Psymposium

Vol. 33 No. 3 – November 2022

Psychologists' Association of Alberta



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PAA Psymposium [ISSN 1193-2627] is the official newsletter of the Psychologists' Association of Alberta.

Canadian Publication Mail Product Sales Agreement #40020241.

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PAA Psymposium is published five times a year (January, March, June, September, November) 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.

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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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Mission & Vision

The mission of the PAA is to advance the science-based profession of psychology and to promote the well-being and potential of all Albertans. PAA & its members are recognized leaders in enhancing the psychological health of all Albertans

Psymposium

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Editor's Letter



"Failure is success in progress."

- Albert Einstein

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

To fail at something traditionally means that we were unsuccessful at accomplishing a goal. Failure, of course, is not something we intentionally seek out—it simply doesn't feel very good, and it is riddled with layers of emotions we can be curious about. We know, however, that failure plays an important role in development and resiliency. How we respond to failure can surprisingly benefit us in a number of ways if we take a moment to learn from it and then continue to move forward.

It feels risky to take a chance at something, to try something new, to move out of our comfort zone. We may reflect on our own past experiences or know of people who have failed at something at one point or another…JK Rowling is a famous example of how we can courageously move through failure. This author had 12 publications of the Harry Potter series rejected before moving on to sell more than 500 million copies. In an excerpt from a Harvard Commencement speech she states:

> *You might never fail on the scale I did, but some failure in life is inevitable. It is impossible to live without failing at something, unless you live so cautiously that you might as well not have lived at all—in which case, you fail by default.*
>
> *Failure gave me an inner security that I had never attained by passing examinations. Failure taught me things about myself that I could have learned no other way. I discovered that I had a strong will, and more discipline than I had suspected…*
>
> *The knowledge that you have emerged wiser and stronger from setbacks means that you are, ever after, secure in your ability to survive. You will never truly know yourself, or the strength of your relationships, until both have been tested by adversity…*

As a rock climber for over twenty years, failure is a regular part of the process. We reach for a difficult hand-hold with the utmost precision, but we also know that it's risky, and we could potentially slip. We would never make it to the top of a climb and value the sense of accomplishment if we gave up—we need to keep trying to get to the top which improves our **resiliency**. To fail at something in our life helps shine a light on what's truly important to us—it can help us in the **realignment** of our goals and values…to gather a new perspective. It encourages us to do a **reality check** as to where we are in this process, to question what went wrong and what went right, what would we change moving forward, what are areas of strength/areas to strengthen further, and how to improve the next time.

Maybe we can all use a good reminder now and then that failing at something has a positive, transformative side—it means we are continuing to learn. Perhaps we are contemplating a new role at work, acquiring a new skill, presenting at a meeting or conference, or writing that book you've dreamed about. No matter what the endeavour, if we change how we define failure in our own life, it has the potential to unlock greatness.

~Michelle

PAA Member and Psymposium Editor-In-Chief
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Exploring Assessment in Professional Psychology

Beyond Test Scores – Why Numbers Are Not Enough



"In this article, I will review some of the common pitfalls of numbers-based decision-making and offer suggestions to alleviate them."

By Dr. Michael Lee Zwiers, , R. Psych

From the early days of psychology's development as a field, psychometric testing has been an important part of psychological assessment. A client's responses to questions, ratings on test items, and performance on tasks can generate scores that allow us to compare them to other people. That's helpful. But what do the numbers tell us?

When I started in this field, I had to calculate item scores by hand, tabulate results, and look up norm-reference tables to summarize findings. We were closer to the data, so it was easier to appreciate how the test items contributed to the scaled scores. Over time, computer-based test administration and scoring has made the process easier by allowing clients to complete rating scales at their leisure, or examiners to simply sit the client at the computer and initiate automated testing. Computers now provide us with hyper-detailed results, comparison scores, and even offer interpretive descriptions. The convenience is appealing, and the breadth of detail is alluring. But we can easily be lulled into complacency and place too much trust in the test scores or a computer algorithm's cold interpretations. In this article, I will review some of the common pitfalls of numbers-based decision-making and offer suggestions to alleviate them.

Who is the Examinee?

It's handy when the test responder knows themself well and understands the test questions. Language, culture and interpretation, current emotional state, fatigue, attitude and motivation can all play a role in the way individuals respond to test items. If the person is completing a rating scale, where are they doing it? In a quiet space with time to reflect, or a public place with many distractions? On their coffee break at work, or after dinner when they are tired? Who might be looking over their shoulder to see their answers, or even influence their responses? And not everyone completes all the items properly. Which items did they miss or skip? What about responders who try to provide a rating in the space between "sometimes" and "often" rather than selecting one of the options. Then there was the client who simply scribbled overtop of his form: "*This is a government conspiracy*." That told me a lot more than any test item did!



