



The Official Bulletin of Greater Pittsburgh Psychological Association

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Issue for Spring 2007

A View From the Chair

Dr. Larry Glanz
How can GPPA be of help to you? **Page 1**

Make sure to get your NPI Page 1

Dr. Ed Zuckerman

Mentoring Forum: What you told us

Dr. Irv Guyette,
Page 2

Legislation

Dr. Freedman updates us on real progress

Page 3

A Get Together for Psychologists

Dr. Katie Hammond Holtz **Page 3**

Why Every Psychologist needs a website

Dr. Ed Zuckerman

The Spring CE News

There is much to choose from in a full calendar. Dr. Katie McCorkle. **Pages 5-6**

CE Calendar

Dr. Francine Fettman **Page 7**

Disgust: How Biology Becomes Biography

Dr. Charles Bonner explores the dynamics **Pages 8-9**

Our Sponsors

Pages 10-11

Please Save a Tree

You can receive the GPPA Report by e mail. See the back page for some of the advantages and how to set this up. **Page 12**

A View From the Chair

Larry Glanz, PhD
President of GPPA

GPPA is a great organization to be a part of.

It provides an opportunity to network, socialize, and compare notes with other psychologists.

We are one of seventeen regional associations in Pennsylvania, and we are very proud of our active membership and our programs. Our mission is to be of service to our members.

Recently I attended the networking/social event coordinated by Katie Hammond Holtz. While there, I asked one member, "How can GPPA be of help to you?" She was stunned, and replied that she had not expected the question. I asked her to think about it. I ask you to do likewise. Let me know how we can be of help.

This is your organization, and we really want it to reflect your needs and desires. Call me at any time. Larry Glanz. Call me at 412-400-8485, or e-mail me at glanzlaw@yahoo.com.

Get Your NPI Right NOW!

Ed Zuckerman, PhD
www.ThreeWishesPress.com

You, whom Managed Care changed from a healer or therapist into a generic "provider," and the HIPAA law turned into the even more anonymous "CE" (Covered Entity), can now become a unique ten-digit number. You will need this National Provider Identifier (NPI) in order to be paid by health insurance and perhaps for other purposes later. You have until May 22, 2007 to do it, there is no cost, and the numbers last for your lifetime. If you are not now and don't want to be a CE, ignore all this. If you want one for some purpose but are not a CE, you can get one without it making you a CE. Employers who are CEs can use their EINs (Employer Identification Numbers) (since July 30, 2004) but health care organizations will need to get NPIs as well as will the individuals involved in health care. Once you get your NPI you must furnish updates to its data within thirty days of any changes. Got all that?

Application for an NPIs can be made on paper and via the internet. It takes 15-30 minutes. The website is <<https://nppes.cms.hhs.gov>> and the phone is 1-800-465-3203. Mike Feely, the savvy therapist, and aficionado of bureaucracy suggested VNPIs (Vanity National

Provider Identifiers) for a small fee which could go to the National Coalition to fight HIPAA. Can someone look into this, please?

Before you start to apply, collect this information beyond what you have in your head already:

- a. **Mailing address.** This is to be a long term way to reach you so it is probably best to use your home address.
- c. **Practice Location** (Address). You can choose only one so select your main or primary practice location.
- d. **All the identification numbers you use to bill any kind of insurer: UPIN, Medicare, and Medicaid** numbers and the State you practice in for each.

You will be asked to select a code number for your "Taxonomy/Provider Type" which we usually call professional discipline. Probably "10 - Behavioral Health and Social Service Providers." The "Type" is the first two numbers, not the name.

The "Taxonomy selection" is what we would call a practice area or specialty. These will not be used to limit your practice but choose as many as you like. For each one chosen you must enter your license number and the state you are licensed in. These are likely to be modified later and you can change yours at any time so do not struggle with the categories.

Mentoring Forum: What You Told Us

Irv Guyett, Ph.D.
Chair, Mentoring Committee

Seeking support, guidance and information by the less experienced and its reciprocal, providing these resources for other psychologists is the essence of mentoring. GPPA sponsored these efforts in three ways at a recent, networking event.

“...so tell me Dr. Psychologist, where were you on the evening of March 23 between 6 and 8 PM?” If you were at Dr. Katie Hammond Holtz’s offices, you know you got to eat well, meet a lot of interesting colleagues (support), and learn (guidance) from Ed Zuckerman some powerful but simple strategies for creating your professional website-your “shingle” for the world to see and seek out your talents. Ed showed how, with today’s hosting sites’ tools, you can literally be up and running in a matter of minutes. With a few more minutes on these sites, you can create linking pages to add content to your welcoming page.

