SANTA CLARA VALLEY
CHAPTER OF THE CALIFORNIA
ASSOCIATION OF MARRIAGE &
FAMILY THERAPISTS

SPECIAL POINTS OF INTEREST

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 LaDonna Silva,
 LMFT
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SCV-CAMFT News

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MARCH / APRIL 2012

President's Column—

Seasons of Change — President LaDonna Silva, LMFT

It's now 2012 and our new Chapter Board is about to spend a Saturday morning together for the very first gathering of the year.

Every January we have a Strategic Meeting and each board member is asked to reflect on their goals and intentions and to strategize about our direction for the coming year. As the incoming President I'd like our board to continue to tend to the needs of our members, and yet expand our focus and develop new themes and ideas. I have some of my own visions for our direction and look forward to how our discussion will guide us through 2012.



LaDonna Silva, LMFT President, SCV-CAMFT

I am a volunteer for the Critical Incident Stress Management (CISM) team run through the Centre for Living with Dying in Santa Clara and I would like to see our Chapter be a greater resource for local critical incidents. I envision our chapter building a regional team of therapist volunteers who are completely capable of responding to a local suicide, homicide, school crisis or local unexpected catastrophe like the San Bruno explosion. I know not everyone considers this their calling. however for those who are interested, please consider attending our yearly trainings focused on Crisis and Trauma Response. offer two courses. Eve of the Storm and CISM, and generally rotate them each vear. Our state CAMFT runs the overall Trauma

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Letter to CAMFT: SOCE Opposition

—by Bruce Weitzman, LMFT—SFCAMFT

In collaboration with the San Francisco (Bruce Weitzman, MFT and Jane Reingold, MFT), Santa Clara Valley (Terryann Sanders, MFT and LaDonna Silva, MFT), Santa Cruz (Vivian Gratton, MFT), and East Bay (Jurgen Braugardt, MFT and Kelly Sharp, MFT) Chapters, Bruce Weitzman, MFT put together the

following letter asking CAMFT to take a stance on the issue of SOCE practices:

"On behalf of the memberships of four Northern California chapters — San Francisco, Santa Clara Valley, Santa Cruz and East Bay — I would like to formally request that the CAMFT Board of Directors approve a statement in opposition to Sexual Orientation Change Efforts (SOCE), also known as conversion therapy, reparative therapy and ex---gay therapy. Though the CAMFT board has previously considered similar proposals in the past, this new request is put before

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SCV-CAMFT Calendar

MARCH

16-17 Eye of the Storm Training

Mountain View

30 Chapter Luncheon Mid Region; Mountain

View

APRIL

14 New Members Tea

Santa Clara

27 Chapter Luncheon

South Region; Los Gatos

MAY

3-6 CAMFT 48th Annual Conference

San Diego

18 Chapter Luncheon

North Region; Burlingame

JUNE

TBD SCV-CAMFT Specialty Workshop

Mountain View

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All material must be submitted either via e-mail to mail@scv-camft.org or via the chapter's Website at http://www.scv-camft.org. Articles & Announcements must be submitted typed and double-spaced.

Please see advertising policy and information on page 13.

Unsolicited manuscripts are welcome but the Editorial Committee accepts no responsibility for their return. We reserve the right to edit all articles. Opinions expressed are those of the authors and do not necessarily represent views of SCV-CAMFT.

Scl

Howard Scott Warshaw received his Master of Arts degree from JFK University and his Master of Engineering degree from Tulane University. After decades as a software designer/programmer, award winning film maker, celebrated video game developer, noted author, teacher and engineering manager, Howard has integrated his eclectic skill set in the service of others as a psychotherapist. He is currently in private practice under the supervision of Dr. Liz Zed where he focuses on the unique needs of Silicon Valley's Hi-Tech elite. Howard can be found at www.hswarshaw.com.

Pre-Licensed Corner—Yours, Mine, and Hours by Howard Scott Warshaw

I remember having only a few hundred hours toward my 3000 and thinking "How will I ever get through this?" Now I have only a few hundred hours remaining and I think "How will I ever get through this?" I'm so anxious to be there already. I can get so focused on where I'm not, it becomes hard to be where I am. I suffer from periodic absence of presence. Fortunately, something always cycles me back.

Part of my job these days is training others to do the things I originally needed training to do. I face my fledgling therapist self at every step. I watch them struggle with the transition. They look to me for guidance and reassurance. Those were my eyes not so long ago. How much mirroring can one person stand? It pleases me that I've gained the confidence and experience to answer their questions, which I do most days at the center. Then I venture out into the land of private practice where I look to my supervisor, so established and accomplished. Once again I'm the one seeking all the answers. The cycle continues.

From my last career, to graduate school, to practicum and now toward licensure and practice. Transitioning out of a place I've grown comfortable, facing the loss while being excited about moving forward. Building comfort in a new circumstance while the next transition lurks on the horizon. I feel like a perpetual hatchling, just as my nest gets nice and cozy, it's time to find a new one. During my practicum, this center was my nest. I was nurtured, and I grew, and I deeply value this existence. Now that I'm comfy and established it's time to leave... and so it goes.

Cycles are omnipresent in every aspect of our work. There's the cycle that occurs with every client. A constant stream of new beginnings, the work goes how it goes, and then we move on. In a single day I have many cycles in my journey from session to session; joining, processing and releasing in

every meeting. Some of the work is simply keeping them straight. Being completely present on my client's path while in session, and then stepping wholly off that path at the end. Clearing myself from one trail before joining the next client on another, or doing the best I can.

There is another type of cycling I experience on a regular basis as I move forward in my journey: The cycling of my own self-image as a therapist. At first I was very closed down out of blind fear. After all, I don't want to ruin anybody's life. Then I started to gain confidence and began to let myself out a bit. As I did, I found I didn't ruin anyone but I do have some rough edges and occasional triggers. When I catch myself triggered I reel myself in a bit and take my Counter Transference (C/T) to therapy. After working it through and making some progress with these issues, my confidence begins to increase. I expand myself as therapist once again, and feel pretty good about it. Soon the next layer emerges and I get triggered anew. This is the most important cycle for me, because this cycle enables C/T to become a tool for me rather than an impediment. My therapist has always said, "C/T is the greatest gift," but it's taken me years to unwrap it. There was nothing I studied more and understood less in my entire academic career. C/T is simply something that you have to experience to comprehend. Now I live it, note it, fear it, share it, work on it, and ultimately, come to respect and trust it. Then I'm ready for the next round.