Computerized Interpretations

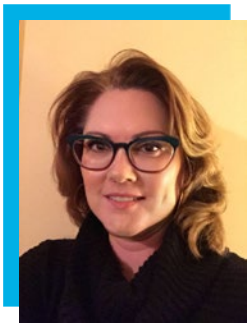
Computer algorithms can be used to generate hypotheses about the individual. But that's often as far as they can go. A hypothesis is not a sure bet. It's a conjecture. It's an opinion from the professional who developed the test or its interpretive system. From that perspective, it can be helpful. But the writer never met your client, the client who just completed the form. The client whose responses contributed to the test scores, which in turn contributed to the descriptive interpretation. It's important to be suspicious about the accuracy of any such interpretations. Consider them, but don't embrace them with an uncritical eye. And even if you like what they say, try not to use their wording verbatim. After all, it needs to be your formulation, not theirs.

Who Generated the Data?

Observer-raters are simply that. They may have the benefit of knowing the individual better than you; however, they rarely have the experience or expertise to judge items with a balanced eye. They don't always understand what the test developer was asking, so be careful not to put too much trust in test scores that emerge from their ratings. We've all seen what happens when we give the same test to three different observers (e.g., mom, dad, and the teacher).

For the full article, click here.

Notes from the CEO's Desk



"It's not simply the amount of time that you have, but how you spend it, that determines your happiness."

- Cassie Holmes, PhD, R. Psychologist

By Dr. Judi L. Malone, PAA CEO
Registered Psychologist (AB/AUS)

Recently, I was asked to complete an autobiographical statement. That organization provided one line to list volunteer engagement. I turned that into a paragraph, touching on voluntary roles I have had editing columns, serving as a manuscript reviewer, sitting on the board for 11 organizations (including the first PAA distinct board), and participating in various national and provincial taskforces, regional initiatives, committees and conferences. The fun part of this challenging summation was reflecting on the relationships, the learning, the challenge, and the rewards of being a lifelong learner and volunteer.

Did you know that 1 billion people volunteer globally? And that volunteerism is infused with values such as solidarity, reciprocity, mutual trust, belonging, and empowerment, all of which contribute significantly to quality of life?

Benefiting your Profession

Volunteering aligns with our professional code of ethics and responsibility to society. When you volunteer for your professional association, you help serve PAA's mission and support our vision. You expand our ability to gain a better understanding of our members, our communities, and those we serve. All while challenging yourself, meeting new people, making new friends, and furthering your career.

> Quality volunteers are the bricks that hold non-profit organizations together.
>
> PAA's success is thanks to member volunteers!

Benefiting You

Volunteerism builds our psychological health. It allows us to make specific contributions. It supports our altruistic motives and our desire for social connection. Volunteers experience less depression and lower stress levels and more physical and mental activity levels.

Plus, psychological research demonstrates that volunteers live longer than those who don't volunteer or who have selfish motives for volunteering.

In closing…

PAA needs **you** to help advance the science-based profession of psychology and promote the well-being and potential of all Albertans. Several exciting opportunities arise at different times of the year. Browse PAA's volunteer opportunities , explore our Volunteer Handbook, and reach out to learn more or to share with us why you volunteer.

Thank you every single PAA volunteer!

Judi

Apps & Secure Mail: Tools for Psychologists

Reap the benefits of your PAA membership by learning about tools that can help your practice. These newly released one-hour asynchronous webinars are free for members.



The Use of Digital Tools in Psychotherapy - with TherAppX

App and digital technology use has dramatically increased since the pandemic. This webinar describes digital tools and how they can be used in psychotherapy.

Presented by PAA affinity partner TherAppX

https://www.mypaacourses.ca/courses/the-use-of-digital-tools-in-psychotherapy



How and Why Psychologists Use Secure Email - with Brightsquid

This member webinar teaches viewers about secure messaging for psychology and why secure messaging is so important for client confidentiality and privacy.

Presented by PAA affinity partner Brightsquid

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"I WOULDN'T BE DOING MY PRACTICE ANY OTHER WAY."

- Nicole Sheldon, B.Ed, M.Ed, Registered Psychologist at Sheldon Psychology Group

Watch the "Secure-Mail for Psychologists" webinar in the PAA members section to earn CE. You will learn why Nicole uses Secure-Mail, the privacy risks Secure-Mail solves, and how it better prepares you and your clients for appointments.

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Board Notes



"We are often looking for engaged and dedicated volunteers to fill roles as Task Force members, PERT Facilitators, or CoP Executives."

By Claire Petersen, R. Psych

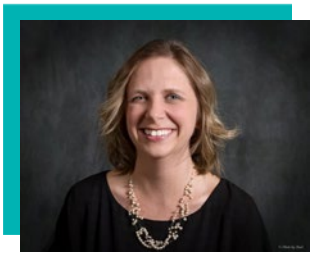
In years past, when I was asked how things were going, I'd often reply with "crazy busy." In a typical week, I have a lot going on. I am the director of a psychology department in a busy school division, I was teaching in a post-secondary program, and I am a mom to two energetic kids. I was the definition of burning the candle at both ends. The problem was, I loved all of these parts of my identity and despite any attempts to scale back, I found myself leaning into more. In 2018, an opportunity presented itself to run for a position on the PAA Board of Directors. I certainly wasn't looking to fill my calendar with more commitments, but I was drawn to the idea of collegialism, networking, and giving back to my profession. Once elected, I found myself saying "yes" to positions within the board, agreeing to sit as a committee liaison, and eventually moving into the executive. I planned to stay for two years, and I'm surprised at how quickly the fifth year is going by.