To provide information for the third aspect of GPPA’s mentoring efforts, a brief survey was created for the incoming networking throng. The survey had three sections: a) name, address and email, b) feedback as to how one heard about the event, and c) five items to be rated on a scale from 1-100 (“reflecting your strong interest in further get together and formation of groups”). There was also an open ended suggestion item. There were 32 Surveys turned in with some level of response on them. Most people entered their identifying information, though some were pretty illegible. That was fine because the real focus of the study was in what advertising method brought people in and how did they feel about future activities. The tables below disclose this provocative data.

Table 1 How did you find out about this event?

| Frequency |
|-------------------------|
| GPPA Report |
| Flyer in mail |
| Flyer on bulletin board |
| Friend |
| Other |

Table 2. Directions: “Would you take a moment to rate each of the following on a scale from 1 – 100 with 100 reflecting your strong interest in further get together and formation of groups.”

I would like to meet again for:

1. ___ Another networking group
2. ___ Innovative strategies for practice, careers, personal life
3. ___ Discussions around marketing to generate more clients
4. ___ Discussions about interesting cases
5. ___ Learning how to make a practice more fun and productive
6. ___ Other List and rate some things which would really interest you or not interest you

Table 3 Results

| Q | Sum | Frequency | Real Mean | Mean if n-32 |
|---|------|-----------|-----------|--------------|
| 1 | 1995 | 27 | 74 | 63 |
| 2 | 1185 | 17 | 69 | 37 |
| 3 | 925 | 14 | 66 | 29 |
| 4 | 1305 | 19 | 69 | 41 |
| 5 | 870 | 12 | 72.5 | 27 |
| 6 | 200 | 4 | 50 | 6.2 |

SUMMARY AND LIBERAL INTERPRETATIONS

Table 1 indicates by nearly a 38% margin that “friends” provided the best marketing channel to get people to this kind of networking event followed closely by the GPPA Report and Flyer in the Mail. Note that many a practice has been built by viral marketing.

While these “findings” may become a classic example to demonstrate sampling and interpretive errors in conducting survey research, a clinician might also be intrigued by the questions raised. For example, why was the return rate only 50%? Second, though a 1-100 rating scale was offered, 11 of the 27 responders

chose to use a check mark! These were quantitatively ambiguous and so were given a medium value of 50. The Sum was divided by the Frequency to give a “Real” Mean. However, if “not responding” reflected a view of disinterest, then the Sum should perhaps be divided by the 32 people who made any marks on the survey and so provides the number in the final column.

As with the Real Mean values, ANOTHER NETWORKING GROUP was somewhat more appealing but all the items listed appear to be above a medium value of say 50. However, when one considers that “not responding” may be a vote for disinterest. n=32 was used as the divisor. Even when n=32 was used, the ANOTHER NETWORKING GROUP “score” of 63 clearly shows that this group is high on Need Affiliation and partying for the future.

These sophisticated psychologists who spend much of their careers measuring other people were more responsive than the average person in completing the survey. Close to 25% completed the survey correctly out of the 65 attending the event versus the usual 3% return rate from mailed surveys. Although many of the people attending the event were psychologists from institutional settings, there was a clear interest among some in being more connected with colleagues around professional issues such as DEVELOPING INNOVATIVE

STRATEGIES, CASE DISCUSSIONS, and MARKETING.

The 20 plus people who sat in on Ed Zuckerman’s website marketing techniques sessions also attest to the fact that there was a low hum above the usual chatter at the event of people seriously interested in pursuing professional matters.

What you told us through the survey is that one good mentoring context for support, guidance and sharing information is network partying. This may be one of those findings that doesn’t need a lot of further research, though grants are still welcome.

Legislation in Progress

Arnold Freedman, Ph. D.
Chair, Legislative Committee

HEALTHCARE ISSUES-STATE

By the time you receive this *Report* we should be well underway with our bill to restrict outpatient authorizations. Data suggests that, for some policies in PA, **more than 50% of mental health premiums are spent on administration**, much of it caused by useless and wasteful authorizations.

Sam Knapp is spearheading a team of many volunteers, myself included, who are calling all members to contact their legislative representatives to ask them to cosponsor a bill to eliminate unnecessary authorizations. You should have been contacted by the time you read this. If further action is needed please help out if you are contacted. This will benefit our patients by putting their insurance dollars toward care rather than the administration of authorizations.