The more things change, the more they stay the same. This leg of my therapeu-

tic journey is both exciting and terrifying. Once I get my license, I naturally assume all my dreams will come true, but for now I have the luxury of knowing it's almost over...and then it will finally begin.





Support Group Calendar

North Region Newly Licensed—March 17 and April 7
South Region Newly Licensed— March 10 and April 14
North Region / Peninsula Pre-Licensed— March 9 and April 13
South Region Pre-Licensed— March 2 and April 6

North Region and South Region Newly Licensed Support Groups are a valuable tool during your first few years as a licensed therapist.

The Newly Licensed Support Groups are designed to meet the needs of those just starting in the field after licensure, on up to three years after licensure.

You will find support, great ideas, and friendship with your peers.

Free North Region Newly Licensed Support Group's



North Region—The purpose of this group, which meets monthly, is to provide support to members who have recently become licensed. This support group meets the first Saturday of each month from 10:00 AM to 12:00 PM.

Jamie Moran, LCSW, is the current group facilitator. The location is 661 Live Oak Avenue, Suite One, Menlo Park, CA 94025. To RSVP, and for further information about upcoming meeting dates and times, please contact Jamie Moran at Jammoran@aol.com or 650/598-8877.

Be sure to take advantage of this valuable group and resource as you begin your journey as a licensed therapist.





A great way to create your long-term support network....

Free South Region Newly Licensed Support Group

South Region—This support group meets the third Saturday of each month.

WE WILL BEGIN AT A

NEW TIME: 10:00 AM to

12:00 PM. The purpose of this group is to provide support to members who

have recently become licensed. Verna Nelson, MFT, is the current group facilitator and meetings are held on the border of Campbell and Los Gatos, close to the intersection

of 85 and 880. To RSVP, and for further information, please contact Verna Nelson at 408/379-774 or email her vernalnelson@gmail.com



Free Prelicensed Support Groups

North Region and South Region

Pre-licensed Support Groups are a great way to connect

with your peers and a great mentor.

Free North Region Pre-licensed Support Group



Debra Rojas, LMFT, facilitates our pre-licensed support group for the north bay and peninsula. This new group has been formed to meet the needs of our pre-licensed members in the north region. Debra is a graduate of Trinity College of Graduate Studies, has been licensed for three years, and has a private practice in Menlo Park. Debra's group will meet the second Friday of

each month from 10:00am to 12 Noon, at Debra's home in Menlo Park.

To obtain additional information or add your name to the email list for this group, please contact D e b r a a t debra@debrarojasmft.com.



Find encouragement and advice from those who have already walked in your shoes on the road to licensure.

Free South Region Pre-licensed Support Group

Taylor Karen is South Bay pre-licensed group leader. Karen has been licensed for four years and is in private Campbell, practice in where she sees children, teens, and adults. Prior to starting her practice, she worked as a therapist for children and adults in a variety of diverse settings, including the public school system, county mental health, a psychiatric hospital, a

rehabilitation center, and several non-profit agencies.

To get on an email list for this group, to ask for



more information, or to give input about desired topics for upcoming meetings, please contact K a r e n a t

Karen@karenytaylor.com, or by phone at 408-455-8220. Additional information about Karen, as well as directions to her office, are available at www.karenytaylor.com.

At each meeting, Karen plans to have a structured topic, as well as open check-in/discussion time. Meetings are scheduled for the first Friday of each month from 9:30am to 11:15am at Karen's office.



(Part I, What's In It For Me? was published in the January/February 2012 newsletter.)



Bonnie Faber, LMFT

Bonnie L. Faber, MFT, is in full-time private practice in San Jose. In addition to employing interns in her practice, she offers both clinical consultation, and consultation to therapists considering hiring interns in their practices.

Supervision Series

Supervision (Part II) —And What Am I Getting Myself Into?— Bonnie Faber, LMFT

You may recall that Part I of this article focused primarily on the benefits and rewards of providing supervision, which involve a great deal of personal reward. Part II attempts to address the challenges and suggested safeguards, for those who provide supervision. It is not my intent to discourage anvone from considering supervising. Rather, I want to provide a fuller picture, and "informed consent", if you will....

We all know there are many practical things that are necessary to consider, prior to deciding to become supervisor....like mandatory supervisor training CEUs, and setting up shop as an employer (e.g., obtaining Worker's Comp insurance, Federal State Employer Identification Numbers, etc.) - if you choose to take on interns in vour private practice. And. then there's malpractice insurance, and income and payroll tax considerations, such as, do you hire someone to do your payroll?

However, in addition to these initial set-up requirements and considerations, supervising has other challenges, one of which I alluded to in part one of this article. As in any relationship with a built-in power imbalance, it's imperative that we as supervisors remain cognizant of this. In addition to having more "power" in supervisory relationships, we also carry a good deal of responsibil-

ity...for the training and oversight of our supervisees, and for the therapy supervisees' clients receive. Of course, our liability is reduced when interns carry their own malpractice insurance, and, especially, when supervisors are employed or contracted by agencies that employ their supervisees. However, we still have an ethical obligation to do our best to ensure that our supervisees' clients receive good therapy, and this often can feel like a weighty obligation.

Then there's the inevitable transference and countertransference that show up in superviour sory relationships...much in our like therapeutic relationships. And, we will often find our-

selves engaged in parallel processes, which may not be clear at first glance. Of course, there is the benefit that our supervisees are in the same field, and are generally aware of, and open to, exploring these aspects of the relationship, and willing to "think together" with us for the benefit of the client. ploring these clinical aspects of the supervisory relationship often can lead to growth for both, but, again, it's not always so easy to walk (and work)

through these sometimes triggering issues.

For me, personally, I have had to work hard to NOT HELP (or do) TOO MUCH. This is one of my core issues/challenges...needing to be needed. So, staying mindful of this is essential for me, in all relationships, and, that goes for my supervisory relationships, as Sometimes it's a well. pretty fine line...how do you teach, coach, encourage, etc., without taking on more than is really necessary? Again, I truly believe in em-

> powering supervisees, so I work stay conscious of balancing that goal with inevitable the anxiety, and legitimate needs, interns are going to have. Being open to, and willing to talk about. these transference issues -- as

> > become

aware of them, is critical to good supervision, at least in my opinion.

we

One of the responsibilities that comes with supervising is setting the "frame" (or boundaries) necessary in the supervisory relationship. Some of the "frame" issues to be considered include, how much time we "give" to supervisees, how client revenues will be shared, how office space will be shared, how supervisees will get clients, and how client crises should be



handled. When interns are working for agencies, many of these issues are already determined for supervisors and supervisees. The area that usually remains a bit more open to a supervisor's discretion is how much time to devote to supervisees. In private practice, however, all of the above, and more, need to be determined, and made clear to supervisees at the onset of the employer/employee relationship. **Assuming** these boundaries are well established up-front, it's still a responsibility of the supervisor to ensure they are adhered to -- by both parties.