I have a difficult time thinking of this as a volunteer opportunity—I think because I get so much more out of it than I feel I'm giving up. The rewards and benefits vastly outweigh the time commitment. It fulfills a need to give back, it has allowed me to build relationships across the province, and it has provided me with a greater sense of connection and satisfaction within the profession. I think we can become overwhelmed with our sense of how "crazy busy" things are in our lives. For me, I found I needed to reframe my thinking, and I made a conscious decision to replace the word "busy" with "full." My life is "full" of all of these wonderful opportunities I've chosen for myself. Each of these things fills my bucket (as my 8-year-old would say) and adds something to my life; not detracts in the way busyness often does. My volunteer experience with PAA has been a wonderfully fulfilling endeavor.

More than anything, I hope that by sharing my experience of volunteering, others may find space in their full lives to give back in some way. Volunteering within PAA is highly rewarding; your time, effort, and leadership are the heart of our association. It's also an excellent way to meet the Professional Engagement component of our Continuing Competence Program. I'd love to invite you to consider getting involved in some way. We are often looking for engaged and dedicated volunteers to fill roles as Task Force members, PERT Facilitators, or CoP Executives. These are pivotal roles that support the mission and vision of PAA. If you have an interest in joining the Board of Directors, any of our current members would be happy to share their experience with you. I am truly grateful for this opportunity to serve our organization and on behalf of the Board, I send sincere thanks to our current volunteers.

Claire Petersen, R. Psych, PAA Board President

Advocacy Corner



"We are the ones who ultimately drive the work of the PAA."

By Dr. Shelagh Dunn, R. Psych

"*This is a big issue for psychologists, why doesn't the PAA do something about it*?" I've noticed that many times when psychologists are talking about some of the big issues we face, one of us will say this. And there is certainly no shortage of big issues: access to mental health treatment, working with insurers, recognition of psychologists' skills, issues in supervision, the need for critical reflection on psychology's role in perpetuating stereotypes or colonialism.

When I hear this question, or when I've asked it, I don't think of it as a criticism of the PAA, I think of it as a vote of confidence in the collective power of psychologists. I think it is a vote of confidence to believe that our professional organization can work on and fix problems.

However, sometimes I think psychologists forget that we are the PAA. It is a member-driven organization that we fund with our membership, we drive with our board, and we shape with our voice and our volunteer support.

Sometimes when I have said "*Why doesn't the PAA do something about this*?" it's also because I want there to be a group of people whose job it is to act on a problem. I find it hopeful that there are dedicated people to work on important issues, who can be relied upon to know how to get things done.

And here's what I've come to learn. We are those people. As members, if we want to fix something, we can and should expect our organization to work on the problem—and we are the ones who ultimately drive the work of the PAA.

Here are some concrete ways for psychologists to advocate *through* PAA:

1. Work with the tools already available to drive conversation and momentum at a grassroots level. I asked our CEO, Dr. Judi Malone, for some thoughts on how to inspire members to share their ideas and she gave great examples of psychologists using the online Communities of Practice in our member portal to drive conversation. She gave the example of members who advanced the importance of mentorship and supervision, which led to work on a Supervision Handbook. Community of Practice executives meet regularly with PAA administration so these discussions can drive concrete action.
2. Attend an AGM – this is a formal avenue to ask questions and to bring ideas forward to the PAA.
3. Write to PAA staff to share your thoughts and concerns. It's most useful if you're prepared to talk about potential solutions to the problem, and even better if you have a sense of how you can help.
4. Write to the president of the PAA, who can bring issues to the board at their discretion. The board can also table decisions and action items, and because there is always a lot to think about; your issue is more likely to get attention if it is coming from a group of member psychologists rather than one individual.
5. Vote in board elections – this may be obvious, but it's perhaps your most direct way to inform the work of the PAA board.
6. Consider running as a board member in an upcoming election. The work of the PAA board is vital to our organization. The board shapes the vision and work of the PAA, and your voice could be just what we need!

I hope that this list has you thinking of how the PAA isn't an organization apart from us, it is us, and as members, we can use our voices, our passions, and our time to contribute to the collective power of our professional organization. And a hearty thank you to everyone who has raised their voices, volunteered their time and represented us on our board.

Anti-Racism and Psychology

Anti-Racism Work is Love in Action



"It has taken years to learn and unlearn about systemic racism, internalized racism, and how to continuously reflect on my biases."