HEALTHCARE ISSUES- NATIONAL

Comprehensive nationwide mental health parity is closer to becoming a reality. Reps. Patrick Kennedy (D-Rhode Island) and Jim Ramstad (R- Minnesota) will be introducing a comprehensive mental health parity bill later this year. In the meantime Senators Ted Kennedy and Pete Domenici have been working on a Senate bill. The details have not been finalized, but it is likely that the bill will exempt small employers (50 or fewer employees). With that, and a few other concessions, business groups are beginning to back away from their opposition to the bill. Aetna insurance has endorsed the current Senate version of the bill.

Rep. Tim Murphy has been very consistent in his support for parity. In recent testimony in Congress he noted that treatment of depression increases productivity of workers, decreases absenteeism and saves the company about \$3 for every \$1 spent on care! Rep. Murphy is the co-chair of the Congressional Mental Health Caucus.

Meanwhile APA is working hard to restore the 9% cut in psychology payments under Medicare. This is important for psychologists who treat Medicare patients, but also for other psychologists as well because some state programs, like Workers Compensation or Auto insurance have their rates tied to Medicare. Also, some private insurers use Medicare as a benchmark for calculating their costs.

Finally, after years of very little progress, it appears that we are seeing significant change for the better as definite possibilities. We still will have to be vigilant and prepared to provide time and money to this advocacy. In spite of changes for the better at both the Federal and State level there will still be significant opposition to the measures we advocate.

Afreedman3@verizon.net
412-244-9866

Save These Dates

Please join us at the *Pennsylvania Psychological Association's Annual Conference*, June 27th through 30th in Harrisburg. The theme of the conference is ...

“Psychology and the Mind-Body Relationship”

Three reasons to attend PPA this year:

1. **Learn...** about the latest knowledge psychological science has to offer in the application of mind-body interactions in helping clients. In addition, see some of our own Pittsburgh psychologists present their knowledge and experience in mind body healing.
2. **Socialize...** with psychologists from all over the state. In addition, find out how state and regional representatives are working together to enhance the profession of psychology in Pennsylvania.
3. **Have Fun....** with fellow psychologists either informally or formally through scheduled social hours. New at PPA this year is the opportunity to exercise your mind-body health and wellness through a “Walk Around the River” event. Finally, learn about the hidden talents your colleagues possess through a celebrity

look-alike event and PPA Karaoke and Dance Party. We look forward to seeing you in Harrisburg!! For more information see the PPA website <http://www.papsy.org/>.

A Get-Together for Psychologists

Katie Hammond Holtz, Psy.D
Chair, Networking and Social Committee.

A Packed “House”

What a great turn out we had for the Psychology Get Together held at my office in Shadyside on March 23rd. We had almost 70 people RSVP formally, but more people than that attended, so we had an even, “more than fabulous” turn out. We even had someone crash the party from a related discipline who was seeking psychologists to refer to!

Everyone had a wonderful time. We traded business cards and shared pamphlets about what services we offer. We laughed and caught up with old friends. We made new friends. We put faces to names of colleagues we only previously knew of “on paper” or had only talked to on the phone. We put one another in touch with resources, for example new psychiatrists to refer to. We learned what each of us does, and when to refer to one another. Interns came to make connections for future employment. We enjoyed wonderful food. We enjoyed Ed Zuckerman’s presentation “Hanging Out Your Shingle In Cyberspace” twice, due to its popularity (see page 4 for the handout.) Most of all, we shared our true presence and where we are at this point in our careers.

I think we all came away with a great sense of the presence that each of us has, and what we have to offer our students, our clients, and one another. The gathering renewed me, and made me appreciate even more what it is like to be a part of such a great profession and organization. Thanks to all who attended. Thanks to all who completed Dr. Guyett's survey regarding future interests as well.

Why Every Psychologist Needs a Website

Ed Zuckerman, PhD.

edzucker@mac.com
www.ThreeWishesPress.com

Factoids: Eighty percent of new clients will look for a therapist on the internet. Even when given your name, ninety percent will look for information about you and your practice on the internet.

A simple page, a “web presence” can be set up in a few minutes for little or no cost without learning any new skills. A simple website, of five pages, can be set up in a few hours for a few dollars a month.

Opinion: A website can convey so much about you and your practice that it saves your and clients’ time, reduces non-shows and inappropriate referrals, educates patients for better work, and can demonstrate the superiority of psychologists over the competition. No matter what kind of services you offer, every psychologist can benefit from having a website. Oh, and it is creative and fun.

