Tiers

Effective AUGUST 1, 2015

REGULAR LICENSED

For licensed marriage and family therapists who are also clinical members of CAMFT

Annual dues \$90

SPONSOR LICENSED

For licensed marriage and family therapists who are also clinical members of CAMFT

(Your tax-deductible \$50 donation helps support SCV-CAMFT)

Annual dues \$140

PRELICENSED

For student and intern members of CAMFT

Annual dues \$40

ASSOCIATE LICENSED

For all other licensed persons/associate members of CAMFT. This membership level includes LCSWs, ASWs, psychologists and educational psychologists.

Annual dues \$140

INSTITUTIONAL

For organizations such as schools, agencies or businesses providing services or products directly related to our work as mental health providers. Institutional members do not have to be members of CAMFT to join.

Annual dues \$250

BENEFITS FOR LICENSED MEMBERS

- Free 35-word classified ad online and in newsletter for each membership year (6 issues).
- Members can run one 35-word classified ad every two months. Your ad will run for a two-month cycle or you can choose to run your ad for a longer period of time. Only one "free" ad can be live at any time. Licensed members receive up to 6 classified ads as part of the membership.
- The online version of your ad appears immediately.
- The printed version appears in the next published newsletter. Check deadlines on the website.
- Value: \$150 (\$25 per ad x 6) Available to all licensed members
- Special reduced member-only discounts on monthly, annual and special events
- Be listed in and have access to the SCV-CAMFT online Therapist Search
- Bi-monthly newsletter, SCV-CAMFT NEWS
- Members Only area on website
- SCV-CAMFT Chapter Exchange
- Online messaging system for resources, referrals, discussing issues and networking. Ask questions of other members, request or offer referrals, post your own group or workshops and start conversations with other licensed members. A great shared resource to collaborate with other professionals on a wide-range of topics.

PRE-LICENSED MEMBERS

- Special reduced member-only discounts on monthly, annual and special events
- Be listed and have access to the online Therapist Search
- Bi-monthly newsletter, SCV-CAMFT NEWS
- Members Only area on website
- SCV-CAMFT Chapter Exchange
- Online messaging system for resources, referrals, discussing issues and networking. Ask questions of other members, request or offer referrals, post your own group or workshops and start conversations with other licensed members. A great shared resource to collaborate with other professionals on a wide-range of topics.
- SCV-CAMFT Mentor Program
- Online Internship Directory

BEST VALUE MEMBERSHIP: SPONSOR LICENSED

Ideal for building your practice – includes all above benefits plus the following:

One banner ad on the SCV-CAMFT website to promote your practice - Value: \$338

Two ¼ page ads in SCV-CAMFT News - Value: \$150

Expanded therapist profile listing with up to 600 words to describe yourself and your practice - Value: \$100

Expanded profiles are displayed first (alphabetically) and include a photo!

UPGRADE YOUR MEMBERSHIP AT YOUR NEXT RENEWAL DATE

ANNOUNCEMENTS

The SCV-CAMFT board of directors has hired the chapter's first employee, Nancy Orr, chapter coordinator!

On April 24, 2015, the board unanimously voted to convert the chapter coordinator position to employee status from an independent contractor, effective June 1, 2015. We have expanded her role and you will now see Nancy at the registration table at all chapter events. This is an opportunity for all of you to become more acquainted with Nancy.

Congratulations, Nancy!



Michael and Susan Jaret

**In other news, from the
SCV-CAMFT International Desk:**

Webmaster Michael Jaret married the love of his life, Susan. They recently returned from their honeymoon in Spain.

Congratulations,
Michael and Susan!



Jane Kingston, LMFT

From our Member Afar:

Jane Kingston, has moved. She is now living in northwest Reno and her new phone number is (775) 624-6218. Jane reports she's busy setting up her new practice in Truckee, California.

Her new address is:

10770 Donner Pass Road, #205
Truckee CA 96161 (530) 562-4139

Jane said if any of you are coming her way please give her a call and she'll take you to lunch! Additionally, the CAMFT Board of Directors has approved the nomination of Jane Kingston to the Clinical Editorial Council. Jane said she "will work hard to get rid of all those typos in *The Therapist*."

Congratulations Jane!

