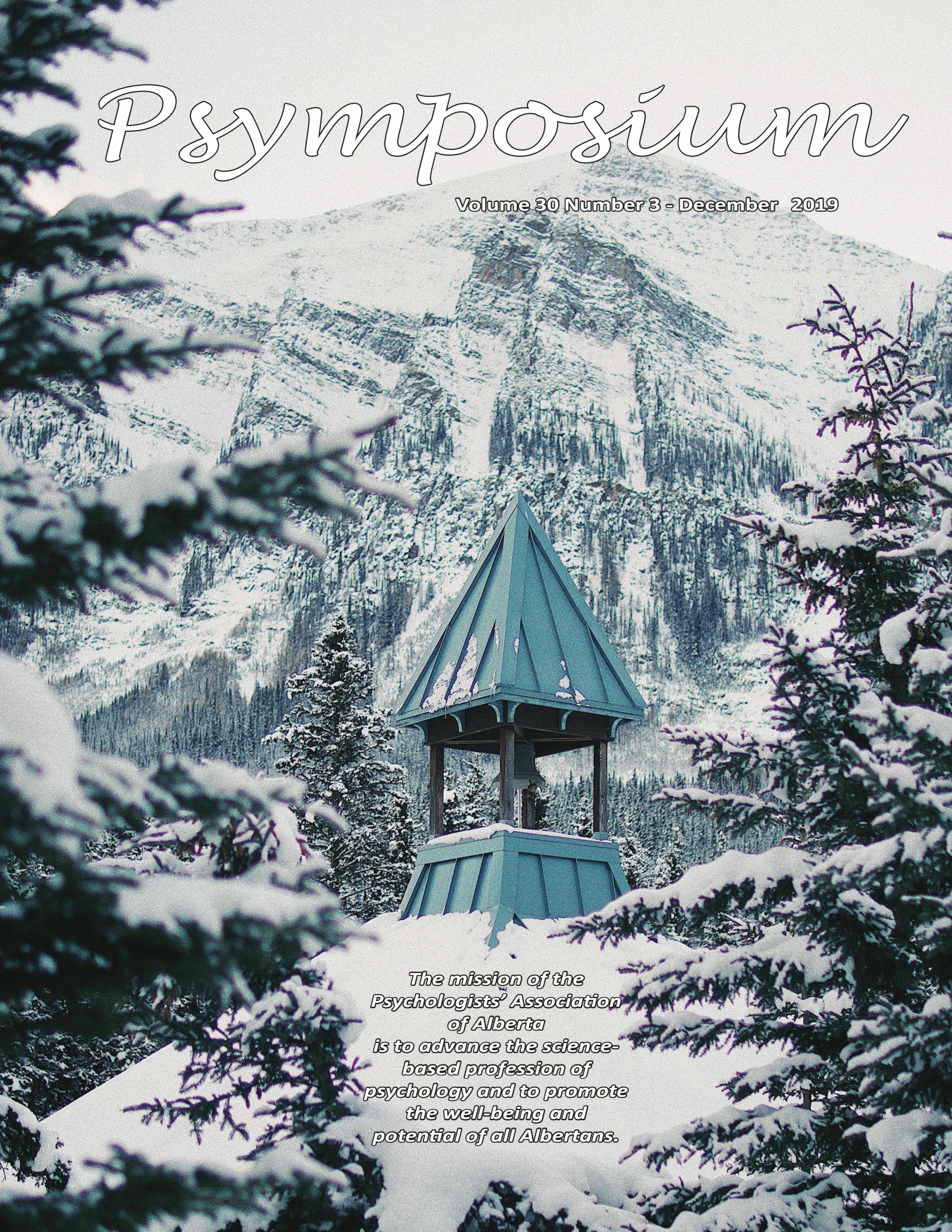
Psymposium

Volume 30 Number 3 - December 2019



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Our Mission

To advance the science-based profession of psychology and to promote the well-being and potential of all Albertans.

Our Vision

PAA & its members are recognized leaders in enhancing the psychological health of all Albertans.

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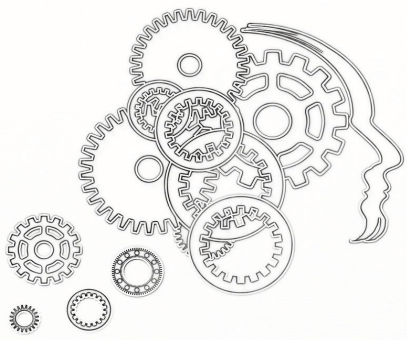
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PAA Psymposium is published three times a year (April, August and December) for the purpose of fostering communication amongst psychologists and supporting the goals of the Association and the profession of psychology. The newsletter is available to all members of the PAA on our website or by subscription, as well as to public subscribers and selected individuals and organizations with interests in the practice of psychology.

Subscription is $25.00 per year (4 issues in 2019).

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Psymposium is submitted to PsycEXTRA, a database set up by the American Psychological Association, which contains newsletters, policy papers, white papers, fact sheets, reports, magazines. PsycEXTRA is a companion to the American Psychological Association's scholarly database PsycINFO.



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Front Cover: Alberta

Contents

4 Board Notes
5 Why Nominate
6 Editor's Letter
8 Advocacy Corner
10 Notes from the CEO's Desk
12 Ethics – The Impossible Imperative
13 Student's Corner
15 Continuing Professional Development
16 Getting Schooled
18 Innovative Practices in Psychology
20 What We Do...
21 The Supervision Column
22 2019 Science Fairs
26 Welcome to PAA's New Members!

by Nicki Wilson, R.Psych

PAA Board President



Strategic planning is important to an organization, because it provides clarity, direction and focus. It is a tool that is useful for guiding day-to-day decisions and for evaluating progress and changing approaches when moving forward. The process of strategic planning can be as important and valuable to an organization as the outcomes.

Benefits of a strategic plan include the following:

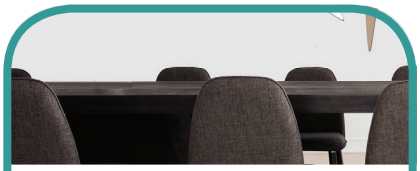
• It allows organizations to look to their future and to prepare accordingly. Through strategic planning, organizations can anticipate unfavorable scenarios before they happen and take necessary precautions to avoid them. With a strong strategic plan, organizations can be proactive rather than merely reacting to situations as they arise.

• It helps to define the direction in which an organization wishes to go, and it aids in establishing realistic objectives and goals that are in line with the vision and mission.

• It helps align the organization's functional activities to achieve its goals. It guides discussions and decision making in determining resource and budget requirements to accomplish objectives thus increasing operational efficiency.

• It helps an organization with sustainability in a complex market. Organizations that lack a strong foundation, focus, and foresight will have difficulty sustaining itself in the long run.

Strategic planning starts with acknowledging an organization's mission and vision statements. A mission is important to an organization, because it synthesizes and distills the overarching idea linking its practical strategies, enabling staff and board members to align the specifics of their actions and decisions with a clearly defined direction. A vision statement is an aspirational description of what an organization would like to achieve or accomplish in the mid-term or long-term future. It is intended to serve as a clear guide for choosing current and future courses of action.



Board Meeting Dates

07 February 2020

25 April 2020

The PAA's Mission: To advance the science-based profession of psychology, and to promote the well-being and potential of all Albertans.

The PAA's Vision: PAA and its members are recognized leaders in enhancing psychological health of all Albertans.

The 2020-2025 Strategic Plan Goals for the PAA are as follows:

• Advocate for psychology's unique value.

• Promote the psychological health of all Albertans.

• Enhance the development of psychologists across career lifespan.

• Focus on PAA's membership value.

• Ensure financial sustainability.

As Psychologists we are aware that we can provide a unique value to the health and well-being of all Albertans. All Albertans, regardless of their income, should have access to effective psychological services in a timely manner. The 2020-2025 strategic plan shall help the organization reach and attain the goals of advocacy for the profession, promotion of psychological health, enhancement of career, membership value within the organization and financial sustainability.