By Gina Ko, Ph.D., R.Psych

I am a Registered Psychologist and a Podcast Producer and Host, Against the Tides of Racism (https://www.againstracismpodcast.com/). I have a private practice as a counselling psychologist in Alberta. I see many racialized clients using a culturally responsive, socially just, anti-racist, and anti-oppressive lens.

One of my podcast guests shared that anti-racism work is **love in action**. I resonate deeply with this sentiment. I grew up speaking Cantonese and was a language and cultural broker for my grandmothers, aunts, and uncles. They helped my single mother raise my siblings and me; I am most grateful to have extended family in my life. Over the years, I have witnessed them being treated with sternness, discrimination, prejudice, microaggressions, and racism. Examples include being in professional spaces, with service providers only looking at me when my aunt needs the service. We get strange stares when we speak Cantonese on the bus. We see people from the dominant group given tables even though we were first at the restaurant. My uncle would ask me to make phone calls for his business, but people would not take me seriously. We would be told to go back to our country. The list is endless. Relatedly, I have encountered many moments of being judged harshly for my skin tone as I have darker skin (I love my skin); colourism is entrenched in racism whereby people with fairer skin get preferential treatment (Grant, 2020). Colonialism and white supremacy have infiltrated systemic beliefs that white and fair are better. It has taken years to learn and unlearn about systemic racism, internalized racism, and how to continuously reflect on my biases and assumptions by challenging taken-for-granted knowledge. Consequently, I have grown to care about fairness and justice.

Moreover, experiences of racial trauma or race-based traumatic stress (RBTS) has shown to cause chronic health problems such as long-term stress, hypervigilance, depression, anxiety, nightmares, flashbacks, and less hope for the future (Jagoo, 2020). Hence, racism and trauma are closely correlated. When love and kindness are used to care for everyone, not just someone who looks like you, with a similar educational and language background, the world can be a more welcoming and accepting place.

In my practice, clients listen to my podcast and resonate with many messages such as "it is time to move beyond performative action to real action, finding community, walking in pairs, leaning into discomfort, spreading kindness, building bridges," and much more. It is incredible when such calls to action impact clients' lives in profound ways. There is hardly a more rewarding and meaningful moment when clients share how such messages are heartwarming, growth-inspiring, and hopeful. There would be times of clarity, validation, gratitude, tears, and even laughter. Love fills the room. "Anti-racism work is love in action" is absolutely fitting! References avaialble on request.

New Recommended Fee Schedule–Jan 2023

The following recommended fee schedule changes are effective January 1, 2023.

Changes are made to the recommended fee schedule only after extensive research, consultation and board deliberation. These are recommended for members in private practice, not required.

Individual Therapy/Assessment	$220
Couple/Family Therapy/Assessment	$220
Group Therapy (per person)	$65
Custody/Access & Legal/Forensic Assessment	$330
Expert Witness Testimony (half-day minimum fee)	$1,300
Expert Witness Testimony (full-day minimum fee)	$2,600
Consultation/Corporate Services (half day)	$1,000
Consultation/Corporate Services (full day)	$2,000

» Report writing, telephone consultation, letters, and form completion are 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, and the like calculated at one-fifth the hourly rate for every 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.

Psymposium Trivia



The question from our 2022 September issue:

Q: This sacred place gets its name from its ancient rock art. Which provincial park is this?

A: Writing On Stone Provincial Park

Thanks to PAA member **to Danille Lazzaretto-Green** for submitting the correct answer!

CoP and Task Force Leadership

Thank you to all PAA members taking an active role in our Task Forces and Communities of Practice (CoPs), including the following members in leadership roles:

Task Force Chairs

Awards Adjudicating Committee
Chair – Dr. Judi Malone

PAA Racism in Alberta Psychology Task Force
Co-Chairs – Mateo Huezo & Caryn Tong

Technology in Practice Task Force
Chair – Dr. Michael Stolte

PAA – CAP Joint Task Force: Alberta's Truth & Reconciliation Response
De facto Chair – Dr. Judi Malone

PAA CEO Evaluation Task Force
Chair – Claire Petersen



CoP Executive Teams

Supervision CoP
- Chair – Dr. Terilyn Pott
- Moderator – Laura Friesen
- Publications Officer – Jessica Heil
- Engagement Officer – Aimee Reimer

Social Justice, Equity & Diversity CoP
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Engagement Officer – Shandra DeClerck

Public Education & Workplace Wellness CoP
Chair – Inverpal Braich

Rural & Northern Psychology CoP
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- Vice-Chair – Kirsten Timpany
- Moderator – Dr. Terilyn Pott
- Publications Officer – Laurelle St. Jean

Indigenizing Psychology CoP
- Chair – Michael Yankowski
- Vice-Chair – Jasmine Fouillard
- Moderator – Mark Nicoll
- Moderator – Kirsty Keys
- Publications Officer – Danae Laut

Clinical/Counselling Psychology CoP
- Chair – Inverpal Braich
- Vice-Chair–Dr. Zoey Zhang

Come Collaborate!