What to collect, write, borrow, and organize before you start creating your website

1. Basic information on you and your practice:

- Demographics: name, degrees, professional memberships, awards, certifications, credentials, etc.
- Contact info: Addresses of all offices, all phone numbers, emergency procedures.
- Map and directions to your office (Yahoo Maps, etc.)
- A photo or two of you and perhaps your office
- The logo for your practice an motto you use now. e.g. letterhead
- The domain name you would like to use and alternatives. Check at www.DirectNic.com

2. Descriptive content

- “Welcome to my Practice” message or

brochure

- Descriptions of your background, training, experience
- Descriptions of your practice in “plain English” and/or (preferably) the Problems you Treat with an Explanation of Your Approach
- Descriptions of your specialties with names of/URLs of websites related to your specializations

3. Structured content

- Forms, handouts, and information such as How to make an appointment
- Your HIPAA-required NPI
- A declaration of conformance to codes of ethics and links
- A list of your publications and presentations, preferably with links to the contents

4. Optional

- Professional areas in which you are an authority for public speaking or media contacts
- Links to professional organizations
- Links to news feeds (RSS) or sites with similar info
- Anything that makes you/your practice distinctive and memorable

5. Risk issues references

- Using email with clients - http://www.psych.org/psych_pract/clin_issues/cybermedfaq.cfm
- FAQ about medical practice websites - http://www.psych.org/psych_pract/clin_issues/medpracticewebfaq.cfm?pf=y
- Guidelines for Online Communications - http://www.medem.com/phy/phy_eriskguidelines.cfm

Free or “included” websites

Google.com

Google offers free hosting and design with Google Page Creator at <http://www.pages.google.com>. Page Creator has several advantages: you can see your site as you work on it (WYSIWYG) and when you finish it by “publishing” your site to the web it will automatically be searched by Google. They do not offer individual domain names so you cannot have your own address/URL like www.EdsTherapyShack.com. Gist: Excellent.

Microsoft

Microsoft offers free websites at OfficeLiveBasics (<http://officelive.microsoft.com/>) and they include a free domain name (worth about \$10 a year). Gist: There are better options unless you need the free size.

Sam’s Club

This division of Wal-Mart offers “Complimentary” sites at no extra charge to those who have paid the business membership fee of \$35 a year. Their “Business” level sites for \$60 a year are very complete with up to 56 pages and your own domain name/URL. Gist: Great for the “free” site; superb for the upgraded one.

Yahoo/GeoCities.com

Free “presences” on the web are available but are not much use for a practice as they have no mail or other neat features of a full site. Their WebHosting Starter at **\$127.52 for the first year** is most suitable for therapists. Gist: A good price for a very flexible site.

Your internet service provider

Most of the larger ISPs like Verizon, Comcast, and .Mac offer you a website included in your fees. These vary so I have not listed them here but they usually provide the core functions.

Hosts that are primarily for therapists

The APA’s Practice Organization

APA offers a simple website for **\$149/year with a regular price of \$199** which includes hosting and “support” but is available only to paid members of the Practice Organization (\$100/year plus APA regular membership cost). Your site can be six pages: a Home page, ones entitled Practice, Background, and Contact Information, and two more. You can choose one of three color schemes, add one photo, a resume, 1-5 forms, and 1-2 news feeds for popular psychology information from APA. These are about 5 “Articles from the APA HelpCenter” and about 7 “Psychology News” stories from the media. Since it does not include a domain name your URL will be <http://apapo.org/YourTherapyShack>. Negatives: basic and inflexible, very expensive. Pros: easy to create quickly,

sensitive to the issues of clinical practice. I cannot determine if it will show up in a search engine like Google or if it uses valuable keywords. Other professional organizations offer basic sites. The dues of the American Medical Association (\$420/year) include the ability to add "expanded information" to the basic online listing of all physicians.

Psychology Today

The magazine offers a national Directory easily searchable from their website: <therapists.psychologytoday.com>. The cost is **\$360/year** with no contracts and if you decline a subscription to the magazine, \$60 less. The format is not changeable and allows an introductory narrative you write about your approach, experience, or anything you want to say, and entries about your approach, modalities, specialties, languages, fees, insurance panels, a map, contact information, a photo, etc.

You will not have an URL but instead a page in their Directory which can be found using your Zip code, last name, or ten variables like the above. Similar but cheaper are NetworkTherapy.com, FindCounseling.com and Therapy-site.com.

These will build your site for you

WebPsytes.com

They offer rather plain site templates and charge \$260 to set up the site and \$180/year for hosting. Domain names are an additional \$20/year for a **total the first year of \$460**. Two unique features are the offer of setting up a site for a group practice and they encourage the posting of the HIPAA NPI form which is actually a legal requirement of any provider's site. They offer the usual email options and apparently 5 pages for individuals and eight for group.