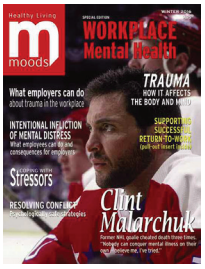
If you are interested in discussing the strategic plan, volunteering, or supporting your PAA organization do not hesitate to let the members of the staff or myself know. We would be grateful to have your valued input.

moods MAGAZINE

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Contributions Accepted

Moods, a Canadian publication found on newsstands across the country, is directed at consumers. Moods covers various aspects of mental health, such as addictions, anxiety, bipolar disorder, depression, eating disorders, trauma, PTSD, OCD, relationships, stress, research and more. Each issue also brings you success stories of celebrities and everyday people who have struggled with mental illness.



If you wish to contribute content please contact us at info@moodsmag.com or visit our website for subscription information.

WHY NOMINATE

Nominating is Good for You

By Kerry Mothersill, Ph.D., R. Psych



The Danish Orders of the Dannebrog and of the Elephant are among the oldest and prestigious awards (established in 1219 and 1462, respectively). While the PAA awards are obviously much younger, they also play a significant role in our provincial society of psychologists. Although the benefits of receiving awards are more readily discernible, as an act of giving, the potential benefits of nominating potential recipients can be many, varied and positive.

Nominating a peer is a form of giving thanks to an individual for the contributions that s/he has made to the profession. Although psychologists, like most everyone else, enjoy tangible reinforcement for their efforts, receiving recognition from peers speaks to the intrinsic motivation that is widely inherent in professionals and academics. Nominators may feel that the work of their peer deserves to be recognized as s/he has exceeded customary expectations for diligence, creativity and/or insight.

The nomination of a colleague is an act of giving not only to the potential recipient but also to the discipline. Recognition of achievement and excellence assists in shaping the culture of an organization through identifying individuals (and the nature of their work) that represents highly valued professional/academic accomplishments. Shining a spotlight on selected qualities and work signals to the collective that certain attributes are worthy of emulation. Individuals who submit a nomination typically regard their colleague as having contributed to the discipline in an exemplary manner and whose work they find personally meaningful.

The process of nomination is a form of giving that assists in promoting and strengthening the organization not only for members but also in the eyes of the government, other health professions and the public. The giving of awards communicates to others that the discipline values and fosters excellence within its ranks. Nominations may be spurred by a desire to have the individual's work recognized and disseminated to a wider audience. Many studies have demonstrated that giving is a physically healthy thing to do. For example, Nikrahan et al. (2016) found that individuals who engaged in positive psychological interventions had lower levels of coronary biomarkers among high-risk cardiac patients. Giving support to others can help to lower systolic and diastolic blood pressure and mean arterial pressure. Also, in their book "Why Good Things Happen to Good People: How to Live a Longer, Healthier, Happier Life by the Simple Act of Giving" Post and Neimark (2007) outline the range of ways in which the act of giving is beneficial to a fulfilling life.

The act of giving is also good for you as it enhances happiness. Pleasure is derived from doing something positive for another person. For example, in a study by Nelson, Layous, Cole and Lyubomirsky (2016), a large sample of diverse participants received significantly greater benefits from providing acts of kindness for others as compared with doing kind things for oneself. Prosocial behaviour was more apt to increase positive emotion and decrease negative emotion. People are more prone to flourish psychologically when they help others. In providing some physiological evidence for this, Moll et al. (2006), demonstrated that giving to others engages the mesolimbic reward system through the release of endorphins in addition to the medial and lateral orbitofrontal areas which play important roles in social attachment.

Aside from some related literature from the industrial/organizational field on employment incentives, little empirical attention has addressed the specific motivation for giving and receiving awards. However, research has shown that giving to others can get you (briefly) "high", reduce your stress and anxiety, pump a little more feel good oxytocin, increase your social connection, ripple out a sense of gratitude and may actually help you to live longer.

While the singular act of nominating a peer for a PAA award probably will not change your life, it does have the potential to be part of a pattern of giving that will make a significant difference in your happiness, health and connection with others. So, do yourself (and others) a favour! Nominate a colleague for one of the 2020 PAA Awards.

References available on request.

EDITOR'S LETTER

by Michelle Vandegriend, Ph.D., R.Psych
Psymposium Editor



It is interesting how things can slowly sneak up on us at times. As a personal example, the recent realization that I needed to get my eyes checked as my arms were simply not long enough anymore to clearly read anything up close. With new glasses the clarity and ease with which words on the page come into view is a welcomed relief. If you also wear glasses or contact lenses, you may recall the first time trying them on and everything coming into focus – a clearer perspective envelopes us. Throughout my career, I have had innumerable similar experiences when collaborating with other professionals from different fields in relation to psychological concepts, questions, and interesting discussions that arise.

As we know in our field of psychology, even beginning with our training in grad school, developing a competency with regard to interprofessional collaboration is encouraged, important, and necessary as it has a multitude of benefits for client-centered care and advancement of mental health. The World Health Organization (WHO) describes interprofessional collaboration as when multiple health workers from different professional backgrounds provide comprehensive services by working with patients, their families, caregivers and communities to deliver the highest quality or care across settings. If we pause for a moment and brainstorm all the ways in which the profession of psychology is integrated into aspects of our day-to-day life the opportunities are endless.

When we collaborate with other professions not only do we share our expertise, education and training and find clarity on issues or perhaps uncover more questions to consider we also develop cooperative partnerships where we can work together to achieve the mutual goal of better-quality health for everyone. We open opportunities to develop further innovative tools, projects, and directions, and like putting on a new pair of glasses, we strengthen our lens to more optimally meet the diverse mental health needs of Albertans and of our world.

Enjoy,

Michelle

PAA Editor-In-Chief

Michelle Vandegriend, Ph.D., R. Psych.

Certified Gottman Therapist
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NOTICE OF THE ANNUAL GENERAL MEETING OF THE MEMBERSHIP OF THE PSYCHOLOGISTS' ASSOCIATION OF ALBERTA

The PAA Board of Directors is hereby providing notice pursuant to PAA bylaw 6.3, to call an **Annual General Meeting** of the membership as follows:

Date: Friday 02 October 2020
Place: Calgary, AB

Alberta Psychology in the Media

April 2019 – October 2019

There were 11 career fairs, educational presentations, & public information sessions. With special thanks to:

- Ms. Joanne Lavergne & Ms. Sandy Witdouck, +55 Live Well Showcase, Lethbridge
- Mr. Chad Bodnar, École Paul Kane High School, St. Albert
- Ms. Melanie Reed-Zukowski, Brooks High School Skills Day, Medicine Hat College
- Dr. Judi Malone, Primary Care Integration with Psychology, UofA
- Dr. Judi Malone, Practice Wise (AHS)
- Drs. Judi Malone & Deena Martin, 2019 Interprofessional Pathway Launch, U. of A
- Dr. Patrick Keelan, 2019 APEGA Student Conference
- Ms. Zuraida Dada, Outrun the Stigma Calgary, Mental Health Expo.
- Dr. Judi Malone, The Pain Society of Alberta – 2019 Conference.
- Ms. Kathleen Kelava, Ms. Marii-Heleen Motsmees, Ms. Zuraida Dada, Mr. George Chiu, Mr. Jeffrey Smith, Husky Wellness Fair
- Dr. Judi Malone, CMHA Alberta Working Stronger Conference

30 Other Psychology Events in the Media**.** With special thanks to: Drs. Ganz Ferrance, Linda Hancock & Judi Malone.

With appreciation to 630 CHED, Alberta Primetime, CTV News, Indian Head Wolseley News, Medicine Hat News, & Neighbours of Summerside Magazine.

See the impressive list online & thank those members who impacted public education through their relationships & engaged responses with the media.

COMMITTEES AND TASK FORCES 2019/2020

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Dr. Patrick Keelan
Dr. Colleen Lucas
Mr. Kyle Poon
PAA Board Liaison –Ms. Sandra Gallace

PAA Social Justice Committee
Mr. Landon Hildebrand - Chair
Ms. Joanna Card
Mr. Clayton Falk
Ms. Krista Forand
Ms. Camille Mori
Ms. Donna Piercy
PAA Board Liaison – Ms. Lisa McIsaac

Disaster Response Network Co-ordinator
Dr. Judy Moench

Awards Adjudicating Committee
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Dr. Emma Climie
Dr. Kerry Mothersill
Dr. Lynda Phillips
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Dr. Erik Wikman
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PAA-CAP Joint Task Force Alberta's TRC Response
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Dr. Judi Malone
Dr. Deena Martin
Ms. Loretta McConnell
Ms. Janice Minoose
Ms. Wilma Spearchief
Dr. Richard Spelliscy

Book Review Editor
Dr. Michelle Vandegriend

APA Rural Health Co-ordinator Representative for Alberta
Mr. Robert McGarva

APA Council for Professional Practice
Dr. Lana Hawkins

PAA Provisional Board Representative
Ms. Heather Gower

PAA Student Board Representative
Ms. Chelsea Hobbs

ADVOCACY CORNER

by Shelagh Dunn, Ph.D., R.Psych



As psychologists, we are often really good at looking at a system, seeing what is not working, and how it could be improved. Yet, many of us get stuck on how to create meaningful systemic change, the work of advocacy. You cannot really invite the system into your office and have an engaging discussion about it, or write a paper and then have everything shift into place. We are really good at seeing where advocacy needs to happen, but we do not always know how to make it happen in a system with thousands of moving parts and people.