Have you explored Collaborate yet? Collaborate is our online community for discussions, libraries of shared resources, events, and so much more. The community space has been re-vamped, and you can look forward to our new Volunteer and Mentor Match programs coming this winter. Connect with your peers in a secure members-only space created just for you!



Need more members to join your discussion? Have you shared an article or other resource and want to spread the word? Welcome to CoP Highlights, your opportunity to direct *Psymposium* readers to your Community of Practice (CoP) to find a relevant discussion, article, link, invitation, or question. Have a CoP highlight to share? Email jessica@paa-ab.ca with your highlight and the name of your CoP.

FEEDBACK FROM PAA SUMMER STUDENTS 2022

Best Learning	• Learned about the profession • Team work
Most Rewarding	• New website • Helping staff acquiring skills
Contribution to Psychology	• Resources library • Webinars • Public education
Academic Alignment	• Psychological "behind the scenes" • Private practice
Most Challenging	• Working on the website • Roles switch • Learning the staff's tasks
Values Alignment	• Advocating for psychology • Public education • Team collaboration
Career Alignment	• Reinforced career decisions • Psychology as a career
Comments	• Inclusive, supportive workplace • Everyone enjoyed coming to work

2022 PAA & CAP Joint Town Hall Dates

Town Halls offer members the opportunity to connect with PAA CEO Dr. Judi Malone and CAP CEO Dr. Richard Spelliscy. PAA and CAP join in hosting town halls in different communities in Alberta throughout the year.

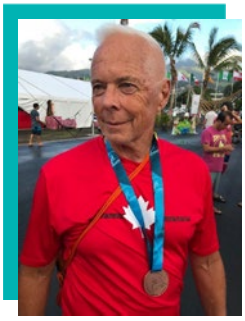
CONNECT WITH PAA AND CAP!

LOCATION:
Red Deer
Lloydminster

These dates are subject to change. For the most up to date information, visit our Events and Webinars page.

Ethics – The Impossible Imperative

The Ethics of Supervision



"Don't act with a supervisee any differently than you would with a patient. Win them to the task."

By Jon Amundson, Ph.D., R. Psych

Ethics in supervision consists of making sure the supervisee attends to Codes, Standards, and Guidelines related to professional practice. These 'rules' and 'regulations' are foundational components of the discipline. What we speak of today is ethics in conducting supervision: simple ethical/'meta-rules' for supervisors in their obligations to those they train.

First, the relationship between yourself and a supervisee is a professional relationship. You observe the same standards that you would with any other recipient of your services!

I once had a respected researcher say to me that because of their status in the world of research, "who would be better at teaching students?" Ah, someone who understands the psychology and skills associated with teaching? Can you show respect for the recipient of your services-consistent with Codes-and demonstrate that what you are doing is a supportable service?

Second, there is also a structural, contractual aspect to this relationship. You have negotiated, laid out, and signed a contract. Even in less formal supervision or consultation, a mutual obligation exists, and must be honoured!

A supervisee called and said their supervisor had presumptively announced that supervision was taking too much time and so they were quitting, as if this was a one-way street without contractual, interpersonal or ethical dimensions. Walk in with your eyes open and walk out, when necessary, with integrity.

Third, the same human relations skills you would use with a patient in the consulting room ought to extend to the supervisee. This means taking responsibility for developing confidence, alliance, motivation, and providing useful feedback to the supervisee.

The most interpersonal complaints I receive from supervisees concern a cavalier, "my way or the highway" approach supervisors often fall into. This exploitation of the power differential leads to reactance. Hey! Don't act with a supervisee any differently than you would with a patient. Win them to the task.

Fourth, these skills should be reflected in your conduct and modelling of what professional practice should look like. They see us as who they should be, or in the face of bad supervision, what they should reject. They will incorporate us into their identity or reject incorporation, and either way not always in their best interest.

A small but robust number of supervisees in APA/CPA-recognized programs leave the profession directly because of their supervisory experience. And 50% report that supervision was a negative experience. Which cohort do you want to be in?

Fifth, this reaction to our presence—too hot/too cold in identity—is in opposition to effective supervision where the goal is acculturation. *Acculturation* is the successful interface between their personal values, life experience, and character and that of professional psychology. This involves less acquisition of a particular model or theory affiliation than development of their own way of being within the confines of an approach and more importantly, capacity for professional judgement. As a Hawaiian elder once said to me, "we have to help the young ones grow for themselves."

The acculturation model of supervision is brilliant. It speaks to four quadrants: one where the supervisee prioritizes their values higher than those of the profession:

- 'these codes are inconvenient and meant for others';
- the 'true believer': the profession higher than their values
- 'yes/no/maybe?': no values either way
- 'I speak me-and-you fluently': where values on both sides are held in a dynamic and growth-promoting relationship

Sixth, finally, their own unique emergence, where personal and professional values sponsor professional judgement and the emergence of far-reaching oversight.