I asked a good friend, and fellow supervisor, Terryann Sanders, LMFT, to share a challenge she's had supervising interns in her private practice, located in San Jose. Here is what she had to say, "One of my personal challenges came when supervising an intern who didn't agree with my treatment philosophy. As we all know, there are many ways to get the client where s/he wants to go, and therapists often differ in how they see the client getting there. I found myself saying the same things over and over again in supervision, and feeling like I wasn't getting through. Eventually, I realized that my intern didn't agree with my approach, and that had been the problem all along! Had I discussed my treatment philosophy in advance, we may have been able to avoid what turned out to be a difficult situation for both of us. This situation helped me to understand how important it is to be very clear with my interns about what

my treatment philosophy is. For supervisors who have a specific treatment philosophy, as I do for treating eating disordered clients, it is critical to have an understanding between supervisor and intern before the intern begins working with clients."

One of the most important things to implement, that protects both supervisors and supervisees, is a clear and thorough Supervision Whether super-Contract. vision is within an agency setting, in a private practice setting, or a 3rd party contracted relationship, having a detailed, written Supervision Contract is essential. These contracts should spell out both supervisors'



and supervisees' responsibilities; and, agency responsibilities need to be included, if applicable.

Another important support for supervisors is regular consultation, whether individual or group. Personally, I like a combination of the two, and am currently in both of Hugh Grubb's consultation groups. One meets weekly, the other twice per month. I find both invaluable for me, as both a clinician and a supervisor. I also see Hugh Grubb, PsyD, LMFT, for individual consultation support from time to time. In addition to my own therapy, I find that consultation helps to "hold" me, as I work to "hold" supervisees and clients. asked Dr. Grubb, a wellknown psychoanalyst, who has had a long-time private practice in Los Gatos, what he sees as his role in providing consultation, and this was his response: "I hope to provide support for the intense personal demands of doing our work, as well as a confirmation of the relevance of the innate. heartfelt responses each have to clinical situations. I hope to be strengthening the professional community, supporting a particular kind of emotional presence: honest and resilient, yet also deeply curious and imaginative."

And, lastly, I find it very helpful to connect with other supervisors from time to time. I think those of us who supervise can be of great support to one another, by creating "community" of supervisors. I know I often have consulted with other supervisors when I've found myself wondering about a specific situation with a supervisee. or a supervisee's client. Frankly, it's just helpful to bounce ideas around at times... In my opinion, it's just as dangerous to supervise, as it is to do therapy, in isolation.

Now, I certainly hope I haven't scared anyone off from considering becoming a supervisor...because, with the proper structure and support systems in place, providing supervision to the next generation of therapists can be extremely enriching and rewarding, and sometimes even lifechanging.



"Sometimes it's a pretty fine line...how do you teach, coach, encourage, etc., without taking on more than is really necessary?"

SCV-CAMFT 2012 Calendar of Events

January 15, 2012; Sunday

March / April Newsletter Deadline

January 27, 2012; Friday

SCV-CAMFT South Region Luncheon & Board Meeting

March 15, 2012; Thursday

May / June Newsletter Deadline

April 14, 2012; Saturday

New Members Tea

February 24, 2012; Friday

SCV-CAMFT North Region Luncheon & Board Meeting

March 16-17, 2012; Friday and Saturday

Eye of the Storm Training

March 30, 2012; Friday

SCV-CAMFT Mid Region Luncheon & Board Meeting

May 3-6, 2012; Thursday—Sunday

CAMFT 48th Annual Conference in San Diego

May 15, 2012; Tuesday

July / August Newsletter Deadline

Please Note Newsletter Deadlines:

THE DEADLINE FOR NEWSLETTER SUBMISSIONS IS SIX WEEKS PRIOR TO PUBLICATION. (THE DEADLINE FOR THE MAY / JUNE ISSUE IS MARCH 15TH.) 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.

May / June 2012 Issue Deadline March 15, 2012 JULY / AUGUST 2012 ISSUE DEADLINE MAY 15, 2012

Change of Status

SCV-CAMFT would like to acknowledge those members who recently negotiated the difficult task of completing the MFT licensing process.

Congratulations to:

LaDonna Silva, Kelly Kilcoyne, Louisa Squires and Maaliea Wilbur — Newly Licensed MFTs

If you have received your notice of licensure, it is important to remember to inform your local chapter as well as the state organization of CAMFT. Please inform our chapter coordinator of any status change as soon as possible by telephone, 408/235-0210, or by e-mail, mail@scv-camft.org.



Creating a Community and Culture of Connection



March 16 & 17 Eye of the Storm: Trauma Response Training

Presented by Diane Myers, RN, MSN, CTS

Mental health professionals are increasingly called upon to respond to large-scale community-wide disasters. This 2-day workshop will provide participants with essential knowledge and skills for intervening effectively with mental health needs in the complex and intensive aftermath of a disaster. Topics will include types of disaster, trauma caused by disaster, risk groups, and phases of recovery. This particular course is not offered often. It can be taken by those who have a general interest in learning more about disaster mental health, or as one of three courses required to be a member of a **CAMFT TRAUMA RESPONSE NETWORK**.

Limited Seating— Register Today!

SCV-CAMFT Members; **\$275**

Non Members: \$300

Event Details:
March 16 & 17: 8:30am
to 4:30pm (Registration
begins at 8:00am)
Continental Breakfast will
be served
Lunch is not provided
Mountain View Fire
Department
1000 Villa Street

14 CEUs PCE 1134

Clinicians will learn...

- Effective mental health interventions to be used in a variety of disaster settings (including workplace and community) and time phases.
- How disaster mental health needs differ from psychotherapy
- How to become part of an integrated community response effort
- Self-care and prevention of secondary traumatization for disaster mental health professionals.