That is why I was thrilled to learn that the Psychologists' Association of Alberta is developing an Advocacy Toolkit, which will provide some simple tools for member action. As PAA members, many of us look at the position statements of our organization and feel hopeful about the potential for change. These two are my current favourites:

"All Albertans, regardless of income, should have access to Psychological services."

"Mental and behavioural health publicly funded services must reach parity with funding for physical health publicly funded services based on the burden of disease."

Whenever I read these, I do a silent internal cheer. Because it is true mental health is just as important as physical health. People who live in Alberta should be able to access mental health treatment the same way they can access physical health treatment. And Albertans suffering from a mental health concern should not have to take on the additional burden of figuring out how to fund their treatment.

We know this. We also know that the current system is not working for all Albertans. There is significant inequity in our current provincial mental health care system. In this system, some of us can access a good workplace benefit package or afford to pay out-of-pocket for care, and some of us face significant barriers to accessing care.

A person in our province looking for mental health services will have to navigate an extremely complex system to find care, a system with many gaps, particularly for counselling services, and for services for children and families. Those gaps are real and they are large. For example, the Canadian Mental Health Association estimates that only about 1 in 5 children who need mental health services will receive those services.

As psychologists, none of this is a big surprise. We see daily how our system is not working, particularly for the most vulnerable groups. The good news is that there are so many of us who can advocate for a better system, and many ways to do so.

Psychologists are an important part of our provincial mental health care system, and our voices matter, because we see how the system operates from the inside, and we are often in a position to advocate for changes.

I have been fortunate enough to find myself in a position where I have been able to advocate for the mental health of young people in our province, and having a background in psychology means that I can often speak easily about how the system works and the impact of trying to access care when suffering from a mental illness.

One thing I have learned through these efforts is that the general public is becoming more and more aware of the need for mental health services in our province, and there are many advocacy organizations working towards improving access. When psychologists add our voices to these campaigns, we strengthen advocacy for increased access to services, and we can help to advance the goal of parity in funding with physical health.

In addition to contacting our representatives and advancing the goals of the PAA, as I know we will do when the toolkit comes out, I think we can broaden our scope beyond our own profession and talk more and more about mental health as an important need for the citizens of our province.

Some wonderful campaigns to check out (you can follow them on Twitter):

- Canadian Mental Health Association (National, Alberta, and Edmonton)
- Mental Health Commission of Canada
- Mental Health Foundation Edmonton

Do you know of other campaigns to follow? How are you advocating for mental health care in Alberta? I would love to hear from you! Please email me at shelagh@redtreepsychology.com

Collaborating - Fostering the Profession - Learning - Leading

Psychology as a Profession

PAA, & our members, are committed to maximizing our impact through strategic relationships.

For the profession of psychology that includes:

American Psychological Association

- Dr. Lana Hawkins was elected to the APA Council for Professional Practice

Canadian Council of Professional Associations of Psychology

- Dr. Judi Malone serves as the chair of CPAP

Canadian Psychological Association

- Dr. Arlin Pachet, Dr Cheryl Nekolaichuk, & Dr. Judi Malone are on the CPA taskforce on psychologists involved in end of life care (practice guideline development)
- Dr. .Judi Malone serves of the CPA board representing the provinces

Alberta

- We are on the PsyD Advisory committee for Concordia University of Edmonton
- Dr. Judi Malone is chairing the Alberta Alliance for Mental Illness & Mental Health
- We work closely with the College of Alberta Psychologists, advancing the profession together
- We participate on the AHS Professional Practice Council for Psychology

Some things only a psychologist can believe!

Tune in to PAA podcasts by Dr. Jon Amundson, featuring over 260 podcasts with over 5,600 downloads.

Just a few recent topics:

- Medical assistance in dying
- Fentanyl and opioid use
- The Bystander Effect Revisited



NOTES FROM THE CEO'S DESK

by Judi L Malone, PAA CEO
Ph.D., R.Psych (AB/AUS)

"I have discovered the value of psychology & psychiatry, that their teachings can undo knots in us & permit life to flow again & aid us in becoming more truly human"
Jean Vanier



Many have acknowledged the unique value of psychology. Psychological science and practice help each of us to become more determined, happier, or less stressed, to better understand ourselves & others, to improve our relationships, to deal with problems or advance strengths, to make better choices, to manage pain, & so much more.

Psychologists are regulated health professionals who provide psychotherapy, assessment, diagnosis, consultation, & research of psychological health & problems. We are trained in evidence-based practices, follow a robust code of ethics, have advanced university degrees, & undergo an extensive training process. We use extensive study of biological, cognitive, emotional, social, cultural, & environmental determinants of behaviour to help people cope more effectively in daily life.

A key tenet of our 2020-2025 PAA Strategic Plan is to, "Advocate for Psychology's Unique Value" – an easy & rewarding task.

Value of Psychology for Advocacy

With good information, good decisions are made. Psychology informs systems change which PAA has articulated into our advocacy strategy. We engage in multiple collaborations (from presentations to family medicine residents to participating in the provincial autism strategy), lobby the provincial government directly, & take a leadership role with the Alberta Alliance for Mental Illness & Mental Health.

Value of Psychology for all Albertans

Access makes a difference & PAA is committed to public education & advocating for access to services. We demonstrate benefit through outcome-informed practices & collaborate with the Canadian Red Cross, Alberta Government Partners, the Addiction & Mental Health Strategic Clinical Network, CMHA-AB, & others to advance this.

PAA's Mission

Advance the science-based profession of psychology & promote the well-being & potential of all Albertans

Value of Psychology as a Career

Psychology is a popular undergraduate topic but as an ever-evolving science we maintain that enthusiasm throughout our careers. We embrace this growth as evidenced in our ongoing Technology in Practice & Truth & Reconciliation taskforces. Quality professional development options are popular & we support proposed future academic options such as CUE's PsyD & AU's proposed DPsy.

Value of PAA Membership

PAA is committed to ensuring membership value for everyone. Therefore our services range from student presentations, supervision lists, welcome to the profession, experienced practice advisors, quality continuing professional development offerings, media engagement appreciation, through to awards. We offer innovative services to meet your needs which include refining our liability insurance to meet Alberta practice needs and negotiating extended health benefits for those in private practice.

In closing…

We are proud of the value of psychology & know the difference it will make as we build that awareness. PAA & our members ARE adding value to Alberta & are of value to all Albertans. We can all be proud of that.

Judi

PAA 2020-2025 Strategic Plan

PAA is the voice of & for psychology in Alberta. We advocate for psychology in Alberta, inform the public & the media, & advocates for consumers of psychological services.

Developed at the May 2019 Board Strategic Planning Retreat

Our Mission

To advance the science-based profession of psychology & to promote the well-being & potential of all Albertans.

Our Vision

PAA & its members are recognized leaders in enhancing the psychological health of all Albertans.

Approved at the 20 September 2019 PAA Board Meeting

2020 - 2025 PAA Strategic Plan Goals

- **Advocate** for psychology's unique value
- **Promote** the psychological health of all Albertans
- **Enhance** the development of psychologists across career lifespan
- **Focus** on PAA's membership value
- **Ensure** financial sustainability

PAA IS ON FACEBOOK!

How you seen our latest social news feeds on our Facebook pages?

PAA not only has a Facebook page for PAA Students, they also have one for Alberta Provisional Psychologists.

