San Gabriel Valley Psychological Association

Analyze This!

Named by CPA Outstanding Newsletter

The Official Newsletter of the San Gabriel Valley Psychological Association

SGVPA.org AN OFFICIAL CHAPTER OF THE CALIFORNIA PSYCHOLOGICAL ASSOCIATION September/October2021

Upcoming Presentations and Events

SGVPA Practicum/Dissertation Forum

September 2021
Students are invited to attend an in-person forum to get support on practicum and dissertation concerns, and answers to questions.
Recently graduated psychologists and more seasoned licensed psychologists will describe their experiences and provide tips for navigating obstacles.
Date and Venue to be announced.

SGVPA Substance Abuse Across Cultures Conference

October 2021
All members and non-member professionals are invited to attend this **6 CE** Zoom conference held over 2 days to comprehensively explore the current world of substance abuse and treatment
Topics to be discussed include diagnosis, neurobiology, forensic issues and cultural considerations.
Date to be announced.

SGVPA Inaugural Diversity Conference

November 2021
All members and non-member professionals are invited to attend an all day, in-person event for **6 CE's.**
Extending our Embracing Diversity Series discussions on BLM, White Allyship, LGBTQ+ issues, Covid's Impact on theAsian American Community, Latinx Mental Health, and Native American and Indigenous Mental Health.
This will be an all day event, offering continental breakfast and lunch, as well as networking opportunities!
Date and Venue to be announced.

Meet the President!

On-going
President Wayne Kao, PsyD will continue to organize informal coffee get-togethers to meet or reconnect with our wonderful membership.
All are welcome!
Watch the Listserv posts for announcements of times and places.

Diversity Forums

September 10 and 24 from 12-1 pm, and
October 8 and 22 from 12-1 pm, all via Zoom.
Interested? Please contact the president at,
dr.waynekao@gmail.com
for more information.

SGVPA supports Black Lives Matter and systemic social justice reform. We are making efforts to increase diversity representation in our organization, in our profession, and nationwide.

PRESIDENT'S MESSAGE

One Love, one Heart…. Let's get together and feel all right!

—-Bob Marley

As we continue our journey through this unique time of health precautions, I struggle with balancing my responsibilities to myself, and my responsibilities to the communities that I belong to. What makes *me* happy and healthy may not always coincide with the health and well-being of my communities.

Our battle with COVID-19 continues, and many wonder whether or not to get vaccinated, or to wear a mask. I find myself constantly faced with my own desire (not wanting to wear my mask, since I'm vaccinated), versus the possibility I may still transmit the virus, even though I have no symptoms. I think of my loved ones, who I must make sure do not get sick because of me. I also have to worry about the health and well-being of the staff and residents at the skilled nursing facilities where I work, and who have already gone through multiple outbreaks prior everyone getting vaccinated. I also have to think about my own staff and practicum students, who would have to stay home from work if I were to contract the virus despite being vaccinated, as they cannot be on site if I'm not.

There are so many times I want to throw caution to the wind—to throw my mask aside, or plunge into a crowded casino and have fun! However in actuality, I admit I still do proceed with a great deal of caution. I'm afraid that this caution and anxiety will continue to persist long past the peak of the current pandemic. This doesn't mean that I'm not meeting up with my family, friends, and colleagues. I'm even attending a wedding in September! I've also been enjoying the occasional dinners with friends and colleagues that I've not seen for so long. Nevertheless, in the back of my mind I am always thinking of their health and safety, and how I can ensure their, and my own, wellness.

Meanwhile, in SGVPA's continuing education program, we will go on delving into the struggle of diverse individuals in community. We are excitedly planning a *Substance Abuse Across Cultures* event in October (date pending CE approval). This workshop will dive comprehensively into the wide spectrum of aspects of treating Substance Abuse. When this event is approved, you will be able to obtain up to 6 CEs by attending some or all of it! In order to guard everyone's safety, this event will be offered live on Zoom

Our first *Diversity Conference* will be held in November for another 6 hours of CE training. The program will reflect all the hard work that we've put in all year, expanding our association, and making it into a truly inclusive community. We will reflect on the amazing work we've done, as well as the work we have yet to accomplish. ***This will be our first in-person event since the lock down,*** and we will be able to catch up with each other, and hopefully return to some sense of normalcy. Breakfast and lunch will also be provided. It will be good to see you all—Even if we're all in our masks!

This year has taught me how much I need to look out for myself, ensuring my own safety and well-being, as well as the fact of my responsibility for the well-being and safety of others—balancing the greater good with my own wishes and desires for health and freedom.