Presenter: Diane Myers, RN, MSN, CTS, has her Master's Degree in psychiatric nursing from Yale University, and is a licensed Psychiatric Mental Health Nurse

and Clinical Nurse Specialist. She is a Board Certified Expert in Traumatic Stress, American Academy of Experts in Traumatic Stress; Certified Trauma Specialist, Association of Traumatic Stress Specialist; and holds the credentials of Certified Traumatologist and Master Traumatologist from the Florida State University of Traumatology Institute. She is a popular speaker endorsed by CAMFT. Find out more on our website calendar at



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SCV-CAMFT March Mid Region Luncheon

(1.5 CEU hrs. available, PCE 1134)

Collaborative Couples Therapy: Turning Fights into Intimate Conversations

Presented by Daniel Wile, Ph.D.

Date: Friday, March 30 Time: 11:15 am—1:30pm
Place: Michael's at Shoreline, 2960 Shoreline Blvd., Mtn. View Menu: Buffet Lunch

Register: At <u>www.scv-camft.org</u>, or mail your payment to SCV-CAMFT, PO Box 60814, Palo Alto, CA 94306 Fee: Members—\$26 + \$7 for CEUs Non-members—\$30 + \$7 for CEUs

To volunteer to write the summary afterwards, please contact Wendy Wegeforth at 408-888-6630.

Register: Please make your payment by Monday, March 26 for the early registration fee, or just show up and pay the higher "Walk-in" fee. To volunteer to write the summary of this presentation for the Newsletter, and *receive a free lunch*, please email Sunnie Weber at mail@scv-camft.org.

Couples therapy is the process of revealing the conversation concealed by the flames of the couple's fight or buried in the ashes of their withdrawal. In what could be called the tragedy of everyday life, couples' wishes are expressed as complaints; needs are stated as demands; and power struggles take the place of open communication. Therapists typically treat these seemingly irresolvable relationship problems as expressions of character pathology, ghosts of the past, personality clashes, or long-nursed grudges.

For our March 30th Mid-Region CAMFT Luncheon, Dr. Dan Wile will outline his approach: Collaborative Couples Therapy. In this innovative method:

- ◆ The heart of the problem is viewed as the "loss of voice". The clients feel alone and unable to express their inner longings and fears, and hopelessness sets in.
- ◆ The fight occurring at the moment is transformed into a moment of intimacy turning it into a curative force for solving the couple's current impasse.
- ♦ The central therapeutic task is to move couples out of their spiral of alienation—their adversarial or withdrawn state—and into a cycle of connection.
- ♦ The therapist creates intimate conversations by bringing into the couple dialogue the feelings that each partner struggles with alone.

A defining feature of Dr. Wile's work is the recognition that in therapy sessions with couples, the therapist grapples with the same problems as the couple does. Our task thus is to recognize our disengagement and disapproval as clues to the relationship problem of the moment.

Dan will present his approach and then do a role-play demonstration using thespian therapist volunteers.



Daniel B. Wile, Ph.D. received his Ph.D. from the University of California at Berkeley, where he is an Assistant Clinical Professor. Dr. Wile is a clinical psychologist with thirty years experience as a couple's therapist. He has published on psychotherapeutic theory, has taught in graduate programs in the San Francisco Bay Area, gives professional workshops on couples therapy throughout the United States and internationally, and is author of *Couples Therapy: A Nontraditional Approach, After the Honeymoon, How Conflict Can Improve Your Relationship*, and *After the Fight: Using Your Disagreements to Build a Stronger Relationship*. Dr. Wile is a Diplomate in Clinical Psychology of the American Board of Professional Psychology.

Directions:

From 101 Heading North or South: Take the Shoreline Blvd. Exit East. Proceed through the golf course.

SCV-CAMFT April South Region Luncheon

(1.5 CEU hrs. available, PCE 1134)

What Therapists Need to Know About the Latest Research on Alzheimer's Disease **Presented by Craig Wingate, MPH**

Date:Friday, April 27Time:11:30am—1:30pmPlace:Los Gatos Lodge, 50 Los Gatos—Saratoga RdMenu:Buffet Lunch

Register: At <u>www.scv-camft.org</u> or mail your payment to Fee: Members—\$26 + \$7 for CEUs

SCV-CAMFT, PO Box 60814, Palo Alto, CA 94306 Non-members—\$30 + \$7 for CEUs

Register: **Please make your payment by Monday, April 23** for the early registration fee, or just show up and pay the higher "Walk-in" fee. To volunteer to write the summary of this presentation for the Newsletter, and **receive a free lunch**, please email Sunnie Weber at **mail@scv-camft.org**.

In recent years we have entered a period of tremendous advances in Alzheimer research. These advances occurred on all fronts, encompassing areas as diverse as genetic risk factors for Alzheimer's, imaging studies that identify Alzheimer's in the living brain, blood tests that may one day be used to diagnose this disease, and discovering how our lifestyle influences our risk of developing Alzheimer's as we age.

This program reviews the latest in Alzheimer's disease research. It also provides a detailed description of the functionality of Alzheimer's disease, which will be very useful when developing coping strategies and managing the various emotions that this disease creates. We believe individuals who have a clear understanding of this disease are better

equipped to clinically support caregivers and those living with the disease.

Craig Austin Wingate joined the Alzheimer's Association in July 2011 as an African American Outreach Specialist. Mr. Wingate is responsible for educating African Americans in the Bay Area about Alzheimer's disease, facilitating a monthly support group for caregivers, and organizing an annual caregiving and wellness forum in the East Bay. Mr. Wingate has an extensive background in outreach, health promotion, and health education. Prior to joining the Alzheimer's Association, Mr. Wingate worked at a social marketing firm where he helped

develop and launch over 20 local and national health campaigns. Mr. Wingate holds a B.S. in Psychology from the University of Vermont and a M.P.H. from San Francisco State University. In his spare time, Mr. Wingate runs track for the San Francisco Track & Field Club, and likes to compose music.

Directions:

<u>From 280 Heading North or South:</u> Exit I-880 South towards Santa Cruz. I-880 South becomes SR-17 S. Take the East Los Gatos exit. Merge onto Los Gatos-Saratoga Road. The Los Gatos Lodge will be on your right. There is plenty of parking. SCV-CAMFT luncheons will be located in the GARDEN ROOM.