Click here to check all of our Facebook pages

PAA Facebook

Student Facebook

Alberta Provisional Psychologists

TOWN HALL MEETINGS

College of Alberta Psychologists (CAP)
&
Psychologists' Association of Alberta (PAA)

Town Halls are a wonderful opportunity to connect with the CEO of PAA, Dr. Judi Malone, and the CEO of CAP, Dr. Richard Spelliscy, through brief informal updates on the respective organizations and an opportunity for dialogue during a question and answer period.

Interactions with members are meaningful and continue to provide value and vital input to association operations. Look for an e-mail invitation from CAP for the next town hall in your area.

Red Deer - 20 February 2020
Calgary - 21 February 2020
Edmonton - 28 February 2020
Fort McMurray - 08 April 2020
Medicine Hat - 17 June 2020
Lethbridge - 18 June 2020

ETHICS - THE IMPOSSIBLE IMPERATIVE

Power Differential Gets Real

By Jon K. Amundson

Stephen Easterbrook was fired as CEO of MacDonalds due to a consensual intimate relationship with a subordinate employee. By all legal standards, and even life's more normative reflection, this relationship would have been easy to excuse. He was single; the other person a mature competent adult. In fact, for years in the business world, such liaison was not considered exceptional. However, with the advent of increased awareness of role propriety, and the embracing of codes of conduct within large organizations, what was au currant is now, apparently, significantly libelous.

This shift in perspective pays homage to professional psychology. It has been an axiom of the discipline that more personal relationships in practice - whether with patient, student, research subject, subordinate colleague and so on - are of concern, and courtship prohibited. This restriction is based upon power differential - a term defined in the following.

There are two ways differential in power is considered. The first is power by role. Stated simply, by the very nature of the identity and function of a given role, deference and individual subordination is expected. For example, a law enforcement officer, regardless of any personal characteristic can exercise power over a given citizen. Agents of social control and vested legal authority are defined by role (i.e. police, firefighters, judges, and so on). Their ability to impact others destiny in inherent in their very job designation. Second to power by role however is power by status. This is power arising from role and often covaries with role. However, status has an independent dimension as well.

A psychologist in training had a primary supervisor - a person by role empowered to affect their destiny. Nonetheless, the provisional psychologist often spoke with another senior psychologist regarding ethics, practice and so on because that person "just seemed smarter".

Status arises from role by is not synonymous with role. Status might be reflected in the degree which a subordinate defers to, honor/respects or accepts directives from another. When role and status co-vary summatively there is authority, responsibility and even admiration.

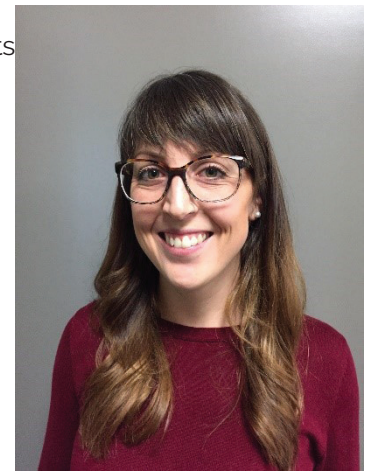
Before proceeding, it is important to define, operationaly, power differential. There is a formal definition and a dynamic definition; often seemingly at odds. Formal differential is acceptance that inherent or by definition one party has greater control, authority or potential to influence the destiny of another; again, law enforcement or a teacher or supervisor in psychology and so on. It is prima facie, meaning of face validity, that, for example, a supervisor for a psychologist can impact significantly the fate of a student, intern or provisional. A bit more nuance however exists regarding status as a persuasive dynamic - a likability or attractant quality that invites power over, or voluntary subordination of another. Not simply in a negative nor exploitative sense ought this last sentence be read! Treatment requires a coherent, collaborative and engaged process; teaching and consulting: the ability to develop a charm, so to speak, is one aspect of power by status, in a professional relationship.

For psychologists then the admonition to not court among your subordinate makes sense: the role and pursuit of persuasive or authoritative status can constitute a power differential at overt or subtle levels. Even where the subordinate has voice, authority and assertion in matters of relationship, role and status trumps any defense offered.

Returning to the infusion of this awareness into business and corporate ethics, it would appear the McDonald's response reflects a seriousness which has not always exceeded lip service. It would appear that social and behavioural science has truly influenced policy, trumping business as usual. This diffusion of sound social psychological research is, in the words of a past APA president, truly an (emerging) successful example of "giving psychology away"!

STUDENT'S CORNER

Hello Student Members!



As the the fall term comes to an end, I wanted to share several opportunities and events that you may be interested in.

Looking to learn more about PAA?

Did you know that PAA delivers presentations at post-secondary institutions across Alberta to answer questions for students? If you are interested in learning more about the role of PAA, how PAA is distinct from CAP, have specific questions about the registration process, or are curious to learn more about what a day in the life of a registered psychologist is like, this might be an opportunity worth checking out.

If you are interested in having PAA come and give a presentation at your university, contact Brittany at brittany@paa.ab.ca for more information.

Call for PAA Graduate Student Representatives

We are currently looking for PAA Graduate Student Representatives to help ensure the voices of student members are heard. Individuals must be a student member of the PAA and be currently attending a graduate program in psychology in Alberta.

The role of a PAA Graduate Student Representative would include:

- Being a point of contact at your institution.
- Sharing information within the psychological community at your respective university.
- Communicating with the PAA Student Board Member to help ensure issues relevant to you and your fellow students are heard.
- Approximately a 1 to 5-hour commitment per month.

If you are interested in applying, please send your CV and a brief description of why you would be a good fit for the role to Brittany at brittany@paa-ab.ca.

PAA Student Facebook Group

Did you know that PAA now has a Facebook Group specifically for you? Come connect with your peers here: https://www.facebook.com/groups/PAAStudents/

As always, if you have any questions or concerns, please do not hesitate to contact me directly at chobbs@ualberta.ca. I would love to hear from you!

Warmly,

Chelsea Hobbs
Student Director, PAA Board of Directors

PAA WELCOME TO THE PROFESSION AND AWARDS BANQUET



Dr. Rachel King
Doctoral Dissertation Award



Dr. Steve Knish
Excellence in Clinical Supervision Award



Tasmia Hai
Masters' Thesis Research Award



Tamara Austin
2019 Psychologist of the Year Award

Citadel Theatre, Edmonton

20 September 2019

This year, our celebration of exemplars and future leaders had over 120 attendees. We thank BMS for their sponsorship, congratulate PAA award winners, and sincerely welcome all newly registered psychologists.

The Award presentations were made by Nicki Wilson, PAA Board President and Dr. Judi Malone, PAA CEO.

Nicki Wilson, PAA Board President and Dr. Kevin Alderson, CAP Council President, joined Dr. Judi Malone, PAA CEO and Dr. Richard Spelliscy, CAP CEO in welcoming the new registrants to our profession. These newly registered psychologists will shape the future

Join us in congratulating this year's worthy PAA award winners.

More information (and nomination forms) for all of the PAA Awards are available online https://psychologistsassociation.ab.ca/about-paa/awards-recognition/



Dr. Mark Holden
Excellence in Teaching Psychology Award



Dr. Stephen Carter
Jean & Dick Pettifor Memorial Award



Avra Davidoff
John G Paterson Media Award



CONTINUING PROFESSIONAL DEVELOPMENT

Primers: one-hour recorded overviews of the topic available for purchase ($40 +gst).
Contact Brittany (brittany@paa-ab.ca) to register.