Respectfully,

Wayne Kao, PsyD
President

Diversity Committee Meetings

If you are interested in being involved in our Diversity Committee where you can stay informed on the activities and events that are being planned in SGVPA as well as stay up to date on resources available to our larger community, please contact Diversity Chair Amee Velasco at ameevelasco@gmail.com for more information.

The Blankets We Weave: Integrating Diversity as a Clinical Issue

By Amee Velasco
Diversity Chair

Drew (not their real name) gazed anxiously into their computer screen and into my home office: "I talked to my doctor today about starting t-blockers." T-blockers, or testosterone blockers, are forms of medication meant to reduce natural testosterone in trans-feminine and nonbinary people. Drew came to me for therapy filled with a deep, palpable anxiety that they coped with through chronic drug abuse. At the time, they identified as a gay cisgendered male and told me that their Taiwanese family was very supportive of them coming out. It became apparent over time that Drew, in fact, identified as gender-fluid and always had.

This was not the first time Drew and I had explored medical treatment while processing their gender identity. They came to therapy with multiple concerns, but insisted that they never experienced any significant issues regarding their sexual orientation or gender identity. Besides, first thing's first: avoiding any more DUIs was one of their priorities in therapy. So after being able to abstain from drug use for over a year, Drew became confused as to why their addiction for substances transferred over to overspending: "I thought we had already addressed my addiction." As we continued to slowly unpeel the layers of self-destructive coping habits that Drew had developed over the years, we realized that their fear of coming out as gender-fluid to family, friends and people at work contributed greatly to their low self-worth and existential anxiety.

Clients oftentimes share with me metaphors of their internal world—a ball of tangled up string, or a ship with missing planks. There is a sense of feeling fragmented, disorganized or disconnected from different parts of oneself. It's not uncommon for me to receive phone calls from potential clients saying, "My last therapist was great… but they didn't really know how to talk to me about (insert culture here)." Drew was no exception. In fact, their psychiatric history consisted of brief attempts at taking psychotropic medication, and participating in therapy, only to feel disconnected from the therapist and the therapeutic process.

The prevailing attitude toward diversity studies within the field of psychology tends to be that of an afterthought, like the way blanket weavers add embellishments—sequins, beads, and the like. These small additions are usually welcome and those who appreciate them agree that they elevate the piece. However, topics of diversity—ethnicity, race, sexual orientation, gender identity, religion, etc., are bundles of fibers included *within* the weave, intersecting with other clinical issues such as diagnosing mental disorders, addressing defenses, building the therapeutic alliance, and addressing transference/countertransference experiences. For example, reflecting on one's flexibility with boundaries may be required while working with different cultural communities. In many clinics that primarily serve a non-dominant culture, it's been my experience to see clinicians provide therapy services to other staff members as long as it doesn't compromise confidentiality, a practice I have not experienced at conventionally western clinics.

More than that, interlocking fibers can also reflect intersecting identities. Drew came into therapy as a 1st generation adult child from a middle class Taiwanese family. While their family seemed a bit more acculturated to American culture, it became apparent that they continued to hold more traditional values regarding the role of men and women, and Drew worried their parents wouldn't accept their gender-fluid identity. In contrast, an immigrant client of mine from a wealthy Filipino family embraces the LGBTQ+ community, even though she describes herself as a generally more conservative person. It helps when a therapist understands that the history of the LGBTQ+ community will vary, even between Asian groups, which can be further broken down between religious identities, immigration status, levels of acculturation, socioeconomic status, and the like.

To add to the complexity of cultural diversity, the ways in which we interact with our clients can absolutely be informed not just by their culture, but by our own. As Drew and I unpacked their fears and anxieties relating to coming out, I found that being genuine about my position as a heterosexual cisgendered woman helped to nurture Drew's trust of me and of the therapy process.

By not integrating diversity into one's practice as a genuine and complex clinical issue, we run the risk of maintaining that sense of fragmentation with which a client may have entered therapy. One can certainly have a blanket without the added bells and whistles, but a blanket with missing fibers is incomplete and can be ineffective at best, harmful at its worst.

After a few more months of processing their fears and anxieties about coming out, Drew looked once more into their computer screen, this time with a sense of anticipation and pride. They had set an appointment to see a psychiatrist; they wanted to try medication again. And for the first time ever, they had begun to attend a process group for LGBTQ+ identifying folks. We acknowledged that they still had a long road ahead of them, but we also agreed that addressing their gender identity opened up more avenues for growth and ultimately helped to deepen their process of healing.