Note: While there are sometimes a few seats left for walk-ins (\$33 / \$40), pre-registration is required. We give the food counts a few days before the luncheon and cannot be accurate without pre-registration. If you find you must cancel, please call the chapter voicemail (408/235-0210). **Refunds are not always available and are never available without this notification.** It **may** be possible to transfer your payment to the following month **if** you call at least 24 hours in advance. The contact persons are available to answer questions about the speaker and the topic. If you have questions about the procedure for registering, call the chapter voicemail. Guests are welcome to attend with you—please provide their names along with your payment. Also be sure to specify your entrée choice with your payment. See the back cover for more information on registration. **Please remember that telephone reservations cannot be accepted.**

- Chapter board meetings are generally held on the fourth Friday of each month (some major holidays and other chapter functions move the date) from 9:00AM to 11:30AM at the same location as, and immediately prior to, the chapter's monthly luncheon event.
- ♦ All luncheon programs are held from 11:30AM to 1:30PM. Look for locations and other specifics in the newsletters, on the chapter's website, and in e-mail sent directly to those members who have e-mail.
- In order to make the luncheon registration process as efficient as possible, please register early. Send your payments, with your entrée selection noted, to the chapter by the Monday prior to the event.



SOCE Opposition—CAMFT's Response

By Bruce Weitzman, LMFT—SFCAMFT

Hi All.

I attended the state CAMFT board meeting in Sacramento today, where the CAMFT Board considered and acted upon a proposal regarding sexual orientation change efforts (SOCE), also known as reparative therapy, conversion therapy, and ex-gay therapy. The proposal was a joint undertaking of four chapters -- San Francisco, Santa Cruz, Santa Clara Valley, and the East Bay. Marin CAMFT sent in a separate proposal, which was considered under the umbrella of this larger four-chapter proposal. The essence of the proposal was two-fold: it asked CAMFT to approve a statement opposing SOCE; and, it asked CAMFT to create a Cultural Competency Committee to safeguard populations at risk of being marginalized or exploited through certain treatment practices.

I attended the meeting along with James Guay and Jim Walker. James is a long-time San Francisco chapter member, who currently practices in both San Francisco and Los Angeles. Jim practices in the East Bay and San Francisco. Both were involved in the marriage equality efforts in 2009 and have played significant roles in helping to bring LGBT issues to the CAMFT Board. James observed the CAMFT board meeting a year ago, when the directors voted down a proposal to support the APA's position on this issue as articulated in its Resolution on Appropriate Affirmative Responses to Sexual Orientation Distress and Change Efforts. Lisa Maurel, an MFT from Los Angeles, deserves our gratitude and recognition for bringing this first proposal before CAMFT a year ago.

Today's experience of the CAMFT Board was far different from any of my past experiences. Board members appeared well-educated on the issue. Directors were respectful and pragmatic. Their ways of engaging in debate honored the collaboration and extensive effort that went into crafting the proposal. Discussions felt open. Several board members took impassioned positions in opposition to SOCE and in support of the need to protect youth who are inordinately affected by SOCE. Most other members openly vocalized their personal feelings and opposition to SOCE. Some struggled with the distinction between personal opinions and their professional responsibilities as board members.

CAMFT's new Executive Director, Jill Epstein, organized the discussion into two parts: the proposed statement opposing SOCE; then, the proposal to create a Cultural Competency Committee. Jill opened the discussion by reviewing the history of the CAMFT Board's deliberations on SOCE in both January and June 2011. After some initial discussion, Board Member Ronald Mah submitted a motion for CAMFT to affirm its support of the APA's position on SOCE, which includes a statement that same -sex sexual attraction is a normal variant of human sexuality, that homosexuality is not a mental disorder, and that there is insufficient evidence to support the use of psychological interventions to change sexual orientation. The motion passed unanimously, clearly indicating that CAMFT stands solidly with the APA on this issue.

Next, the CAMFT Board took up the question of the proposed statement on SOCE. Board Member Leah Flagg-Wilson made a motion to accept a proposed statement submitted by the four chapters. Board Member Victoria Campbell made an impassioned appeal regarding the positive impact that a statement would have on protecting marginalized youth, who are most vulnerable to having SOCE imposed on them. Some board members voiced concerns about CAMFT overstepping its bounds with regard to regulating treatment options. Past President Jack Kennedy concluded, "We are being asked to remind people to ask a lot of questions. I don't think it asks anything which isn't consistent

with good ethical practice." Many board members agreed with him. Others indicated that they were supportive in principle but were concerned with some of the specific wording. CAMFT's Deputy Executive Director, Cathy Atkins, pointed out some legal risks and advocated rewriting the statement. Board President James Sanders called for a vote. The motion to accept the statement as written failed (with four members for it; six opposed; one abstention). Ronald Mah moved to direct CAMFT's staff to craft a new statement "based on the thrust and spirit of the resolution," which also addresses the concerns raised by Cathy Atkins and some of the directors. The motion unanimously carried. Jill Epstein and her staff will undertake the drafting of a new statement to bring before the Board, presumably at the next meeting in March 2012.

Finally, the Board considered the proposal to create a Cultural Competency Committee. There was limited, but supportive discussion of the topic. The Board directed Jill Epstein and her staff to come up with more specific guidelines for a Cultural Competency Committee. Jill said she would like to look at ways other large organizations approach the topic of cultural competency and agreed to bring a proposal before the Board at their June 2012 meeting.

Each of the three observers were given three minutes to respond back to the Board. This communication reflects a recent change to the board meeting format, allowing observers to raise topics of concern. We used our time to give feedback regarding the Board's handling of the SOCE topic. I mentioned how grateful I was to hear the Board discuss this topic in such a dignified and affirming way. For me, it marked a great change in the Board's attitude towards discussing LGBT issues and made me quite happy. Past President Jack Kennedy thanked us for not giving up on the process and acknowledged that we could have taken a different path than the one we did. In a self-referential remark, he said, "For some of us, it takes a while -- maybe two or three times -- to get it." I appreciated his humility in acknowledging that we have all been involved in a slow-moving and sometimes difficult process.

I want to give some special recognition to the people who made this proposal happen. Jill Epstein gave up a weekend day to meet with a collection of people from these northern California chapters. She was one among the people who recognized the possible significance of a Cultural Competency Committee within CAMFT. The core group of people working on the proposal included Vivian Gratton from the Santa Cruz chapter, LaDonna Silva and Terryann Sanders from the Santa Clara Valley chapter, Jurgen Braungardt and Kelly Sharp from the East Bay chapter, and many Board members from the San Francisco chapter including Jane Reingold. I also want to acknowledge Holly Hughes, Jodi Klugman-Rabb and Ken Goodman for their help, ideas and moral support along the way. We also owe a debt to some folks at Gaylesta -- in particular, Deborah Cooper, Dino DiDonato, Jim Walker, and Rebecca Silverstein. These people keep reminding me not to get too complacent -- that there's work to be done.