Trauma & PTSD in First Responder Populations	Dr. Meghan McElheran
Family Restructuring Therapy	Dr. Stephen Carter
Preparing for Cannabis Legalization in Canada: A Psychologists' Evidence-Based Guide	Dr. Igor Yakovenko
The Psychology of Cannabis Addiction	Dr. Jonathan Stea

Upcoming Winter CPD Workshops

Critical Factors in Completing Parenting Assessments	Dr. Ann Marie Dewhurst	16-17 January 2020, Edmonton
Best Practices in Gifted Identification & Programming *Co-sponsored with Werklund School of Education, Integrated Services in Education*	Dr. Steven Pfeiffer	30 January 2020, Calgary

Upcoming 2020 Spring & Summer CPD Workshops

Developing Your Personalized Approach to Clinical Supervision: The Contextual-Relational Meta-Framework	Dr. Jeff Chang	19 March 2020, Calgary
General Assessments for Counselling Psychologists	Dr. Jamie Dyce	27 March 2020, Edmonton
Trauma & PTSD in First Responder Populations	Dr. Megan McElheran	10 April 2020, Calgary
What Every Psychologist Should Know About Forensic Practice	Dr. Roy Frenzel	17 April 2020, Calgary
Competency-based Clinical Supervision: An Experiential Approach *Co-sponsored with the University of Alberta Department of Educational Psychology*	Dr. Carol Falender	02 May 2020, Edmonton
Understanding, Evaluating, & Treating Autism Spectrum Disorders New Data & New Ideas	Dr. Sam Goldstein	08 May 2020, Edmonton
Geropsychology Research & Practice: Helping Our Clients, Helping Ourselves	Dr. Candace Konnert	22 May 2020, Edmonton
EPPP Prep: Memory Boosting Learning Strategies	Michele Pentyliuk	05 June 2020, Calgary 29 June 2020, Edmonton

Past CPD Workshops

Insomnia: Treatment Expertise Using CBT-I	05 September 2019 - Dr. Gregg Jacobs, Edmonton
General Assessments for Counselling Psychologists	08 November 2019 - Dr. Jamie Dyce, Calgary
Family Restructuring Therapy	22 November 2019 - Dr. Stephen Carter, Edmonton

More information & registration is available on the PAA website
https://psychologistsassociation.ab.ca/professional-development/paa-events-webinars/
Questions or suggestions for workshop topics? Contact brittany@paa-ab.ca

Challenges with Psychoeducational Assessment in Response to Truth and Reconciliation

By Ryan Matchullis, PhD. R. Psych

The Canadian Psychological Association's (CPA) Response to the Truth and Reconciliation Commission (TRC) of Canada's Report was released in 2018. This document highlighted methods, practices, and biases that psychologists across the country have a responsibility to critically evaluate and change in order to provide ethically and culturally appropriate services for First Nations, Metis, and Inuit populations. For school psychologists working with Indigenous Peoples, perhaps no section of CPA's response to the TRC report is more convicting than the comments on psychological assessment.

Currently, formal psychoeducational assessments remain relevant for students living in First Nations communities. Indigenous Services Canada's High-Cost Special Education Program (HCSEP: Government of Canada, 2019) specifies that students must be identified by a psycho-educational assessment or a physician report in order to be identified with severe to profound exceptionalities and then receive an Individual Program Plan (IPP). However, as CAP (2018) outlines, psychological assessments have likely been culturally biased, viewed skeptically or rejected within First Nations communities, and have not valued Indigenous worldviews regarding health, pathology, and treatment but instead prioritized Western theories. One aspect of traditional psychoeducational assessment, a reliance on quantifying intelligence, may be one of the most challenging practices to rectify in this regard.

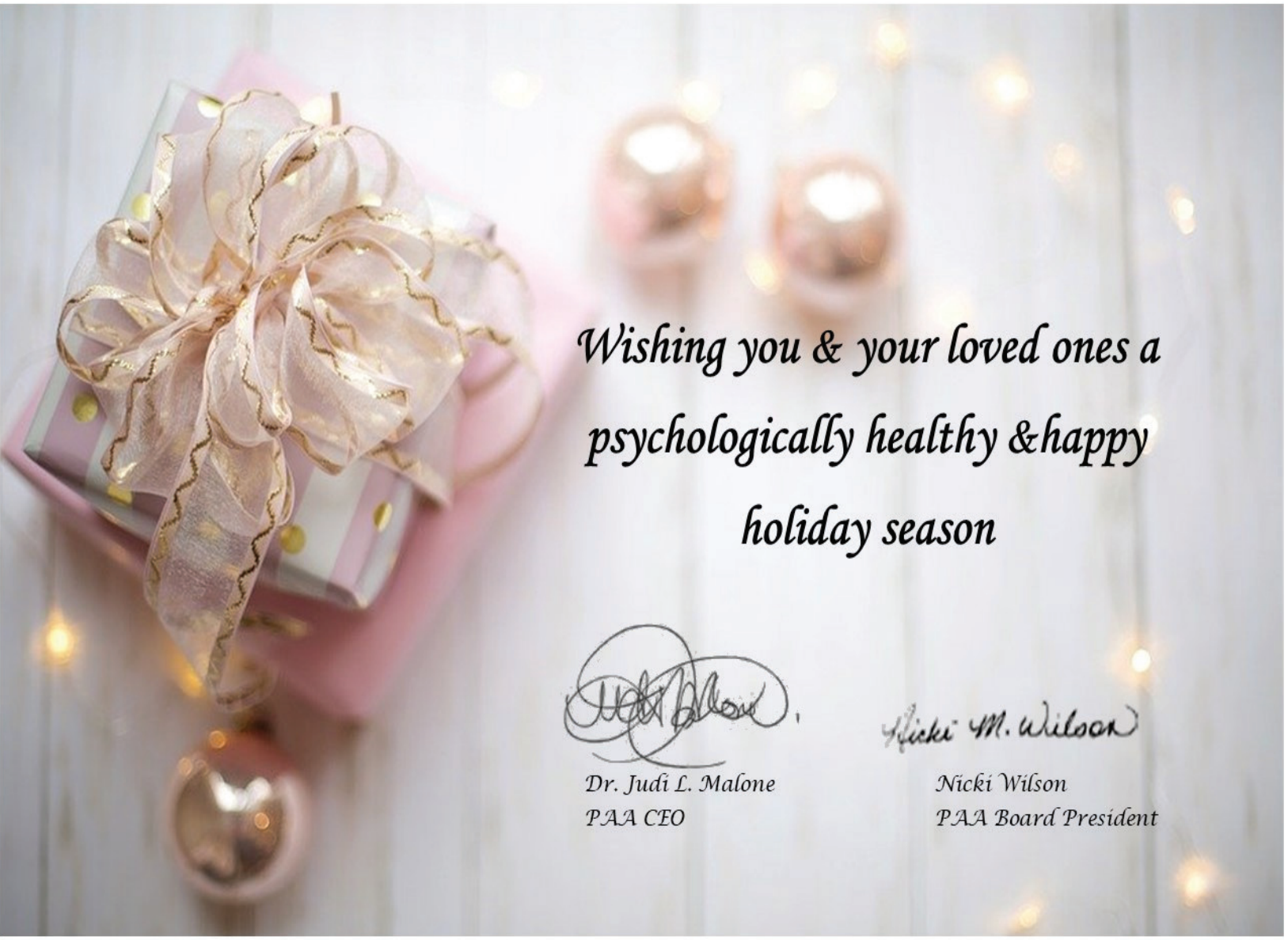
School psychology has been strongly linked to intelligence testing since its inception over 100 years ago (Merrell, Ervin, & Peacock, 2012). However, available intelligence tests are not normed on Indigenous Peoples, do not include their unique skills and knowledge, and may not clearly predict their future academic or vocational success as was their intended purpose (CPA, 2018; Geva & Wiener, 2014). As just one example, evidence suggests that Indigenous children may score lower on norm-referenced measures of verbal ability which often contributes heavily to the calculation of global intelligence scores. In contrast, these children may perform commensurate on scales measuring aspects of visual processing or fluid reasoning (Mushquash & Bova, 2007; Nakano & Watkins, 2013). Flanagan, Ortiz, and Alfonso (2013) have provided Culture-Language Test Classification Matrices that may support school psychologists in making assessment decisions that place greater weight on thinking skills, rather than acquired knowledge. Despite these known issues, high stakes decisions continue to be made based on intelligence testing results (e.g., diagnoses, educational placement, etc.). The challenge remains for school psychologists to decide on a case-by-case basis how they will use standardized assessment measures.

Pertinent examples of potential changes to Indigenous assessment practice include understanding intelligence in the individual's cultural context, focusing on strengths and gifts versus pathology and diagnosis, and learning more about the individual's role and knowledge within their community (CPA, 2018). Sternberg (1999) has suggested the importance of "successful intelligence" which may be conceptualized as the abilities that are required to succeed in specific environments and cultures. In this regard, Geva and Wiener (2014) offer some practical suggestions that may be considered for intelligence testing within these unique environments and cultures:

- Consider if intelligence testing is truly required or timely.
- If intelligence testing cannot be avoided, take ample time developing rapport. Assess intelligence after other domains (e.g., oral-language proficiency, academics, etc.).
- Select appropriate measures in advance (e.g., nonverbal intelligence measures). Focus on fluid versus crystallized skills, selecting subtests, composites, or full measures based on degree of cultural and linguistic loading.
- Gather information on adaptive behaviour relevant to the community. Available rating scales may be inappropriate.
- Consider how the child solves problems that are relevant to them, in their community.
- Use dynamic, cross battery assessment approaches (e.g., providing cues such as clarifying instructions, additional sample or practice items, teaching strategies, etc.) to examine learning and problem-solving skills (see Geva & Wiener, 2014, pg. 115-134).