Websitesandsoundbites.com

Carol Goldberg, PhD is a psychologist who does much in the media and designs websites for psychologists. Check out her site at: the above for 20 example sites, readings, and letters of reference.

www.therapistwebsites.com

Linda Chapman come highly recommended. A six page site is \$599 for

design services and then hosting for \$59/year and a domain name for \$10.

www.therapymatch.com

They will do a twelve page site for \$650 with a free logo, hosting, a domain name, a video of you, phone support, keywords, etc. for the first year. Afterward hosting is \$125/year and the the domain name rent is \$10.

All support is by phone and their description of their website development process is detailed and reassuring. They also have a Practitioner Directory which is simple but complete.

Some favorite hosts

www.DotEasy.com

A very complete package of hosting services for **\$25/year** includes a the usual and also private registration.

www.Netfirms.com

The Netfirms Plus hosting package is \$60/year but with a code is **\$10 for the first year**. Besides the core it offers a collection of images to use on your site, and software for blogging and posting a gallery of photos.

FasterMac

A favorite for price and resources, it is at <http://www.fastermac.net/domains/>. **Basic presence for less than \$12/year**. A higher speed account is \$90/year.

www.Homestead.com

Not as well known but an oldie (from 1997). Choose from 2000 templates and 250k pictures to go on them and then let them host and publish your site all for **\$60/year**.

www.DirectNic.com

An established host, it is probably best if you have multiple websites (I use it). If you register your domain name with them for \$15 a year you get 20 Megs of space to put up your website although an ad for DirectNic will show on the pages (\$15 more/year gets rid of these). **Total per year: \$60 with their website program, \$30 without**.

www.FatCow.com, www.1and1.com

and www.GoDaddy.com,

These are large hosting organizations and prices are pretty typical at around \$100-125/year with many features.

The Spring CE News

Spring Into New Life

Katie McCorkle, Ph.D.

Co-Chair, Continuing Education Committee

Last week, it was 70 degrees, and signs of new life were busting out all over! Today, there are six inches of fresh snow on the ground, and winter appears unwilling to let go of us. Despite that, new life continues to burst forth in the CE committee... and in me.

This will be my last newsletter article as CE Chair. I'm thrilled that Kit Gautier, Ph.D. will hold the vision for this committee after I move on to new pursuits in June. In case you don't know Kit, she is a kind and gentle human being who builds collaborations between people and ideas. Professionally, Kit is transitioning from a research career at WPIC to private practice. For the past two years, she has been a valued member of this committee, and she takes the helm at an exciting time, when the CE committee is embracing a new initiative to build stronger relationships between the academic community (including students) and private practitioners in the Pittsburgh region. I'm sure she will do a wonderful job! Kit and I will Co-chair the CE committee through our spring events.

- Ralph Tarter, Ph.D. will speak about his research at GPPA's Spring Meeting on April 24.
- On May 16-17, GPPA and the Chatham College Counseling Center are co-sponsoring a workshop on Relational-Cultural Therapy offered by Maureen Walker, Ph.D., of the Stone Center at Wellesley College.
- On May 19, we will again co-sponsor the annual Kay Thompson Symposium with the W. PA Society of Clinical Hypnosis'. This year, David Calof will speak on Practical Crisis Intervention. And if you prefer lunchtime networking for CE credits, be sure to check out the Second Wednesday series in the South Hills. More information about all of these events is available at www.gppaonline.org. Thank you for the opportunity to serve GPPA as CE Chair. This has been a rich

and rewarding experience for me. I especially cherish the people I've met, and the relationships which have developed. It has been a great bridge into a new phase of professional service.

You may know that I'm starting a multi-faceted, non-profit healing center for mind, body and spirit. **Balanced Heart Healing Center (BHHC)** is an intentional healing community founded to reconcile our faith with our practice, and to educate others how to do the same by living the 10 spiritual principles of Balance Point Therapy (BPT). BPT is a new spiritually-centered form of cognitive-behavioral therapy which I have developed in my own practice, and which I am now teaching to professionals and consumers alike. It is "*Waging Inner Peace to Birth Your Dreams*". As a healing center without walls, BHHC is taking a step towards universal mental health care (at no cost to the government or health insurance companies) by providing free services to the uninsured and others who are unable to pay for help.