In closing, I want to say that I felt that we accomplished a lot today. CAMFT's is solidly on board with the APA's recommendations regarding SOCE. Next will follow a statement opposing SOCE. Soon after, we will see a revised proposal for a Cultural Competency Committee. That little ball keeps rolling.

Warm regards,

Bruce Weitzman, MFT SFCAMFT Social Advocacy Chair and Treasurer

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Kay Holmes, RN, LMFT, is a member of SCV-CAMFT. As an experienced RN, she sees people in a very holistic manner (physical, emotional, and spiritual). She is also the Clinical Director of a Drug & Alcohol Treatment Program called Recovery Connections. She can be reached at her practice in San

November Luncheon Review—by Kay Holmes

On Friday, November 18, 2011, the SCV-CAMFT brought us Birgit Wolz, Ph.D and MFT, for a presentation Cinema Therapy. This workshop was held at Michael's at Shoreline in Mountain View, and was well attended, and very well received. The beautiful setting and the lovely luncheon buffet was combined with a thoughtful and interesting topic, creating a rich experience.

Dr. Wolz is a psychotherapist in private practice in Loch Lomond. She is also a writer, a lecturer and a teacher. She describes herself not as a movie expert, but rather a movie lover. stresses that this methodology of using movies is an adjunct to traditional therapeutic methods, not a substitute. Dr. Wolz has published numerous articles on the subject, and she writes a column featuring therapeutically oriented movie reviews for The Therapist. She says that many therapists have used the book she wrote as a workbook with their clients (Emotion Picture Magic: a Movie Lover's Guide to Healing and Transformation).



We were asked to think about some questions:

 Why does a certain film have more impact on us in a specific phase of our life, than in

- others?
- Why do certain scenes stick in our memory?
- Why do certain movies, characters, or scenes move us more deeply than others?
- What can we learn about ourselves from our responses in movies?

These intriguing questions set the stage for the further exploration of movie's effect on the Psyche. The Filmmaker, Ingmar Bergman said, "No form of art goes beyond ordinary consciousness as film does, straight to our emotions, deep into the twilight room of the soul."

Movies affect us powerfully because the combined impact of music, dialogue, lighting, camera angles, and sound effects enable a film to bypass ordinary defensive censors in us. They draw us into the viewing experience, but at the same time, often more easily than in real life-afford a unique opportunity to retain a perspective outside the experience...the observer's view.

Dr. Wolz suggests that if we are to use these methods, we teach our clients to watch with conscious awareness, to become a "compassionate witness." Teach dual awareness, where the client pays attention to both inner space and outer space (the movie storyline). Remember that pain or pleasure is highly memory evocative. In fact, powerful movies can induce a trance-like state, where learning is enhanced. She also emphasizes that films are best used in therapy after a thorough assessment and a solid relationship is established with the client. There are doubting voices that

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Alice J. Sklar, MFT, CGP (650) 961-3482

Marriage and Family Therapist License Number: #20662 Certified Group Psychotherapist License Number: #179002

"So What" - A New Sanity-Saving Mantra for Stressed Parents

"So What"

is not about

caring less,

it's about

controlling

less.

-Laynee Gilbert, LMFT and Single Mom

I'll bet you've all had clients who can relate to this type of scenario (and maybe some of you can yourselves):

It's dinnertime. You're finally home

after spending the past hour fighting rush-hour traffic getting from work to your 6-yearold daughter's after-school As you're rushing around the kitchen, your little angel pops in, excited to show you something she's done. "Mama, remember when you said we could draw a height chart on the wall of

our new house? Well... look!" She tugs on your shirt and leads you into the front entryway, where she proudly points out the foot-long picture she's just drawn right in the middle of the wall – of a girl with a line at the top of her head where her height is measured.

You have a choice here. You can lecture her for defacing the wall when you KNOW you should NEVER draw like that on a wall, or you can take a deep breath, say to yourself, "So What," and compliment her creativity as you pull out your camera.

For me, "So What" was the clear choice, though not long ago my reaction would have been to drill home The Lesson instead. By staying present and not getting hooked by "shoulds" and what others may think. I was able to enjoy this shared moment of the spontaneous christening of our new home, my daughter came away feeling pride instead of shame, and I spent the rest of the evening wearing a smile instead of a scowl.

My initial "So What" epiphany arrived in a moment of crisis one evening, at the point when battle after battle with my daughter had worn me down to the core. The words "So What" drifted into my consciousness, and I surrendered... in a positive, codependent-no -more kind of way. From then on, I

began documenting my experiences and process to share with others struggling with similar experiences.

"So What" is not about caring less, it's about controlling less. With a "So

> givers, but are often brand new worn parent clients:

What" attitude, over-stretched parents - single and otherwise can maintain their sanity and self-confidence, while at the same time parent and child bond effectively. Here are some tips, which may sound trivial to you professional careand very useful to our care-

- 1. Identify and defuse "buttons and hooks" that distract from the situation at hand. We each have our own unique hot spots that get in the way of being able to evaluate and respond to a situation objectively rather than reactively. One of my own buttons is related to Listening. I'll be driving my daughter to school, talking about something terribly important like our plans for the weekend, when she replies with a comment completely off topic. This pushes a button and I'm instantly hooked into thinking: She doesn't care! She isn't interested in what I have to say, doesn't appreciate everything I do for her! My knee-jerk reaction is to either get angry and lash out or withdraw into silence, defensive reactions certain to drive a wedge between us. Fortunately, I've come to recognize this hook for what it is, remnants of my past, nothing to do with the present. Now, when she interrupts or changes the subject, So What. I have a choice to let it go or bring to her attention that I was talking, and continue where I left off. No more hurt feelings, no more wedge.
- 2. Trust your own judgment to determine when to say "Yes" or "No". Every request received from our children deserves at least a moment's consideration. But when the requests come

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Laynee Gilbert, M.A., has been a licensed Marriage & Family Therapist for more than 20 years, and has twice served as Chapter Secretary on the SCV-CAMFT Board. She is the author of five books. including I Remember You: A Grief Journal, first released in 1995. Her new book. So What: A Single Mom's* Guide to Staying Sane in the 21st Century (*Not just for single moms) (L.O.A. Publications, 2012, 0-9678966-3-0, 108 pages, \$13.95 paperback, \$9.99 eBook), is available along with the others at Amazon http:// amzn.com/0967896630 and at all major online booksellers. For more information, please visit www.loapublications.co m.