The Universe Within

Choosing Contentment



"Contentment has more to do with letting go and not needing, than with acquiring or achieving."

By Gwen Randall-Young, R. Psych

I have recently begun to wonder if we have created a culture of chronic dissatisfaction. It is unsettling to realize how many of us are continually striving for more. Yes, there are those materialists who must have the newest, the best, the most. We may feel smug if we have evolved beyond that form of ego gratification. But wait a minute.

When we are content, we are not yearning, wishing, or striving for anything. Contentment implies satisfaction: a mind at ease. We are at peace with what is. And when are we most content? Is it when we have acquired many things? Is it when we have made it to the top? Does it come from a weight loss program, or winning the game? Such things may bring gratification, but contentment has more to do with letting go and not needing, than with acquiring or achieving.

Our deepest sense of contentment comes in those times when we have forgotten about all the things we want and are just experiencing the moment. When we stop thinking about ourselves and just feel into the moment, we transcend that sense of separateness, and however briefly, we 'merge', like that drop in the ocean, with something much bigger. In that moment, it is all there. There is absolutely nothing outside of ourselves towards which we might strive. Our highly developed left brains may tell us it cannot possibly be that simple.

We have been taught, since kindergarten, that the right answers reside outside of our own consciousness, and that learning means filling our minds with that which is consensually validated. No wonder it is hard for us as adults to suddenly do a complete shift and consider that the answers to life's most complex and seemingly unanswerable questions, reside inside of us, and not out there somewhere.

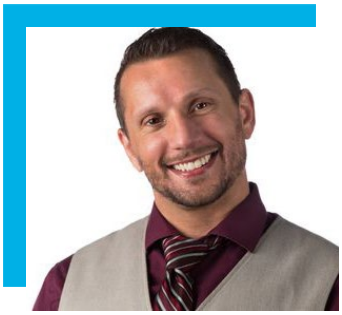
Dare we suggest that heaven and hell reside there too—because there is no in here /out there, other than an illusion created when we evolved beyond the intuitive right-brained early humans, and analyzed ourselves right out of the loop? What an incredible amount of energy and thinking it takes to maintain that illusion! Did we really need quantum physics to 'prove' that we, like the mountains, rivers, birds, rainbows, stars and galaxies are part of an integrated, living, breathing oneness? How could we possibly be separate?

We can take a deep breath, relax our bodies, and surrender in the realization that we do not need to create our own separate world, and then carry it on our shoulders. We will eventually have to put it down anyway, so why not do it sooner, and savor the lightness of just 'being?' This does not happen by trying or striving. It is a shift in perception and can happen in an instant. When we align with our intuitive knowing, we go there instantly. The trick is staying there.

Gwen Randall-Young is an author and award-winning psychologist. For permission to reprint this article, or to obtain books, CDs or MP3s, visit www.gwen.ca. Follow Gwen on Facebook for inspiration.

A Book Review

Ethics for the Practice of Psychology in Canada



"Knowledge alone will not automatically create more ethical practice by psychologists."

Reviewed by Chris Shorrock, R. Psych., CSAT

It is a privilege to have not just Canadian authors, but especially an Albertan updating and teaching this important topic and revising this book. In conversation with my peers about Continuing Competence Plans, it seems many have specific training and plans to cover the three additional areas, but can struggle with how exactly to complete the 4th: *Ethical & Jurisprudence Informed Practice*. I would highly recommend reviewing this book as part of that plan.

It is worth reviewing the chapters to give an outline of the contents within:

- Understanding Ethics
- Making Ethical Decisions
- Meeting Professional Standards
- Incorporating Legal Expectations
- Obtaining Consent
- Protecting Confidentiality
- Helping without Harming
- Maintaining Professional Boundaries
- Appreciating Diversity
- Being Socially Responsible
- Conducting Research

Some of the chapters seem very straightforward, such as protecting confidentiality… well of course we protect confidentiality, right? The text, however, does an excellent job of specifying some important terms, and their distinctions, such as *confidentiality, privilege,* and *privacy*. While knowledge alone will not automatically create more ethical practice by psychologists, taking the time, effort and energy to review (and hopefully discuss) these topics is likely to help!

Each chapter begins by presenting a few case studies that apply to the chapter topic; they are sometimes extreme presentations with high conflict. Per being a text on ethics, I did not necessarily expect the "right answers" to be given in the dilemmas. However, it would help for the *best* answers to be reviewed and why, similar to the EPPP ethics questions. I can appreciate, at least in a utilitarian manner (possibly a deontological one), that it is better for psychologists reading this book to formulate for themselves *how* to think ethically as opposed to simply knowing the best answers, but my (mild) struggle remains. I would especially appreciate the author to be so bold as to share what he would do in the situation and why. Needless to say, I am especially excited to review some of these predicaments with my peers and to have exactly that kind of discussion.