School psychologists often find themselves weighing the potential risks and benefits of assessment outcomes, considering the individual, family, community, and systems levels. They may face system-level tensions whereby they are encouraged to present information (e.g., intelligence scores) in traditional formats based on established program eligibility and criteria without accommodation for culturally and linguistically diverse practice recommendations. Within this context, a crucial role of school psychologists is to engage in advocacy. We should assist systems in understanding the limitations and risks of potentially unfair assessment practices and advocate for equitable approaches to assessment that provide examinees a fair chance to achieve the same level as others with equal ability. Our response to the TRC report can be one of engaging with First Nations communities in a more collaborative approach to assessment, while also advocating for higher level change in how these assessments are interpreted and required.

References available upon request.



INNOVATIVE PRACTICES IN PSYCHOLOGY

by Dr. Naheed Jawed, Ph.D., R.Psych



Innovative Practices in Psychology is a regular feature that showcases unique psychological practices in the province. This month learn from Kristy McConnell, who is the founder of Off the Beaten Path Psychology and Wellness, a private practice that utilizes psychotherapy and movement in the Airdrie and Calgary area. Psychotherapy that is based in the mind-body connection has gotten more attention in recent years. This interview will explore the integration of psychotherapy including EMDR with walking or running outdoors.

What is movement therapy?

Movement therapy can be defined as a psychotherapeutic modality that combines physical activity with traditional talk therapy. Using movement and exercise as an adjuct to therapy has been around as long as we have known that physical health seems to be associated with mental health; however, using walking or running as the backdrop for the therapeutic setting began to surface in the literature in the 1970s when psychiatrist, Thaddeus Kostrubala, wrote the bestseller, "The Joy of Running." Noticing the positive effect it had on his own health and wellness, he began providing individual and group sessions outside and wrote about the catalyzing effect it seemed to have.

What is the research on the effectiveness of its use for various disorders?

Exercise as an adjunct to therapy has a breadth of research. Arguably the most well-known research is the Duke SMILE studies which reported a significantly lower relapse rate of depression in paricipants assigned to a an aerobic exercise group only compared to a medication only and combined exercise and medication group. More and more research is also being pursued that is finding a strong effect size for improving mental health by going outside and being in nature, such as the University of Michigan's recent finding that being in nature significantly decreases cortisol levels, and can have cumulative de-stressing effects.



How does the outdoors make movement therapy sessions different from traditional therapy?

The outdoors provide a great deal of opportunity to connect concepts to metaphors in nature, such as grooving a new neuralpathway in the brain by taking clients off of the path and into the long grass to demonstrate how difficult it can be when first attempting to make a change in our lives. During the session, a working case formulation is built and goals are co-developed along with interventions that will be incorporated in the treatment plan.

I have heard that you have been incorporating EMDR into your movement therapy practice. Tell us about this.

The runner's high is an elusive and sought after state in the running community. I personally believe that bilateral stimulation, aerobic running as opposed to anaerobic, and being in nature are some of the key ingrediants in achieving this ospicious state. I also have come to believe that the more this state is achieved, the more it leads to trait change, not just state change. This is also the case with meditation: the more we practice, the more we are able to feel the effects when we are not practicing. EMDR also has roots in being able to lessen the charge of traumatic events and supports realization and personification of the events in order to integrate it into the narrative of our life.

Walking or running is naturally bilateral, so it only made sense to me that I also look at how both modalities can work together. In practice, I've combined both movement sessions with office sessions where stage 4 processing has occurred. We can walk or run as we determine EMDR targets, prepare, reevalute and install resources, and then go inside to complete the processing work. For clients who have completed a number of EMDR sessions, we sometimes can incorporate eye movements outside by focusing on moving their eyes to the left and right of the path. We will also sometimes stop and do some tapping at a stream or another picturesque location in order to install it as a peaceful place. Lastly, sometimes I will have clients focus on the left and right of their footsteps, while bringing up distressing material. The integration of EMDR and movement therapy has been a slow and gradual proess.

Are there any ethical considerations specific to movement therapy?

Definitely! Obviously, anonymity or privacy cannot be guaranteed when outside. This is always discussed in the first consulation with a client, and then built upon it in the first session together. A plan is developed for what to do if someone known to either of us sees someone we know. Also discussed is the procedure on how to deal with people coming close to us on the path so that they do not overhear what we're talking about. I have a liability waiver, in order to protect my business, should someone be injured during a session. These risks and benefits are described during a relational informed consent process.

A warm thank you to Kristy for sharing her knowledge so enthusiastically!

IN MEMORIAM

It is with great sadness that we acknowledge the sudden passing of Don Beeken, on 16 November 2019. His contribution to the psychological health & wellness of Albertans was vast and he will be missed.

Notices of condolence for colleagues can be shared with the PAA at paa@paa-ab.ca

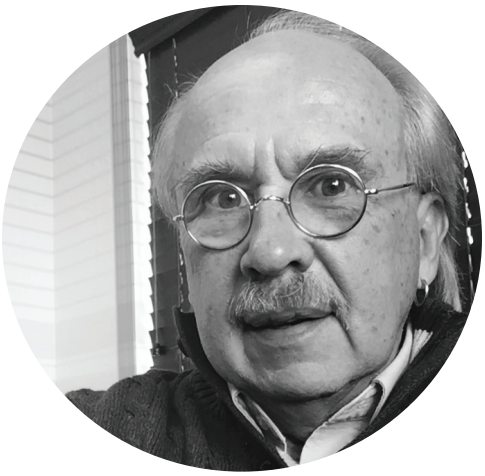
It is with regret that we acknowledge the passing of Dr. Charles Costello, who passed away in August 2019.

Notices of condolence for colleagues can be shared with the PAA at paa@paa-ab.ca

MEMBER BENEFITS

LOGIN CANADA
bms.
GoodLife CORPORATE WELLNESS
Alamo
TD
LEXUS OF EDMONTON WEST
BRIGHTSQUID
SANDMAN HOTEL GROUP
greenspace
red arrow
safety home

by Terry Wilton



What I did

As I look back on my 42 year career, I have few regrets. I met many heroic clients and come away with a profound respect for the power of healing within human nature. I have been deeply honoured to do what I have done with thousands of clients. What an astounding way to spend my working life!

In winding down therapy, making continuity of care arrangement for dozens of clients, I frequently heard the services I provided had saved the life of my client. I even had one client indicate that the relationship he had with me had kept him from following through on a workplace shooting. I typically heard the benefit my clients received was because I was flexible, creative, compassionate, and that I related to them as one human being to another.

But apparently, how wrong I have been!

Presently, collectively, the trend is to think we are better when we do this role technically, with protocol driven therapies and regulatory guidance that is increasingly behavioural. Consider the recent guideline on boundary crossing. I get the gist; we need to do whatever we can to insure that sexual boundary crossing within a professional relationship doesn't happen. The guideline on professional boundaries presents that the safe and acceptable psychologist is the one who never betrays any aspect of their own human existence. When I read and re-read the guideline I kept thinking about Harlow's infant monkeys: you remember the ones, they got their bottles in a wire holder.

Is this really the best way to make sure that inappropriate behaviour is never present in the professional relationship?

It is a fallacy to think that if we trace back from an egregious violation of professional boundary to the first item in the behavioural chain that every instance of that early behaviour will inevitably lead down the same path. I believe there are better ways to prevent boundary crossing than advising that pictures of the psychologist with his/her family should not be in the therapy room as the guideline suggests. C'mon, we are behavioural scientists. We can do better. More likely contributors to boundary crossing would be such matters as the psychologist having a sense of entitlement, gender/power insensitivity, arrogance or alienation from healthy relationships with family and friends.