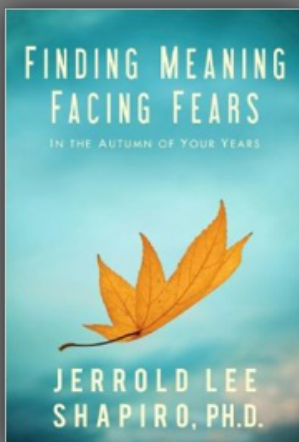
Jane Kingston, LMFT, has a private practice in Truckee. She can be reached at jane@igc.org.

Annual Workshop!

Friday, July 17, 2015

8:30 a.m. - 4:00 p.m.

Mountain View



Finding Meaning, Facing Fears: In the Autumn of Your Years

SCV-CAMFT ANNUAL WORKSHOP (6 CEUs included)

8:30AM – 4:00PM
Friday, July 17, 2015
Michael's at Shoreline
2960 Shoreline Boulevard
Mountain View, CA 94043

SCV-CAMFT Presents Our Annual Workshop with Jerrold Lee Shapiro, PhD

Licensed clinical psychologist, Santa Clara University professor, author, and speaker

Finding Meaning, Facing Fears: In the Autumn of Your Years (45-65), the winner of the Alpha Sigma Nu book of the year award (2013), was the culmination of a multi-year research project and 40 years as a practicing therapist. This workshop explores the many opportunities this time of life presents for ourselves as clinicians and for our clients: opportunities to stretch in our capacities, to face and conquer old demons, and to meet new challenges with greater resources than were available to us before.

Attendees will:

- Explore the unique psychological, developmental, financial, and special challenges of the 45-65 transition
- Learn exercises to use with clients to underscore these age-related challenges
- Understand treatment of individuals, couples, and families around transition and the post-midlife transition in particular
- Consider personal (life, financial, personal) challenges as a therapist
- View live demonstrations, role plays, and video examples

Event includes continental breakfast, luncheon, 6 CEU's, and a drawing for a copy of Finding Meaning, Facing Fears: In the Autumn of Your Years (45-65), signed by Dr. Shapiro.

Registration: Licensed member: \$140
Pre-Licensed member: \$70
Non-member: \$160
Non-member student/intern: \$70

Registration:

Go online to the calendar of events at:

www.scv-camft.org

Or email us at:

mail@scv-camft.org

Refund Policy:

Due to the contracted costs of offering this event, cancellations must be received no later than 48 hours before event by July 15, 2015, in order to ensure a refund less a \$30 administrative processing fee.

Continuing Education:

This course meets the qualifications for 6 hours of continuing education credit for MFTs, LPCCs, LEPs, and/or LCSWs as required by the California Board of Behavioral Sciences (PCE 1134)



Jerrold Lee Shapiro is a Professor in the Department of Counseling Psychology at Santa Clara University (1982-present) and Managing Partner of Family Business Solutions. In total he authored and edited twelve books including two others that have won literary awards.

An experienced speaker, he appeared on well over 100 radio and television programs including The Oprah Show; the CBS Morning Show; ABC TV, Sonya Live; NPR; PBS; CNN; and more.

(1.5 CEUs, PCE 1143)

NORTH REGION LUNCHEON

Evidence-Based Treatment for Teens and Disparities in Funding*Presented by Tom Tarshis, MD, MPH*

Dr. Tarshis will speak about mental health advocacy, addressing disparities in funding for mental health, despite the teen suicide clusters in the Bay Area. This presentation will include the following:

- Current mortality data for mental health disorders
- Mental health professional preferences for delivering care and the associated barriers
- Cost savings when integrated, evidence-based models of treatment are utilized with youth
- The “crisis” situation regarding treatment availability and options for mental illness
- How to assess teens, children and young adults for SI/HI and determine the best evidence-based treatment practice.

BACA is an evidence-based clinic using empirically sound research to treat patients. It is mainly a CBT based clinic, however we are working to implement DBT practices into our IOP curriculum. We do our own assessments on all new patients. Instead of a single rushed interaction, we spread the assessment over a 3-4 week span to thoroughly understand what is going on in the patient’s life during that time frame. BACA is comprised of an outpatient clinic and Intensive Outpatient Programs (IOP). An IOP was created after we faced challenges getting our patients into higher levels of care.