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- 5. Choose their profile and email them directly.

If you have any questions about this valuable membership resource, please contact the program coordinator,

Yvonne Blockie at yvonnemft@comcast.net , or by phone at 408-235-0872.

~ Mentoring is a brain to pick, an ear to listen, and a push in the right direction. ~ John Crosby

ONGOING PSYCHOTHERAPY GROUPS



In this dynamic psychotherapy group experience, clients explore relationship patterns & learn about healthy connection with others. Issues such as depression, dating, shyness, codependency, ACOA, and selfesteem, are explored with the support and feedback of peers.

Nancy Wesson, Ph.D. CGP (Psy9621) is a licensed psychologist with 25 years of clinical experience. Dr. Wesson has 20 years of experience leading groups using a group process-interpersonal approach. She receives consultation from Dr. Irvin Yalom. Contact: Nancy Wesson, Ph.D. at (650) 965-7332 or Dr.NWesson@sbcglobal.net. Articles about group psychotherapy can be found on her website at: www.wespsych.com.

President's Column cont'd from page 1

Response Network, which requires members to also complete a class by Red Cross. Once you have attended these three courses, you can apply on-line through State CAMFT via their website at: http://www.camft.org/Content/NavigationMenu/ChapterInfo/TraumaResponseNetwork/Forms/default.htm.

My hope would be that we build a team of at least ten chapter members so that anyone from our team could partner and respond to an incident. I also think this is a wonderful way for our profession and association to be involved and give back to the community. Your time commitment doesn't need to be extensive, and could be as little as a two-hour debrief for a particular incident.

Some of you might be wondering what our board decided to do after we sent our Chapter a survey regarding Sexual Orientation Change Efforts (SOCE) or Reparative Therapy. After our survey was reviewed, our board unanimously decided to participate with the local chapters (East Bay, SF and Santa Cruz) in making a request to the State CAMFT board to approve a statement in opposition to SOCE. This meeting will take place in late January and we'll see how the State Board responds. I'm hoping to include the survey results and a copy of the letter either in this newsletter, or posted on our website.

We also surveyed our members regarding your ideas for future workshops and luncheons. Pam Eaken, our Special Events Director, and Elizabeth Basile, our Director of Programs and Evaluations, will both be considering this information as plans are made for 2012.

I welcome your feedback, questions and inquiries...

SOCE Opposition.— cont'd from page 1-

the board as a joint collaboration among these four chapters and strongly reflects the wishes of our members. Cumulatively, across these chapters, 93% of surveyed members believe that SOCE causes harm; 90% believe that SOCE is not culturally competent; and, 89% believe that CAMFT needs to make a strong statement opposing SOCE. Of these four chapters, only the East Bay chapter has not yet surveyed its membership on the subject. Nonetheless, the East Bay chapter board elected to participate in this proposal and expects that a survey would vield similar results to those of the other Northern California chapters. Additionally, we ask CAMFT to establish a cultural competency committee that can identify issues and concerns related to psychotherapeutic treatment of non---mainstream groups in order to recommend culturally appropriate best practices in the treatment of these groups."

Please find the complete letter, including client testimonies and citations, on our website at www.scv-camft.org/resources/SOCE-proposal-2012.pdf.

Luncheon Review...— cont'd from page 14

say that this approach is unscientific with little research to account for therapeutic value. Others say it's too simplistic - that most people want to be entertained by films – not "analyze" them for therapeutic purposes. Now research has been done, and we know that films can enhance learning. They can have a cleansing effect and help discharge aggressive feelings. Also, they can help prepare one to deal with difficult decisions.

Dr. Wolz emphasizes caution, however, in using this technique with traumatized clients.

Dr. Wolz says we can work with

films (or clips from films) in three ways:

The Evocative Way: No need to recommend specific movies to clients. Discuss their reactions to the films they have seen. Work with the client's response according to your theoretical orientation.

Some evocative questions are:

- How did the movie touch you, positively or negatively?
- If the film had a unique message for you, what was it?
- What ideas for behaviors adding new ones or letting go of the old patterns – did the movie introduce?
- Did you experience something that connected you with health and wholeness, your inner wisdom or higher self as you watched certain scenes or characters?
- What other films do you remember having seen that might take the discussion a step further?

Clarify your intent when assigning a film, especially if a client might mistake the role identification. Suggest taking notes about emotional responses to scenes during or after watching the film. If appropriate, encourage clients to watch movie with friends or family.

The Prescriptive Way: Specific movies are prescribed, and then discussed.

The Cathartic Way: Specific movies or type of movies are recommended to assist in catharsis. Healing may require the physical body to be directly affected. Stress and emotional pain produce specific chemicals in the body. Emotional releases, such as crying and laughter, can cleanse the body of these chemicals. Used appropriately, movies can provide a healing catharsis.

Limitations of the Use of a Film Experience in Therapy Effectiveness suffers with clients who are incapable of drawing in-

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sight from metaphor. Prescribing films is often not effective with small children, except in family therapy.

- ♦ No film assignments with clients with serious psychiatric disorders, or where there is violence in the client's home.
- ♦ No film assignment when client recently had trauma similar to a character in the movie.
- ◆ No film assignment if client might read wrong motives.
- ◆ No film assignment if client dislikes movie.

Happy Viewing!

Dr. Wolz has CEU courses

online at www.zurinstitute.com.

"So What"cont'd from page 16

at rapid fire while we're already feeling under siege by life's demands, it often seems easier to just say "No" than to think things through. However, when we react instead of consider, we may be unconsciously basing our decision on what we fear others may think of this later, or what we learned long ago was how we "should" respond. We need to shield ourselves from these real and imagined past and future judgments, and pull ourselves back to the present where we're most capable of clear thinking. When we're present-centered, we can look within and ask ourselves this fundamental question: What is my best possible response right now, balancing the needs of my child, our relationship and myself?

3. Balance the need to control with the need to let go. As parents, we want to protect our children from pain and disappointment, but sometimes our efforts cross a line. As uncomfortable as it may be for us to let go of control and allow for a measure of risk, there are times it's essential in order for our children to flourish and learn from natural conse-

quences. Remember, letting go of *some* control is not a slippery slope to letting go of *all* control.