Dr. Amee Velasco can be reached at ameevelasco@gmail.com.

Poetry to Ponder

In her 56 years on this earth, Emily Dickenson wrote about 1800 poems, only a dozen of which were published in her lifetime. Famous for her use of the dash, Dickenson tended to write poems that evoked rather than explained, that revealed through hiding. The dash is a kind of lift-off into the imagination of the reader, where meaning would continue and evolve. This poem is a bit of an exception, as it explains Dickenson's very strategy of evocation and pulling back.

I present this poem in memory of the famous psychoanalyst Phillip Bromberg, who died last year and loved Dickenson's work. Bromberg celebrated uncertainty and surprise in his work with patients, virtues celebrated in this poem. *Tell the truth but tell it slant* might well be a mantra for our profession. (This poem was quoted by well-known relational psychoanalyst Tony Bass in a recent email invitation to a webinar in Bromberg's honor.)

Tell all the truth but tell it slant

By Emily Dickinson
(1830 - 1886)

Tell all the truth but tell it slant —
Success in Circuit lies
Too bright for our infirm Delight
The Truth's superb surprise
As Lightning to the Children eased
With explanation kind
The Truth must dazzle gradually
Or every man be blind —

—-Submitted by Daniel Goldin, PsyD

Movie Notes:
The Father
A Trip Down the Road of Dementia

By Suzanne Lake, PsyD
Past President

Many films have been made in recent years exploring the emotional topography of dementia, including L'Amour, Still Alice, Away From Her, and others…. Each one narrates the terrible effects of dementia on the lives of everyone involved. In the first of these, a devoted husband is driven to despair—and mercy-killing—as he witnesses his wife's deterioration into mute, staring passivity. Another describes the agonizing path of a college professor, who finally achieves acceptance before descending into the complete befuddlement of her dementia. A third chronicles the anguish of a caregiver husband as his wife's treatment plan at a memory facility blocks him access, until she has completely forgotten him.

Yet to my knowledge, no film before The Father has ever so vividly conveyed the story of dementia *from the sufferer's point of view*: the disjointed sense of time and space, the incoherent developments as people come and go, the distorted perceptions, the awareness of one's own sense of things being at odds with everyone else's, and the struggle to retain some dignity, and a sense of coherence, through the long descent into final unknowing.

The story centers on Anthony, a retired engineer who is in the middle stages of Alzheimer's Disease. From the usual lists in clinical literature, we know what this involves: memory impairment, lack of focus, difficulty making decisions, impaired judgment, delusions and hallucinations, mood swings, agnosia, and confusion of time, place, and purpose. Yet as grim as such a list may be in it's prosaic form, it does not begin to match the agony of living out the symptoms in real life. In fact, the epic level of suffering along the way is underlined by the tormented operatic arias that make up the soundtrack for the story.

In the opening scenes, we see Anthony puttering aimlessly in his London flat while listening to classical music, as his daughter, Ann, hurries along the street to see him. Once there, she chides him for driving the latest caregiver away, by accusing her of stealing his watch, and threatening to assault her. How can he continue living alone, she asks, if he is constantly tormenting the caregivers into leaving? Meanwhile Anthony, hiding the fact he has no memory of any such confrontation, readily agrees the aid must have stolen his watch, because it's nowhere to be found. We'll see that throughout the narrative, Anthony recurrently loses his watch, and is obsessed with finding it—a cruel symbol of his frenzied effort to recover his lost cognitive faculties.

Ann and her father are locked in a seemingly endless negotiation about how much care he needs, wants, or will tolerate, to continue living alone. Unfortunately, since Ann is the bearer of the "bad news," and tries to help Anthony with the inevitable losses ahead, he ferociously demeans and devalues her as a result. To him, Ann is as much his "enemy" as she is his solace. For her part, Ann is achingly patient and compassionate with her father—notwithstanding occasional bouts of exasperation. Yet her devoted kindness in the face of Anthony's endless confusion and questions, and his rebuffs, adds another level of pathos to the story. Meanwhile, it's her husband, Paul, who embodies the frustration, desperation, and rage that she herself so persistently avoids feeling— who once even smacks Anthony across the face (or did Anthony imagine it?).