If you wish to learn how you can participate in this effort from your own office, please let me know! You can reach me at drkatie@zoominternet.net or by phone at 724-776-5534. Financial contributions are welcomed as well (checks to: Balanced Heart Healing Center, 3145 Scenic Dr., Mars, PA 16046). If the website is completed by the time this is published, you can reach us online at www.balancedhearthc.org (or save that address for later). May you too birth new dreams into manifestation this spring! After all, isn't that what life's all about? :) Blessings of love and light,

Write for the Report

PLEASE share your inspirations, experiences, and projects. The deadline for the next issue is February 28, 2007. For more information or a "consultation" with the Editor, send an email to steven.feinstein@va.gov

Draw or Photograph for the Report

We would like to publish cartoons, photographs and any other materials that relate to psychology. PLEASE share your inspirations.

Correction

In the last GPPA Report, Dr. Sander Kornblith should have been listed as the first author of the Research Practice Forum article.

Effective Psychoanalytic Psychotherapy of Depression

Research participants needed to participate in a qualitative research study.

- I am seeking therapists and any of their interested colleagues who went to weekly or twice-weekly long-term psychoanalytic-psychodynamic psychotherapy for no less than one year for major depression, found therapy helpful, and have terminated from this treatment at least one year ago.
- The goal of this study is to describe typical features of the processes and outcome of effective psychoanalytic-psychodynamic treatment based on clients' descriptions of their experiences of their own personal psychotherapy.
- Participation consists of writing a short description regarding your experience of the facets of your psychotherapy that helped and its effects on your depression, and taking part in an audiotaped interview that expands on the written description. The interview may be transcribed.
- All data will be securely locked. Some data will be included in an appendix and excerpts may be used within the report. All identifying information you provide will be altered or deleted to protect your and other's anonymity. A consent form detailing confidentiality and your rights as a participant will be provided for you to sign.

If you have further questions or think you or someone you know might be interested, I am available to be contacted:

T. J. Smith, M.A. | C: 412.310.2565 | H: 412.922.7768 | smith721@duq.edu

This study is being conducted in partial fulfillment of the requirements for a Ph.D. in clinical psychology at Duquesne University and has been approved by the University Institutional Review Board for the Protection of Human Subjects.

Continuing Education Calendar of Events

Francine Fettman, Ph.D.

APRIL

Tuesday-Wednesday April 17-18

Attachment Disorders.

Janis A. Diacco, Ph.D. Holiday Inn, North Hills, 4859 McKnight Road, Pittsburgh, PA 15237, 412-366-5200, 7:30-3:30. CE Credits:12. Fee: \$315. For more information, contact :800-726-3888 or www.cmieducation.com

Friday-Saturday, April 20-21

Interpersonal and Social Rhythm Therapy for Bipolar Disorders.

Ellen Frank, Ph.D. Thomas E Starzl Biomedical Tower, Room S120, University of Pittsburgh, Pittsburgh, PA., 8-5. CE Credits: 13. Fee: \$350 (must be in by 4/16/07). For more information, contact: 412-802-6905, BrianKL@upmc.edu or www.wpic.edu.oerp, Attn. Kyessa Brian.

Monday, April 23

Transforming The Difficult Child.

Howard Glasser. Holiday Inn Central/Greentree, 401 Holiday Drive, Pittsburgh, PA 15220, 412-922-8100, 7:30-4:30. CE Credits: APA accredited, but no number listed. Fee: \$109 early bird (by 4/10) by internet; \$119 "standard" by 4/10. Add \$10 after 4/10. For more information: www.ceuregistration.com; or mail to Amedco, PO Box 14473, Santa Rosa, CA, 94502.

Tuesday, April 24

Drug Addiction: From Individual Differences to Different Individuals

Ralph Tarter, Ph.D. will speak about his research at **GPPA's Spring Meeting.** 5:30-9:00. CE Credits: 1. Fee: \$25 for Members,\$35 for non-members, both including dinner. The lecture alone, \$10. Duquesne University Student Union, Room 613. Payments to Sharon Bernstein, PhD, 321 S. Lang Ave, Pittsburgh, PA 15208-2749 by April 16. For more information: Sharon321slang@Verizon.net or 412-371-7327

Friday, April 27

Bipolar Spectrum Illnesses: Keys to Recognitions and Best practices.

Brian Quinn, LCSW, Ph.D. Sheraton Hotel Station Square, 300 W. Station Square Drive Pittsburgh, PA. 15219, 8-4. CE Credits: 6. Fee:\$169 by 4/13, \$179 after. For information: 800-843-7763 or infor@pesi.com. Register online, save \$5, Code WEBFV – www.pesi.com

Saturday, April 28

Pittsburgh Jung Society: Sabina Spielrein, Pioneer in Psychoanalysis.