About the Speaker: Tom Tarshis, MD, MPH, is the founder of the Bay Area Children’s Association (www.baca.org), a nonprofit, evidence-based multi-disciplinary clinic that provides services to families in San Jose and Oakland. BACA’s main goal is to provide patients with greater access to outstanding scientific, empathic, mental health services, regardless of socio-demographic status. He is on the adjunct clinical faculty for the Dept. of Psychiatry at Stanford, and was given the “Award for Excellence in Teaching” in 2009, 2010, 2011, and 2013.

Tom has worked in community services agencies that offer free medical services to the homeless and uninsured, and did a 3-year NIMH research fellowship in child psychiatry training at Stanford. His research was focused on bullying and victimization in elementary schools. He has written a book for teens, which came out in April 2010, entitled *Living with Peer Pressure and Bullying*. While at Stanford, Tom has begun to fully understand the broken mental health system with respect to providing care for children with mental health problems.

Date: Friday, August 28, 2015

Time: 11:15 a.m. – 1:30 p.m.

Place: Crystal Springs Golf Course, 6650 Golf Course Lane
Burlingame, CA 94030

Menu: Buffet Lunch

Registration Deadline: Monday, August 24 for early registration fee.

Register: Online at www.scv-camft.org

LUNCHEON FEES**PRE-REGISTERED BY AUGUST 24th:**

Members - \$26

Non-members - \$33

CEUs: Members/non-members - \$7

WALK-IN FEES:

Members - \$33

Non-members - \$40

Lunch is not guaranteed for walk-ins, but is available on a first-come, first-served basis. Auditing the event is available. Continuing Education: This course meets the qualifications for 1.5 hours of continuing education credit for LMFTs, LPCCs, LEPs and/or LCSWs as required by the California Board of Behavioral Sciences (PCE 1134).

Please visit our website at www.scv-camft.org to review the CEU info and our cancellation policy.



Got Something to Share?

We are an interesting group of people with many interesting things to share. How great it would be to show the richness and diversity of our chapter in the newsletter! Consider writing about one of the following:

- Your experience as a therapist, intern, supervisor...
- Self-care practices
- Practice Building
- Specific diagnoses & personality disorders
- Private practice vs. agency work
- Reviews of books, movies, new apps
- Multicultural issues
- Working with specific populations
- Theoretical orientation
- Medications -- use of it, pros, cons

Editorial committee members are available to discuss ideas with you and answer questions. Their contact information is listed on [page 22](#).

ADVERTISING OPPORTUNITIES AND PRICES

Did you know all chapter members have the benefit of running a **free classified ad** online and in each issue of the newsletter? Display ads are also free with some membership categories.

Find out more about the advertising options at our website, www.scv-camft.org. Log-in, click the button **Advertisements**, then click **How to Advertise**.

Advertising rates for display ads are listed below:

Newsletter or online ad	Member Advertising Rates			Non-member Advertising Rates		
	2 months	6 months	12 months	2 months	6 months	12 months
Full page	\$200	\$510	\$900	\$400	\$1,020	\$1,800
Half page	\$125	\$319	\$563	\$250	\$638	\$1,125
Quarter page	\$75	\$191	\$338	\$150	\$383	\$675
Eighth page	\$50	\$128	\$225	\$100	\$255	\$450

More information about our advertising policies is available on the chapter's website at www.scv-camft.org. If you have questions you can contact the chapter coordinator, Nancy Orr at 408-235-0210 or mail@scv-camft.org.



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Newsletter Deadlines

The deadline for newsletter submission is six weeks prior to the publication date. In order to get the newsletter to you on time, we must strictly adhere to this time frame.

Submissions received late will be held over for another issue.