While I believe this book to be extremely valuable in itself, I think the sharing and even debating the contents with other Alberta psychologists to be the truly ethical thing to do. This is not just for the requirements of knowledge, skills, and judgement, but also *connecting* as peers and *supporting* each other through the process. I urge you all to choose those peers carefully to ensure you do have a sense of being challenged to be your very best and feeling supported. It is a truly special relationship wherein you can even disagree on an important ethical dilemma yet share differing perspectives in a respectful and caring way to leave both (or multiple) parties respected and confident.

Truscott, D. & Crook, Kenneth H. Ethics for the Practice of Psychology in Canada, 3rd edition. University of Alberta Press: Edmonton, AB. 2021.

Alberta Psychology in the Media

Media Engagements

July – Sept 2022

25 Media Pieces

VIA

- 630 Ched
- CTV
- Medicine Hat News
- CBC Calgary Eyeopener
- CBC North (Prince George BC)
- Global Morning Calgary
- CBC PEI
- Neighbours of Summerside

THANKS TO

- Dr. Ganz Ferrance
- Dr. Megan McElheran
- Dr. Brent Macdonald
- Dr. Linda Hancock
- Dr. Judi Malone

ON TOPICS INCLUDING

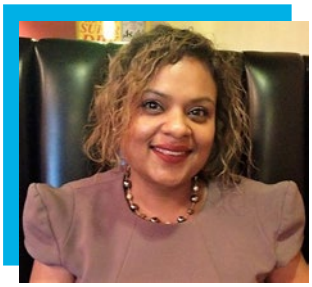
- Beating Back-to-School Stress
- 4 Tips for Teaching Good Values to Your Kids
- "Quiet Quitting"
- Summer Seasonal Affective Disorder
- Change and Rest
- The Mind, Body Connection
- Blessing Galore!
- Climate Change Stress
- Stress Relief

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Innovative Practices in Psychology

Hakomi Therapy



In this edition, the Innovative Practices in Psychology column explores Hakomi therapy, an experiential model of therapy through a discussion with practitioner Dr. Angela Grace.

By Dr. Naheed Jawed, R. Psych

What is Hakomi therapy?

Hakomi is a form of experiential body-centered psychotherapy that integrates Eastern principles of nonviolence and mindfulness. Hakomi allows the therapist and patient to access early experiences that unconsciously guide people's behaviours, beliefs, relationships, self-perceptions, sensitivity, and attunement to others. Instead of using mindfulness solely as an adjunct to therapy, a Hakomi session is primarily conducted with the patient in a state of mindfulness.

Hakomi is relevant for individuals experiencing disorders with body-related issues, as well as mental disorders with limited treatment response to traditional talk therapy. Patients report improved general well-being, reduced physical tension, and enhanced activity levels.

What are the tenets of Hakomi therapy?

The primary tenets of Hakomi are mindfulness, nonviolence, mind-body integration, unity, organicity, and loving presence. Hakomi uses mindfulness as an approach to encourage clients to study and experience the root causes underlying habitual feelings, thoughts and behaviours.

Hakomi is based on the principle that the client is the expert over their own experience, and Hakomi practitioners gently facilitate the therapeutic process and support the client wherever the client is at in the moment. This allows the client's defenses to soften so they can access their own inherent wisdom.

Humans embody their inner experiences. The principle of mind-body integration affirms the neuropsychological approach that the mind and body influence how we experience and express ourselves in life. Hakomi encourages clients to explore somatic material such as habitual movements, gestures, posture, and body experiences in order to reveal core experiences and beliefs.

People are living, organic systems composed of interdependent parts that create a whole – physical, mental, emotional, interpersonal, familial, cultural, and spiritual. When these systems are out of balance, there is a sense of dis-ease and incompleteness. Hakomi views healing as a process of continually desiring to experience a sense of harmony and wholeness. In Hakomi, the therapist trusts that through the ongoing practices of mindfulness and mind-body integration, the therapeutic process will help the client naturally and organically unfold towards wholeness.

A foundational principle of Hakomi is the therapist's orientation towards loving presence. It is our role to hold the space for all of our client's experiences, trusting that the therapeutic process will evolve as it needs to. This does not mean there are no boundaries in Hakomi therapy, but rather we accept the client's process and explore the behaviours and boundaries with curiosity.

Which types of patients would be most suitable for Hakomi therapy?

Hakomi is effective for both brief and long-term therapy with individuals, couples, groups, and organizations. Although Hakomi is oriented towards mindfulness and loving presence, clients with significant thought disorders and personality disorders whose lives have become very disintegrated may struggle with mindfulness and mind-body integration, thus indicating a different approach. Hakomi is best suited for patients ready to slow down and take full responsibility for their own lives through exploring their inner experiences and orienting towards the organic and holistic unfolding of their lives.

Continuing Professional Development

Trauma & PTSD in First Responder Populations



Edmonton, 17 November | Megan McElheran, Ph.D. | 5 CE Credits

The workshop will address those with an existing knowledge base who are interested in developing greater clinical skills and understanding related to the first responder population.