Paul Pitts, PhD. 9:30-1:00 For Inquiries: 412-682-8172, x3 or <http://www.pghjung.org>

MAY

Thursday, May 3

Services For Teens At Risk Conference, STAR Center, William Pitt Student Union, 3959 Fifth Avenue, Pittsburgh, PA 15260. Various topics. For more information or to download registration: <http://www.wpic.pitt.edu/research/star/> or 412-687-2495.

Friday, May 4

Suicide and Self Mutilation.

Pam Marcus, RN, APRN/PMH-BC. Sheraton Hotel Station 300 W Station Square Dr. Pittsburgh. PA 15219, 412-261-2000, 7:30-4. CE Credits: 6. Fee: \$169 until 4/13, \$179 after. Save \$5 by registering on line: Code WEBFV, www.pesi.com For more information: 800-843-7763 or info@pesi.com

UPMC/WPIC Training Seminars

For information: <http://www.wpic.pitt.edu/oerp>

Friday May 4, 2007

Creative Problem Solving, 9-12, UPMC Quantum Building, Classroom 151, 2 Hot Metal Street, Pittsburgh. Pa. CE Credits: 3 Fee: \$40.

Wednesday, May 9

Practical Crisis Intervention: Using Rapport Building and Hypnosis With Complex Clients in Crisis.

David L. Calof, DAPA. Ninth Annual Memorial Symposium, Legacy of Kay F. Thompson. Martin Conference Room, University of Pittsburgh, Sennett Square, 217 South Bouquet Street, Pittsburgh, PA., 8-5:15. CE Credits: 6. Fee: Members of sponsoring organizations

\$90; non-members \$100; \$10 CEU fee.

For more information: Dr. Sorkin,

412-344-5941 or

wpahypnosis@verizon.net

Thursday, May 10

The Difficult Divorce. (Course Code: BB07)

Gerry Rack-Wildner, Ph.D. Comfort Inn Hotel, Penn Hills, PA, 9-3:30. CE Credits: 5. Fee: \$80. For more information: Tewana Dennard, 412-802-6908 or dennardj@upmc.edu

Thursday and Friday May 10-11, 2007

Motivational Interviewing For Behavior change. 9-5, Assembly Room, UPMC Passavant, 9100 Babcock Blvd.

Pittsburgh. PA 15237, 9-5. CE Credits: 6. Fee:\$150. For more information: 412-802-6910 or mundyni@upmc.edu

Friday, May 11

Mindful Meditation.

Steven Alper, LCSW. Sheraton Hotel Station Square, 300 W Station Square Dr., Pittsburgh, PA 15219, 412-261-2000, 7:30-4. CE Credits: 6. Fee; \$169 by 4/14/07, \$179 after. For information 800-843-7763 or www.pesi.com

Wednesday, May 16

Childhood Bipolar Disorder: An Emerging Trend.

Jonathan Gransee, Psy.D. Holiday Inn Pittsburgh Central/ Greentree, 401 Holiday Drive, Pittsburgh. PA 15220, 412-922-8100, 7:30-3:45. CE Credits: 6. Fee: \$195 before 5/6/07, \$225 after. For more information: 715-836-9900 or www.meds-pdn.com

Wednesday & Thursday, May 16-17

Relational-Cultural Theory: Applications for Change Through Leadership Connections.

Maureen Walker, Ph.D., of the Stone Center at Wellesley College. GPPA and the Chatham College Counseling Center. Cosponsored by GPPA and Chatham College. CE Credits: 6. Fee: \$120 For more information: Elsa Arcee, PhD (412) 365-1282.

Disgust: How Biology Becomes Biography

Charles Bonner, Ph.D.

Disgust is a powerful and hard-wired affect that has been obscured by clinicians' and researchers' focus on the more obvious affects of anxiety, sadness, anger, and shame. Omaha (2004) makes a very strong case for establishing disgust as one of the lynchpins in the development of specific psychopathological structures (e.g. eating disorders)—particularly given its prominent role in affective transactions between caregivers and their children.

Most of us are familiar with the basic experience of disgust, such as when we feel disgusted by something we smell, taste, see, or touch. Think of when you find piece of hair in your food or mouth and you think it came from someone else. The disgust reaction is often immediate and visceral—you spit it out, your face and mouth take on a disgusted expression, you feel nauseous, and you might even consider the rest of the food to have been contaminated and throw it away. In evolutionary terms, the disgust affect has served a survival function insofar as it forces us to spit out food or substances that could be harmful. Rozin (2000) has conducted substantial research into the cultural psychology of food and disgust, and has more recently extended this research into the domain of ethno-political conflict, prejudice, and religious intolerance.