**Sept/Oct 2015 Issue
Deadline: July 15, 2015**

**Nov/Dec 2015 Issue
Deadline: Sept. 15, 2015**

Adult and Young Adult Psychotherapy Groups

- ♦ Safe Peer Environments
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Many people feel relieved after joining a Psychotherapy Group. Meeting others who have overcome similar problems offers hope and new determination. For more information, contact:

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www.counselingforwomeninredwoodcity.com

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Additional Information Contact:

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408-813-5671
daniel.burgess@gmail.com

<http://danielaburgess.com/office-space-leasing/>

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Process groups geared to illuminate the ways in which women help/hinder themselves, and increase understanding of what they do and how they are in the world. 408-702-7429 www.relationshipsharmony.com

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Clients struggling with anxiety? Refer to our 8 week anxiety classes for them to learn fundamental anxiety skills, great CBT methods & get social support. Contact 650-461-9026 info@PaloAltoTherapy.com

TEEN GIRLS and WOMEN'S GROUPS

TEEN GIRLS-Friendships, feelings, communication, self-esteem and stress using art and drama. WOMEN- relationships, depression, stress, transitions, and parenting starting Sept 24th. Lori Levitt, MFT #43329. 650-794-4828 www.lorilevittmft.com

Process group offered!

LGBT Adults "Coming Out" Tuesday's 5-6:30pm On-going weekly group, \$40/session, San Jose <http://www.ladonnasilva.com/therapy-services.html> LaDonna Silva, LMFT (408)412-1207

Stitching Soul Workshops

Stitching Soul Workshops for Healing Professionals. Quarterly Expressive Arts workshops at a mountain retreat center in Los Gatos. Spring workshop May 30, 2015. Kathleen Russ, MFT www.kathleenruss.com. (408)219-2467

Menlo Park Men's Groups

Psychotherapy Groups for Men: Fostering Connection, Community and Support. For more information please contact Jamie Moran, LCSW, CGP, 415.552.9408 | jammoran@aol.com | www.jamiemoran.com

Process Support Group For Men in San Jose and Palo Alto

A safe space for authentic sharing, learning life skills, working with Mr. Nice Guy syndrome and supporting others on their journey. Antoine: (510)206-0225

FOR CLINICIANS

Got insurance questions?

Find answers in the newly-updated Navigating the Insurance Maze: The Therapist's Complete Guide to Working With Insurance (Barbara Griswold). View Barbara's workshop schedule, buy books/claim forms, schedule consultations: www.theinsurancemaze.com.

Office-based Addiction Treatment

Board Certified MD offering confidential, office-based addiction treatment. Medical detox. Alcohol detox. Relapse prevention. Sugar addiction/ craving control. Medical weight loss. Contact: Suma Singh MD ABAM. Phone (408) 374-7600 or email info@losgatoshealth.com

Experienced Mediator, specializing in Divorce and Custody Issues Co-Parenting Counseling, Reconnection Therapy, Therapeutic Supervised Visitation. Available for

appointment as Custody Evaluator/ Parenting Coordinator. Work with high conflict couples. Websites: StoneMFT.com, MediateCustody.com, DivorcingPeacefully.com.

Menlo Marriage Works Is Up and Running!

Menlo Marriage Works is open to new couples and individuals. Specializing in fertility, trauma, addiction, anxiety and depression. Contact: Susan Knecht LCSW www.menlomarriageworks.com 650-325-4347

Consult Group opening

Long standing private practice consultation group in San Mateo has openings. Monthly on Fridays 10am-Noon. Visit summer as a guest. Contact Mary Deger Seevers at: marydegerseevers.com or 650-655-2718.

FOR INTERNS

HOPE for INTERNS process group

You're not defined by regulations and paperwork! Rekindle your passion with inspiring perspectives and healing community. It's Self-Care with BBS Bonus Hours! Contact Howard (MFT#52529): www.hswarshaw.com

Paid Intern Neurofeedback Position

Palo Alto Neurofeedback seeking committed licensed MFT intern to provide Neurofeedback treatment. No prior experience needed. Must be Computer savvy. Start 10-20 hours/week. Supervision included. Experience dictates pay. Need evening and weekend availability

JOB OPPORTUNITIES

Program Manager - Transition Age Youth Mental Health

Bill Wilson Center (www.billwilsoncenter.org) in San Jose has an IMMEDIATE opening for a Program Manager to work in our Transition Age Youth Mental Health program. Must be licensed: LCSW, LMFT, LPCC, PhD or licensed eligible. To review a full job description please visit <http://www.billwilsoncenter.org/about/employment.html> To apply send cover letter and resume to resumes@bwcmail.org.