- 4. Adopt a "good enough" standard. There are abundant pressures on parents to be "perfect" and to keep up with real and imagined expectations from others. As a single Type A parent working full-time in and outside the home. I've learned for myself that trying to be and do it all perfectly is perfectly maddening, not to mention a setup for failure and disappointment. Forgiving imperfection is key toward maintaining positive self-esteem and healthy relationships. By lightening up on myself, I'm lightening up on my daughter as well, plus the added benefit of teaching her an invaluable lesson about acceptance of self and others.
- 5. Ask for help, and take personal time without guilt. Parenting is like running a marathon, and we need to take care of ourselves physically and emotionally in order to go the distance. Single parents have the added stress of trudging through over-filled days without any built-in breaks, yet often we feel like we 'should' be independent or 'shouldn't' bother others. We need to dump these 'shoulds' and reach out to friends and fellow parents who can help ease the load. There's no reason to feel guilty just because we want time for ourselves. Better self-care not only helps relieve stress, but also results in less resentment, which ultimately greatly benefits our relationship with our children.

An Update from CAMFT: — Medicare Update - Jan. 2012



At the end of the Federal legislative session in December 2011, the payroll tax cut was extended and the Medicare payment rate to doctors was fixed. However, the "fix" is only in effect until February 2012.

As a result, Congress will have to re-visit Medicare issues early in 2012 and, thus, an opportunity exists to have the LMFT Medicare provision included in any new, larger legislation.

(Note: It would be easier to get the LMFT/LPC provider provision attached to a larger piece of legislation as an amendment than to have it pass as a free-standing bill.) The CAMFT lobbyist and the Medicare Access Coalition will be working vigorously on this in c o m i n g m o n t h s.

ADVERTISING OPPORTUNITIES

Since the launch of the chapter's Website in the fall of 2004, all classified advertisements have been published on the Website concurrently with their run in the chapter newsletter. Please remember, you can always receive an additional discount by paying for multiple publications of your advertisement in advance.

These prices and more information about our advertising policies, are also available on the chapter's Website, www.scv-camft.org. If you have questions or comments, please contact the chapter at 408/235-0210 or mail@scv-camft.org.

FOR CLINICIANS

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GROUPS AND WORKSHOPS

Women's Therapy Group

Wednesday evenings in San Jose: For women who want to improve their relationships, develop healthy communications skills and pursue personal development. Some of the issues addressed include self-esteem, assertiveness, grief and loss, childhood concerns, anxiety, and depression. Contact Claire Wright, MFT at 408-998-7098 for details.

Women's Process Group for Sexual Abuse/Trauma Survivors

On-going weekly group held at the Process Therapy Institute in Los Gatos. http://www.processes.org/womensuptgp.php Contact LaDonna Silva, LMFT (408) 358-2218 x421

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www.lauralcjohnson.com/anxiety-group | Contact paul@dalytherapy.com-san-jose.html.

GROUPS AND WORKSHOPS

Women's Group

A group for Women Who Love Too Much is forming in Redwood City on Tuesday evenings from 6:30 - 8:00. This group is for women who feel incomplete without a man in their lives. Price is \$40/session and a complimentary interview is required. Contact Lori Gortner for more information.

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ONGOING PSYCHOTHERAPY GROUPS

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We are thankful for the time authors have taken to write thoughtful articles.

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- Length: Articles 500-1,200 words; Announcements 75-250 words
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 - For more information, email Vinutha Mohan, Editor, vinutham@gmail.com
 - All submissions are subject to review and approval by the SCV-CAMFT Editorial Committee

Yes! We Take Them!





You may now use your credit card on the chapter's website to register for chapter-sponsored events (luncheons, workshops, etc.), submit and pay for advertising, and renew your SCV-CAMFT membership. All you need to do is log in to the chapter's website (http://www.scv-camft.org). You may renew your membership and submit ads from your "My Account" page or register for events from the event calendar. Remember to *log in* to receive your member discounts.

We also accept PayPal payments to mail@scv-camft.org if you already have an account.

Or you can always mail your check payment to us at SCV-CAMFT, PO Box 60814, Palo Alto, CA 94306.



Familiar With the Expression

"There is no such thing as a free lunch?"

Well...It's Not Completely True... SCV-CAMFT's Program Planning Committees Are Offering You A Free Lunch!

If you are planning to attend an upcoming luncheon, our chapter is always looking for volunteers to write a summary of these presentations for the newsletter. These summaries benefit all those members unable to attend. After submitting your article, you will be entitled to

one free meal at any future SCV-CAMFT luncheon.

Please contact the chapter, 408/235-0210 or mail@scvcamft.org, if you are interested in getting a free lunch while doing something that feels great! to educate,



SCV-CAMFT News Attention: Editor P.O.Box 60814 Palo Alto, CA 94306

Creating a Community and Culture of Connection

We're on the Web! www.scv-camft.org

March 16 & 17

8:30 AM — 4:00 PM

CAMFT Trauma Response Network Training (14 CEU hrs. available, PCE 1134)

"Eye of the Storm Trauma Response Training" By Diane Myers, RN, MSN

Mountain View Fire Dept. 1000 Villa Street Mountain View

Chapter Events

Dates to Remember

- April 14—New Members Tea in Santa Clara
- ◆ April 27—South-Region Luncheon in Los Gatos
- May 3-6—CAMFT 48th Annual Conference in San Diego
- ♦ May 18—North-Region Luncheon in Burlingame

Friday, March 30

11:30 AM — 1:30 PM

Mid Region Luncheon (1.5 CEU hrs. available, PCE 1134)

"Collaborative Couples
Therapy: Turning Fights into
Intimate Conversations"
By Daniel B. Wile, PhD

Michael's at Shoreline 2960 Shoreline Blvd.

Mountain View

For more information about chapter events, please view the calendar on our website at www.scv-camft.org.

RESERVATIONS: YOU CAN REGISTER ONLINE USING YOUR MASTERCARD OR VISA CREDIT CARD! Go to our website at www.scv-camft.org, enter the "Calendar of Events" page and click on the event to find the luncheon or workshop registration page. You can also register by PayPal or by sending a 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, "standby" persons can pay at the door to attend. Please note: telephone reservations cannot be accepted. Call the chapter voicemail, 408/235-0210, for reservation information and the chapter's cancellations policy.