Indeed, Anthony discovers little by little that his memory has turned traitor—he finds unfamiliar people in his flat insisting they are his relatives; encounters a woman who insists she is Ann, despite his perception of her someone he's never seen before; remembers a conversation which the other claims never took place; reliving the same day again and again in different locations. Anthony's blank, uncomprehending face conveys both his confusion, and a gradual succumbing to the derangement overtaking him. Still, he fights to keep his dignity, insisting on his version of events—even though no one else corroborates it. He is *not* crazy, and he is *not leaving his flat!*

Inevitably though, he wakes up one morning in an institutional bedroom. He has no memory of being taken there, and does not recognize the staff—despite their assurances that they've been taking care of him for many weeks. He begs to see his daughter, but is told she has moved to Paris. Frustration and bafflement build, until finally, in a heartbreaking collapse of all his defenses, Anthony dissolves into childish tears, crying pitifully, " I want my mommy! I want to go home!"

As a viewer, so seamlessly drawn into Anthony's world, I'm moved to both pity and horror. I begin as never before to appreciate my taken-for-granted, normal consciousness, in contrast to a kaleidoscopic apprehension of reality for which no coherent narrative can be found. Anthony can't explain what he's perceiving, or why it doesn't make sense to him, and so is dreadfully alone as he tries to dig out of the hole that is swallowing him alive.

Dr. Suzanne Lake can be reached at drsuzannelake@aim.com.

ADVERTISEMENTS

Office Space

Office Space available to share in Dr. Beebee's gorgeous Victorian psychotherapy office building. 1-4 days available, roughly $235 per day. Hourly rental available. Contact: dralexbeebee@gmail.com 626-577-1305x1

COME ADVERTISE WITH US!

Members and others are encouraged to take advantage of the opportunity to advertise to nearly 200 SGVPA folks!

Members receive 1 complimentary basic classified ad in the newsletter per calendar year!

Advertising Rates for our Bi-monthly Newsletter

	1 Edition	3 Editions (Half year)	6 Editions (Full year)
Quarter-Page or Copy of Business Card	$30	$75	$150
Half-Page ad	$60	$150	$300
Whole-Page ad	$100	$250	$500
Insert	$120	$300	$600

Classified Ads are $.50 per word

Be sure to include your license number. Ads should be emailed to Mary Hannon at maryhannon123@gmail.com. Payment must be made *before* publication and mailed to: Mary Hannon, 1122 Avon Pl., South Pasadena, CA 91030, phone (626) 354-0786.

Enrico Gnaulati Ph.D.

psychoeducational testing services

- ☑ Cognitive, academic, and psychosocial assessments (learning disorders, ADHD, autistic spectrum)
- ☑ Accommodations and modifications (SAT accommodations, curriculum modifications, 504 plans)
- ☑ Learning style evaluations
- ☑ Family-school liaison services
- ☑ Developmental/humanistic perspective
- ☑ In-depth parenting consultation on test results
- ☑ Identifying study conditions/teaching style/tutoring approach to optimize learning
- ☑ Identifying cognitive/academic strengths/weaknesses for optimal curriculum choices

200 E. Del Mar Blvd.
Suite 206
Pasadena, CA 91105

626.584.9968
dr.gnaulati.net

San Gabriel Valley Psychological Association

c/o Suzanne Lake, PsyD, Editor
2810 E. Del Mar Blvd., Suite 10A
Pasadena CA 91107

Upcoming Presentations and Events

SGVPA Practicum/Dissertation Forum
September 2021
Students are invited to attend an in-person forum to get support on
practicum and dissertation concerns, and answers to questions.
Recently graduated psychologists and more seasoned licensed psychologists
will describe their experiences and provide tips for navigating obstacles.
Date and Venue to be announced.

SGVPA Substance Abuse Across Cultures Conference
October 2021
All members and non-member professionals
are invited to attend this **6 CE** Zoom conference
held over 2 days
to comprehensively explore the current world of
substance abuse and treatment
Topics to be discussed include
diagnosis, neurobiology, forensic issues
and cultural considerations.
Date to be announced.

SGVPA Inaugural Diversity Conference
November 2021
All members and non-member professionals
are invited to attend an all day, in-person event for **6 CE's.**
Extending our Embracing Diversity Series discussions on BLM, White Allyship,
LGBTQ+ issues, Covid's Impact on theAsian American Community,
Latinx Mental Health, and Native American and Indigenous Mental Health.
This will be an all day event, offering continental breakfast and lunch,
as well as networking opportunities!
Date and Venue to be announced.

Meet the President!
On-going
President Wayne Kao, PsyD will continue to organize
informal coffee get-togethers to meet or reconnect with our wonderful membership.
All are welcome!
Watch the Listserv posts for announcements of times and places.

Diversity Forums
September 10 and 24 from 12-1 pm, and
October 8 and 22 from 12-1 pm, all via Zoom.
Interested? Please contact the president at,
dr.waynekao@gmail.com
for more information.