Licensed Supervising Therapist -

Part Time - 20 hours per week
Bill Wilson Center (www.billwilsoncenter.org) in San Jose has an IMMEDIATE opening for a Licensed Supervising Therapist. Must have Master of Arts degree in MFT, Social Work, Marriage Family Counselor, Clinical Psychology. PLUS two years or more licensure (LMFT; LCSW or Licensed Clinical Psychologist) and able to supervise individual and groups (licensed according to California state law - Welfare and Institutions Code section 5600.2). To review a full job description please visit <http://www.billwilsoncenter.org/about/employment.html> To apply send cover letter and resume to resumes@bwcmail.org.

OFFICE SPACE

Lovely 357 sq ft office by 280/ Saratoga Ave

Bright, clean, quiet 2nd story office w/large windows. Well-maintained, nicely furnished, wheelchair access, friendly neighbors. Setup for children, adults, couples/families. Available Mondays/Fridays 8:00-10:30 a.m. Wednesdays/Sundays all day. Karena Petersen (408)772-0644

Therapy room available in shared suite

Unfurnished therapy room available full time. Shared adjacent fully furnished waiting room. Excellent Location near 85 and 17. Professional, secure, well maintained building. lease 760.00 Office approx 144 sq ft. 408-377-7204.

Los Gatos Space for Sublet

Peaceful, nicely landscaped, ample parking, excellent lighting, accessible for all, well organized, large windows & natural light. Looking for like minded professional, strong ethics/legal understanding, respectful, & great w/ communication. Please email: kristenwright.lmft@gmail.com

Los Gatos office available for rent

Private, quiet psychotherapy office in Los Gatos available for rent on Mondays, Fridays and weekend. The office is walking distance from the high school and downtown area.

Office for sublease in Los Altos

Beautifully furnished Los Altos office available for sublease Monday, Tuesday, Friday and weekends. Suite includes waiting room, kitchenette, tea area/service, private bathroom and wifi. Contact Barbara 408-373-8611.

Campbell Downtown, historic

100 sq ft office in downtown Campbell. Parking on site, all utilities included, walk to all 14 restaurants, currently 20 therapist in building/Contact Gene to see 408-502-2600

Office Space for Rent

Los Gatos office space available. Lovely location in walking distance of downtown LG. Mondays and Fridays all day, and evenings past 6pm. Contact Linda Galdieri 408-399-6443, or Vicki Swenson 408-375-7320

Office Space Available

Spacious office in a quiet, suite available to a licensed practitioner. Complex has easy access to 85/17 and 280, just south of Santana Row. Garden setting, ample parking, clean with new carpet & paint, updated waiting area. In suite restroom and kitchenette. Reasonable rent. For info, contact, Karen Wride, MSW, (408)886-7143



CALENDAR OF EVENTS

JULY

- 3 South Region Pre-Licensed Support Group
- 10 North Region Pre-Licensed Support Group
- 11 North Region Newly Licensed Support Group
- 15 Newsletter Submission Deadline
- 17 **Annual Workshop: *Finding Meaning, Facing Fears in the Autumn of Your Years***,
Mountain View, CA
- 18 South Region Newly Licensed Support Group

AUGUST

- 1 North Region Newly Licensed Support Group
- 7 South Region Pre-Licensed Support Group
- 7 South Region Newly Licensed Support Group
- 14 North Region Pre-Licensed Support Group
- 28 **North Region Chapter Luncheon, *Evidence-Based Treatment for Teens and Disparities in Funding***, Burlingame, CA

For more information and to register for events, please visit our website at www.scv-camft.org.

The Newly Licensed

Support Groups are designed to meet the needs of those just licensed, and up to three years after licensure. You will find support and great ideas, and develop relationships with your peers. Be sure to take advantage of this valuable group and resource as you begin your journey as a licensed therapist.

FREE NEWLY LICENSED SUPPORT GROUPS

North Region Newly Licensed Support Group

This group meets the first Saturday of the month from 10 a.m. - 12 p.m.

Upcoming dates: July 11, August 1

Facilitator: Jamie Moran, LCSW

Location: 661 Live Oak Avenue, Suite One, Menlo Park, CA 94025

RSVP and contact: Jammoran@aol.com or 415-552-9408 .