The primitive neurological aspect of disgust is highlighted by Omaha (2004) when he notes how the “neural mechanisms for disgust affect appear to reside in the insula, a deep and substantial portion of the cerebral cortex that is anatomically distinct from the amygdala [which regulates fear]” (p. 64). Further, Omaha (2004) cites Izard's (1991) discussion of how “... the brainstem mediates the disgust response, and that functional cerebral hemispheres are not necessary to its elicitation” (p. 63) The disgust response is therefore rapid, virtually instantaneous, and is not mediated by cognitive appraisals. It often involves activation of various parts of the

digestive tract, from the stomach up through the esophagus, mouth, tongue, and salivary glands.

What happens when the disgust affect is transferred to the interpersonal domain and people express disgust with one another or toward specific groups? We hear people say such things as “I'm disgusted by him!”, “She disgusts me!”, “You disgust me!” and “Those people are disgusting!” Or, people may speak in a clearly disgusted tone to each other, hurling such common insults as “I can't believe you did that, you're so stupid!”

What about when a parent expresses disgust toward a child? The parent's face, vocal tone and volume, and word choice may all express disgust. The facial expression in disgust is one of the more automatic and visible aspects of its interpersonal expression. Omaha (2004) describes how “the index facial expression of disgust brings the brows together and down with a wrinkled nose; the upper lip is pulled up, the lower lip down; the tongue is pushed forward” (p. 64). What is the emotional impact of a child's repeatedly being on the receiving end of a caregiver's disgusted face, voice, and words?

Drawing on the work of Nathanson (1992), Omaha uses the phrase “broadcast disgust” to describe the caregiver's expression of disgust toward a child. Nathanson's work clarifies the specific components of affective transactions between people, not just for disgust but for all emotions. The caregiver's disgusted facial expressions and words are broadcast to the child, whose brain automatically encodes the broadcast disgust in memory. The child will himself subsequently feel disgusted when he mimics the caregiver's facial expression or recalls his caregiver's disgusted face, voice, and words.

Where is the child to direct the disgust that now can be so easily autostimulated? The child can express disgust at others, such as caregivers, siblings, and peers. This option is likely to be limited by the punitive responses of others to the child's expressions of disgust. Of course, these punitive and perhaps disgusted responses themselves will often serve to reinforce

the association of disgust with the child's self-image and self-appraisals.

Basically, there are two intertwined paths for the child's metabolizing of broadcast disgust—inner images of others and self, with both poles becoming the basis for the child's “internal working models” (also referred to as ICM's, conceptually similar to the “core schema” in C.B.T. theory). Omaha (2004) notes how “just as affects can assemble with representations of others, so they can assemble with the internal image of the self” (p. 45). Internally, the child is stuck with a representation of the caregiver that is assembled with disgust, and this complicates the child's ability to separate from the caregiver since “... a portion of the self-representation remains undifferentiated from the object representation, and an unresolved, disgust based self- and object- representation persists” (Omaha, 2004, p. 129). Further, the child lacks a dependably soothing internal image of the caregiver upon which to draw in times of duress, and the child is all the more stuck with a self-image developed in the shadows of broadcast disgust.

Understandably, a disgust driven self-image has dramatic consequences for future problems with self-esteem and depression. For example, Omaha (2004) describes how “... negative self-reflective cognitions about the self—i.e. statements of impaired self-worth such as “I am flawed”, “I am a failure”, and “I am unworthy”—are driven by affects, in particular disgust affect, directed at the self” (p. 16) Further, Omaha (2004) postulates how the person “... who verbalizes “I hate myself” is in part motivated by disgust affect, since hatred is a secondary affect compounded from anger and disgust” (p. 63) The blending of anger and disgust to constitute hatred has been reviewed in the work of Plutchik (1993) and LeDoux (1996), and suggests that the caregiver who broadcasts disgust is often also conveying hatred insofar as anger almost invariably accompanies these affective transactions.

Not surprisingly, excessive shame is often also evoked in the child by troubled caregivers' expressions of disgust. If a child's personality and affect regulation

system is structured primarily around affects such as shame and disgust, then other more positive, life affirming affects are bound to be marginalized. Among these vitality affects are yearning, interest-excitement, and enjoyment-joy. These affects will be the focus of an article in the next *GPPA Report*.

This article is an excerpt from Dr. Bonner's forthcoming 2nd edition of *Emotion Regulation, Interpersonal Effectiveness, and Distress Tolerance Skills For Adolescents: A Treatment Manual*. This manual will be published later this year by STAR -Center of WPIC. On May 3, 2007 Dr. Bonner will be presenting a Pittsburgh workshop on this material at the 21st Annual STAR-Center conference (see Continuing Education section for registration information)

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