Our guidelines and Standards contain advice that constrains the nature of contact we have with clients, keeping it objectively professional. Let me illustrate. A client comes vibrating with emotional turmoil in the midst of overwhelming circumstantial troubles. Upon greeting the client we are not to respond with comfort or immediate assistance, "Wait... before we begin, I must receive your informed consent for treatment." The psychologist drones on through the nine points of informed consent, including having to explain what is meant by without prejudice. Then the psychologist continues, on the advice of the recent guideline, "I need to let you know, just so that we save any potential awkwardness in the future, that you and I could never give to or receive gifts from each other. Okay, now you can talk."

Really?

I gleaned a metaphor from a reported conversation between two veteran colleagues. They have given me permission to share it. The increasing size of our Standards and Code, the volume of our Guidelines and Alerts, is akin to a corset being pulled tighter and tighter. As the corset restricts the normal flow of breath and blood, practitioners are negatively impacted. As clients are given therapy by a de-humanized psychologist, they are robbed of the most powerful source of healing, growth and recovery – a relationship with a committed, careful, but fully present human being.

I realize that much of my career I coloured outside of the lines as they are now drawn in this most recent guideline. I never crossed a sexual boundary – not even close. But I certainly warped through my client interactions with humanity and respected the same within them.

So I am gone now. I leave behind many fine psychologists who will bring their humanity to meet the human condition of the clients they serve, and probably will never read the guideline (none of many psychologists I have asked about this guideline had done so). Despite their ignorance of all the many suggestions, ever violating a sexual boundary is beyond even imagining for them.

But I wonder if they will have a voice. I have been a voice, but I am done now. It is your profession now.

THE SUPERVISION COLUMN

An Interview with Dr. Rod Goodyear, Pioneer of Clinical Supervision: Part 1

by Dr. Jeff Chang

In May 2019, PAA sponsored Dr. Rod Goodyear's workshop on clinical supervision.

Dr. Goodyear is co-author of Fundamentals of Clinical Supervision (6th ed.). I interviewed Dr. Goodyear after the workshop. Here are some of the highlights of our interview.

Goodyear: So, the first question you asked is, "What's changed across the sixth edition of our book?" I was really fortunate with respect to timing. Janine had approached me, maybe in '89, to write this book. It came out in '92, and we were really early on the scene. The book has evolved as the literature in the field has evolved.

Now there is a lot more attention to relationship in supervision. I think we had one chapter on relationship, and I don't think we had a single chapter on multicultural issues in the first edition. So, one way the book has evolved is that we now have three chapters that, in one way or another, address relationships which include multicultural issues.

There's been a proliferation of models, so in the 6th edition we've added a second chapter on models. And partly because of my own interest lately, we've added a chapter on continuing professional development across the lifespan thinking about not just supervision, but consultation. A lot of what's called "supervision" is really consultation, but I think they're similar enough that it was warranted in the book. Those are three pretty important differences since the first edition.

Chang: Something else that wasn't in our pre-interview overview in places like the UK, Ireland, and Australia, lifelong supervision, which is really consultation as you define it, is required for one's entire career. And I've noticed that in North America, supervision seems to screech to a halt once somebody's licensed and out of school.

Goodyear: I'm in favour of this. I think we don't have the data that lifelong supervision makes people better therapists. I do think it has a function, and interestingly Jim Lichtenberg, Heidi Hutman, and I just published last year's National Survey of Counselling Psychologists. In this last survey we added a question about supervision which we didn't include in the article and about half of our respondents report they continue to get what they were calling "supervision", usually peer supervision, some people formally. So, it looks like at least half the people are doing it. Not all of our respondents are actually in practice, so it's probably an even higher proportion I'd be concerned about those who indicated they're not. But I think it's already in place for a good number of people. The question is how to make it more systematic and ongoing across the field. I think in Canada and the US, we have to be having those conversations at our psychological association levels.

Chang: About what proportion of psychologists say they have received some kind of training or education in supervision, or supervision of supervision?

Goodyear: We didn't ask that, which would've been a good question.

Chang: We still hear a lot about supervision that's inadequate or even harmful, right? Mike Ellis' recent work on harmful supervision and Nick Ladany's stuff on supervisee nondisclosure It's important stuff that supervisees are not telling their supervisors, which can threaten client welfare. So, do you think you're making headway in improving supervision practice?

Goodyear: I'd like to believe so. The harmful stuff that Mike Eliis describes, some of that can be remedied by education, some of it's just the same kind of issues that lead psychologists to go astray when they work with clients – boundary issues and that sort of thing. Some of the behaviours… not treating supervision as seriously as you treat your therapy sessions. So, you're more likely to cancel sessions, or cut them short, or take phone calls during sessions. You're not as attentive to the process. One of my personal favourites for "inadequate"… Karen Kitchener years ago heard an anecdote about a supervisee who showed up for a session, and the supervisor said, "Listen, I've got to pick up my dry cleaning, why don't we hop in the car and we can talk on the way over". I think a lot of that's educable. The harmful stuff, I do worry about that. My hunch is that more egregious stuff is done by the same people we should worry about doing therapy. Boundary violators.

I will have more of my interview with Dr. Goodyear next time. Please send suggestions or comments to jeffc@athabascau.ca. References are available at https://drjeffchang.webs.com/paa-supervision-columns

2019 SCIENCE FAIRS

Edmonton Regional Science Fair – Edmonton

6 – 7 April 2019

Jappn Grewal, Harry Ainlay School and Qin Tong Wu, Old Scona School were the 2019 PAA award recipients for their project entitled "(050502) A Study on the Effect of Music Intervals on Emotional Responses".

Congratulations to Jappn Grewal and Qin Tong Wu!





Hannah Abdo ,who attends Edmonton Islamic Academy, was Honourable Mention for her project entitled "(040305) Inattentional Blindness".

Congratulations Hannah Abdo!

Judged by Ms. Noga Liron and presented by Ms. Tamara Lane representatives of PAA



THANK YOU!

On behalf of PAA, we would like to thank you for your dedication to the profession, and in particular your service as a volunteer on **PAA's Board, Committees, Task Forces, Representors, Editor, Contributing Columnists, Practice Advisors, Media Representatives, Science Award Judges and Presenters, Public and Career Speakers and Exhibitors.**

Volunteers like you are the backbone of a strong and effective professional organization and make tangible contributions to advancing the science-based profession of psychology and to promoting the well-being and potential of all Albertans.



Central Alberta Rotary Science Fair – Red Deer
29 – 30 March 2019

Olds High School students, Parker Mogck, grade 12 student was the 2019 PAA award recipient for his project "A Link in the System" and Claire Petersen, grade 11 student received PAA member, Dr. Yvonne Buchanan-Sedun's Award for her project "Good Thinking or Gut Feeling?".

Congratulations to Claire Petersen and Parker Mogck!

Judged and presented by Dr. Yvonne Buchanan-Sedun representative of PAA.

Calgary Youth Science Fair – Calgary

5 – 6 April 2019

Ruby Sweet was the 2019 Award recipient for her project "How do we learn best?"

Congratulations Ruby Sweet!

Judged by Ms. Zabrina Kwan and presented by Ms. Cinder Smith representatives of PAA.





Psychology Shaping the Landscape

PAA gives you a voice at the table where it matters most to Psychology.

Health Groups

- The Alberta Health "Valuing Mental Health" Committee Collaborative Practice
- The Alberta Pain Network & Opioid Crisis Task Force
- CASA / UAlberta Research Chair in Child & Adolescent Mental Health Launch
- Collaboration with the other Health Professions Act Associations
- AHS Addiction & Mental Health Strategic Clinical Network
- AHS Cannabis Baseline Group

Provincial Advocacy Groups

- The Alberta Alliance for Mental Illness and Mental Health
- The Palix Foundation
- The Autism Alberta provincial review
- CMHA Alberta
- Reforming the Family Justice System
- Alberta Workplace Wellness Network
- Alberta Palliative Care Competencies & Education Project

Psychology Groups

- The Canadian Psychological Association
- The Council of Professional Associations of Psychology of Canada
- The American Psychological Association
- AHS Psychology Professional Practice Council

Targeted Response Groups

- The Canadian Red Cross specific to the Wood Buffalo 2016 Wildfire recovery
- Public Action Plan Ministerial Panel on Child Intervention recommendations
- Concordia University of Edmonton's PsyD Advisory Committee
- University Blue Quills Indigenous Psychology Undergrads

Must sell: remaining psychological and neuropsychological assessment equipment. Some older versions. Great opportunity for beginning assessment psychologist wishing to build up inventory cheaply and rapidly. Come and see for yourself!