South Region Newly Licensed Support Group

This group meets generally the third Saturday of the month from 10 a.m.-12 p.m.

Upcoming dates: July 18, August 15

Facilitator: Verna Nelson, LMFT

Location: Near Hwy. 85 and 880 (address provided with rsvp)

RSVP and contact: vernelson@gmail.com or 408-379-7747

FREE PRE-LICENSED SUPPORT GROUPS

The Pre-Licensed Support Groups

are designed to support interns.

These groups will help you find encouragement and advice from those who have already walked in your shoes on the road to licensure. Be sure to take advantage of this valuable group and resource as you begin your journey towards becoming a licensed therapist.

North Region Pre-Licensed Support Group

The group meets the second Friday of each month from 5:30 p.m. to 7:30 p.m.

Upcoming dates: July 10, August 14

Facilitator: Ildiko Ran, LMFT

Location: 2672 Bayshore Parkway, Suite 810, Mountain View, CA

RSVP and contact: Ildiko Ran at ildikoran@gmail.com or 650 353-8885

South Region Pre-Licensed Support Group

This group meets the first Friday of the month from 10 a.m. to 12 p.m.

Upcoming dates: July 3, August 7

Facilitator: Janis Seiberlich, LMFT

Location: 4100 Moorpark Ave., Suite 212, San Jose

RSVP and contact: janis@healing-heart-therapy.com or 650-810-5680

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Website: www.redcross.org

SCV-CAMFT News (USPS#10092) is published bi-monthly in January, March, May, July, September and November for \$10 per year by the Santa Clara Valley Chapter of the California Association of Marriage and Family Therapists, 2875 Middlefield Road, Suite 8, Palo Alto, CA 94306. Periodicals postage paid at Palo Alto, CA. POSTMASTER: Send address changes to SCV-CAMFT News, PO Box 60814, Palo Alto, CA 94306.

Newsletter deadline for the September/October issue is July 15. All articles and advertisements must be submitted either via e-mail to mail@scv-camft.org or via the chapter's website at www.scv-camft.org. Articles and announcements must be submitted typed and double-spaced. We reserve the right to edit all articles. Opinions expressed are those of the authors and do not necessarily represent views of SCV-CAMFT. Article guidelines are available online. Advertising guidelines are available online.



Santa Clara Valley Chapter

CALIFORNIA ASSOCIATION OF MARRIAGE AND FAMILY THERAPISTS

SCV-CAMFT News

Attention: Editor

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Palo Alto, CA 94306

www.scv-camft.org

**Serving San Mateo and Santa Clara Counties
Creating a Community and Culture of Connection**

SCV-CAMFT Annual Workshop

Friday, July 17
8:30 a.m. – 4:00 p.m.

“Finding Meaning, Facing Fears: In the Autumn of Your Years”

Presented by
Jerrold Lee Shapiro, PhD
(6.0 CEU hrs., PCE 1134)

Michael's at Shoreline
2960 Shoreline Blvd.
Mountain View, CA 94043

CHAPTER EVENTS

**Please visit
our online
Calendar of Events to
view and register for
these and
future events!**

North Region Luncheon

Friday, August 28
11:15 a.m. – 1:30 p.m.

“Evidence-Based Treatment for Teens and Disparities in Funding”

Presented by
Tom Tarshis, MD, MPH
(1.5 CEU hrs. available, PCE 1134)

Crystal Springs Golf Course
6650 Golf Course Lane
Burlingame, CA

RESERVATIONS: YOU CAN REGISTER ONLINE USING YOUR MASTERCARD, AMEX, VISA CREDIT CARD or PayPal! Go to our website at www.scv-camft.org, click the “Calendar of Events” page and click on the event to find the luncheon or workshop registration page. You can pay with credit card, paypal, or check. Send your check, payable to SCV-CAMFT, to SCV-CAMFT, P.O. Box 60814, Palo Alto, CA 94306. Payment must be received by the Monday before the event. Reservations will be held until noon. If seating is available, “walk-in” persons can pay at the door to attend. Please note: telephone reservations cannot be accepted. Please visit our website at www.scv-camft.org to review CEU information and our cancellation policy.