Please email emmapivato2@gmail.com.

2020 PAA Recommended Fee Schedule Summary

Effective 1 January 2020 the recommended fee schedule will remain unchanged.

2020 PAA Recommended Fee Schedule

Service	Per Session
Individual Therapy/Assessment	$200.00
Couple/Family Therapy/Assessment	$200.00
Group Therapy (per person)	$60.00
Custody/Access & Legal/Forensic Assessment	$300.00
Expert Witness Testimony (half day minimum fee)	$1200.00
Expert Witness Testimony (full day minimum fee)	$2400.00
Consultation/Corporate Services (half day)	$900.00
Consultation/Corporate Services (full day)	$1800.00

- Report writing, telephone consultation, letters & form completion is billed at the rate of the service being provided

- Billing can also occur in 10 minute increments for services done outside the therapy hour such as phone calls, letters & the like calculated at one-fifth the hourly rate for each 10 minutes. Incremental billings are also appropriate for services provided beyond a 50 minute session

- Fees for specialized services & treatments not listed on the above schedule may exceed the current recommended guidelines

WELCOME TO PAA'S NEW MEMBERS!

(01 August 2019 – 30 November 2019)

Aanderson, Kristine (Full) Akinyode, Olakunle (Provisional) Alexander, D'Anza (Provisional) Apperley, Leigh (Provisional) Apperley, Lisa (Early Career Psychologist)
Arsenault, Kristin (Student) Atkinson, Kelsey (Provisional) Avelar, Ricardo (Provisional)
Azimi, Tara (Provisional)
Bains, Aneesha (Student)
Bal, Manroop (Early Career Psychologist)
Bara, Gurjeet (Provisional)
barton, linda (Full)
Beck, Barbora (Provisional)
Bereketoglu, Pinar (Provisional)
Betts, Jennifer (Early Career Psychologist)
Boothman, Kathleen (Student)
Brayton, Nicole (Student)
Brunner, Kira (Student)
Buchanan, kara (Provisional)
Buhr, Robin (Professional Affiliate)
Burrows, Theodore (Out of Province)
Carcoux, Christine (Provisional)
Caskey, Alissa (Student)
Cassidy, Wanda (Full)
Caswell, Jody (Provisional)
Cech, Carrie (Provisional)
Charbonneau, Camille (Student)
Colling, Deborah (Provisional)
Connors, John "Jack" (Provisional)
Cordell, Ellen (Provisional)
Cruikshank, Kenda (Full)
Crumpler, Tara (Provisional)
Da Costa, Natalie (Provisional) Daly, Damien (Provisional)
Dam, Annie Tu (Provisional)
Danco, Taras (Provisional)
Danzanova, Erzhen (Provisional)
Davis, Amy (Early Career Psychologist)
Davis, Lindsay (Early Career Psychologist)
de Vries, Ursula (Provisional)
Desjardins, Allan (Professional Affiliate)
Dew, Robert (Full)
Domries, Katherine (Early Career Psychologist)
du Toit, Nadia (Provisional)
Duffield, Jenny (Psych. Assistant)
Dupuis, Clare (Full)
Edinger, Jari (Student)
Eliason, Sara (Full)
Ellerbruch Young, Ashlee (Early Career Psychologist)
Enns, Brandi (Provisional)
Forno, Marizabel (Student)
Gauthier, Jessica (Early Career Psychologist)
Gilbert MacLeod, Cheryl (Full)
Godbeer, Megan (Provisional)
Goertz, Brittany (Student)
Graburn, Eric (Provisional)
Graziano, Nicole (Student)
Greig, Aaron (Provisional)
Griffioen, Olivia (Out of Province)
Groen, Esther (Provisional)
Hamilton, Nadia (Provisional)
Hanif, Wahab (Provisional)
Hanley, Cheryl (Early Career Psychologist)
Hartman, Teagan (Student)
Harty, Danita (Provisional)
Hedayatipoor, Naseem (Student)
Hellum, Hayley (Provisional)
Hernberg, Vanessa (Provisional)
Higgins, Kristen (Provisional)
Hill, Christopher (Professional Affiliate)
Hlapcic, Katie (Early Career Psychologist)
Holm, Natalie (Provisional)
Holmstrom, Kathleen (Psych. Assistant)
Huezo, Mateo (Provisional)
Ireland, Whitney (Early Career Psychologist)
Jantzen, Amanda (Student)
Johnson, Jay (Provisional)
Karnjanavijaya, Jakkapan Ron (Student)
Kenny, Roisin (Provisional)
Kerr, Tristyn (Student)
Khandelwal, Sonia (Provisional)
Kinoshita, Cam (Provisional)
Klingle, Kirsten (Provisional)
Kobly, Amanda (Provisional)
Lappala, Tracy (Student)
Larsen, Erica (Full)
Lerette, Sylvia (Full)
Lesar, Boris (Early Career Psychologist)
Li, Phillip (Provisional)
Li, Xiaomiao (Provisional)
Liam, Michelle (Provisional)
Loewen, Shannon (Provisional)
Long, Lyndsay (Provisional)
Long, Justin (Provisional)
Loomis, Shelby (Provisional)
Ludwig-Solheim, Caitlin (Provisional)
Luo, Houyuan (Provisional)
Mackie, Lorne (Provisional)
Mader, Joel (Provisional)
Maher, Schareen (Student)
Mallya, Sasha (Early Career Psychologist)
Mandel, Gabriel (Provisional)
Mann, Davita (Provisional)
Marcinkevics, Dustin (Provisional)
Matthews, Lauren (Provisional)
Matthews, Heather (Provisional)

McAtee, Gavin (Provisional)
McCoy, Lauren (Early Career Psychologist)
McEvoy, Chantel (Provisional)
McKenzie-Hougestol, Sydney (Student)
McLaughlin, Farrah (Provisional)
McMaster, Kathryn (Early Career Psychologist)
Mesquita Hupsel, Juliana (Early Career Psychologist)
Mikasko, Ashley (Student)
Mix-Kondratski, Linda (Student)
Mohle, Erika (Full)
Montello, Andrea (Provisional)
Moore, Katherine (Provisional)
Moreau, Annik (Student)
Novakovski, Chelsey (Provisional)
O'Brien, Samantha (Provisional)
Ochoa, Brisa (Provisional)
Parkinson, Stephanie (Full)
Patterson, Amy (Student)
Penner, Robert (Student)
Peterson, Joanne (Early Career Psychologist)
PHILIP, Shauna (Provisional)
Ponak, David (Provisional)
Quigley, Karen (Provisional)
Rector, Patricia (Early Career Psychologist)
Robin, Thompson (Student)
Rogers, Rachel (Full)
Rose, Chantal (Provisional)
Rosen, Kobi (Student)
Rowbotham, Melissa (Provisional)
Roy, Jean-Luc (Student)
Rozendaal, Kate (Student)
Samra, Gurminder (Student)
Satie, Christie (Provisional)
Sauvé, Thea (Full)
Savitskoff, Lindsay (Provisional)
Scammell, Jennifer (Provisional)
Schnor, Maria (Provisional)
Sharpe, Hillary (Early Career Psychologist)
Sidhu, Keesha (Student)
Sieben, Alexandra (Student)
Sierra Hernandez, Carlos (Provisional)
Simon, Tanya (Provisional)
Sindhi, Benazir (Student)
Skare, Sandra (Provisional)
Stang, Veronica (Provisional)
Stephenson, Jordan (Early Career Psychologist)
Strowbridge, jane (Provisional)
Sutherby, Marie (Provisional)
Tamayose, Aaron (Early Career Psychologist)
Thacker Luck, Alisha (Early Career Psychologist)
Thaxter, Brittany (Professional Affiliate)
Thomas, Jenna (Provisional)
Toor, Harleen (Student)
Trotter, Eileah (Provisional)
Ulan, Justine (Provisional)
Vann, Maria Natalya (Provisional)
Velichka, Karen (Provisional)
Verreault, Andrew (Provisional)
White, Brian (Provisional)
Williams, Mary-Anne (Full)
Wonders, Elif (Provisional)
Yuen-Jung, Jae (Provisional)
Zelinkski, Erin (Provisional)
Zubick, Kristi (Early Career Psychologist)



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