Register

EPPP Prep: Demystifying Registration as a Psychologist in Alberta





Viritual, 20 January 2023 | 6 CE Credits

Preparing to pass the EPPP and Register as a Psychologist in Alberta–with Dr. Thérèse Chevalier

Mastering Learning Strategies: Memory Boosting Learning Strategies for the EPPP–with Michele Pentyliuk, M.Ed.

Register

Evidence-Based Practice in Psychology



Edmonton, 27 January 2023 | Cody Guy House Psy.D. | 6 CE Credits

Three major aspects of evidence-based practice will be emphasized: (1) empirically supported treatments (e.g., manualized and principle based protocols), (2) evidence-based psychotherapy relationships and responsiveness, and (3) routine outcome/progress monitoring.

Register

Primers

One-hour recorded overview of the topic. Watch anytime, anywhere ($40 + GST).

Assessing Perinatal Mental Health–*Kristine Aanderson, Mallory Becker and Dr. Gina Wong*

Psychedelics and Psychedelic-Assisted Therapy–*Megan McElheran, Ph.D.*

Prescribing Service Dogs or Emotional Support Animals–*Kristine Aanderson*

The Erupting Addictions Pandemic–*Dr. Kevin Alderson*

The Game of Life: An Introduction to Using Basic Sport Psychology Principles in Clinical Practice–*Dr. Caelin White*

Family Restructuring Therapy–*Dr. Stephen Carter*

Trauma & PTSD in First Responder Populations–*Dr. Megan McElheran*

Psychology of Cannabis Addiction–*Dr. Jonathan Stea*

Preparing for Cannabis Legalization: A Psychologists' Evidence-based Guide–*Dr. Igor Yakovenko*

Asynchronous Webinars

The Best of What We Know About Addictions Counselling Today–Dr. Kevin Alderson, R. Psych.

Starting and Operating an Independent Professional Practice in Psychology–Dr. Stephen Carter

The Weight of the World: Psychologist's Role in Addressing Client's Weight-related issues–Dr. Angela Grace

Indigenous Awareness Training–Indigenous Awareness Canada

New Kids on the Block
A Column for Early Career Psychologists

Evidence-Based Practice and Practice-Based Evidence: Implications for Psychological Client-Care



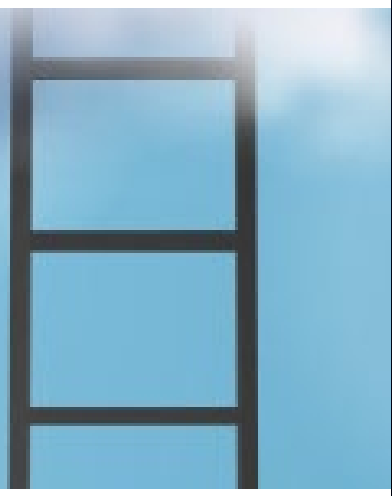
"Researchers and psychologists should work collaboratively toward the goal of best practices for all diverse clients."

By Dr. Sandra Dixon, R. Psych., Associate Professor

In this article, the author argues that evidence-based practice (EBP) and practice-based evidence (PBE) models/approaches should work together and move towards complementarity because they both have great value in research and practice.

In the context of this article, complementarity is drawn from Ellis's (2015) work which refers to "ways in which two different approaches to conducting a research synthesis can in combination provide a more complete, unified explanation of a phenomenon than either single approach" (p. 285). In other words, a practice should inform research, and research should inform practice. Further, both models provide a unique lens through which to value psychological client-care and neither element is complete on its own.

From the above perspectives, researchers and psychologists should work collaboratively toward the goal of best practices for all diverse clients. The objective of this article is to emphasize the need for psychologists to be intentional in their work as they strive to uphold ethical standards in EBP and PBE. Click here to access the full article.



Supervision Column

Deliberate Practice: A Practical Example



By Jeff Chang, Ph.D., R. Psych

" It is impossible to focus on specific skills without seeing actual performance."

In my last column, I advocated for the need to base your supervision practice on live and video observation. After all, one cannot gain competence in a sport or a performance discipline without feedback based on direct observation. It is impossible to focus on specific skills without seeing actual performance. As Rousmaniere (2016) states, "[Discussing] a clinical case via notes or memory is like getting an art review by verbally describing your art instead of letting someone see it." What are the pragmatics of implementing *deliberate practice* into your supervision work?

First, have your supervisees record their sessions. But don't simply watch the session, pointing out what you thought was useful and not useful (although this is better than not using video at all). Invite your supervisees to bring video of cases where they feel "stuck."

Be on the lookout for telltale signs in both the supervisee and their client that the supervisee's *inner skills* might be taxed beyond their threshold. Rousmaniere (2016b) describes how his own supervisor invited him to attend to his own responses to this stuckness by viewing the recording with the volume low enough to hear that the client was speaking, but not hear the content. With his supervisor's help, Rousmaniere realized he was anxious and doubted his effectiveness as a therapist.

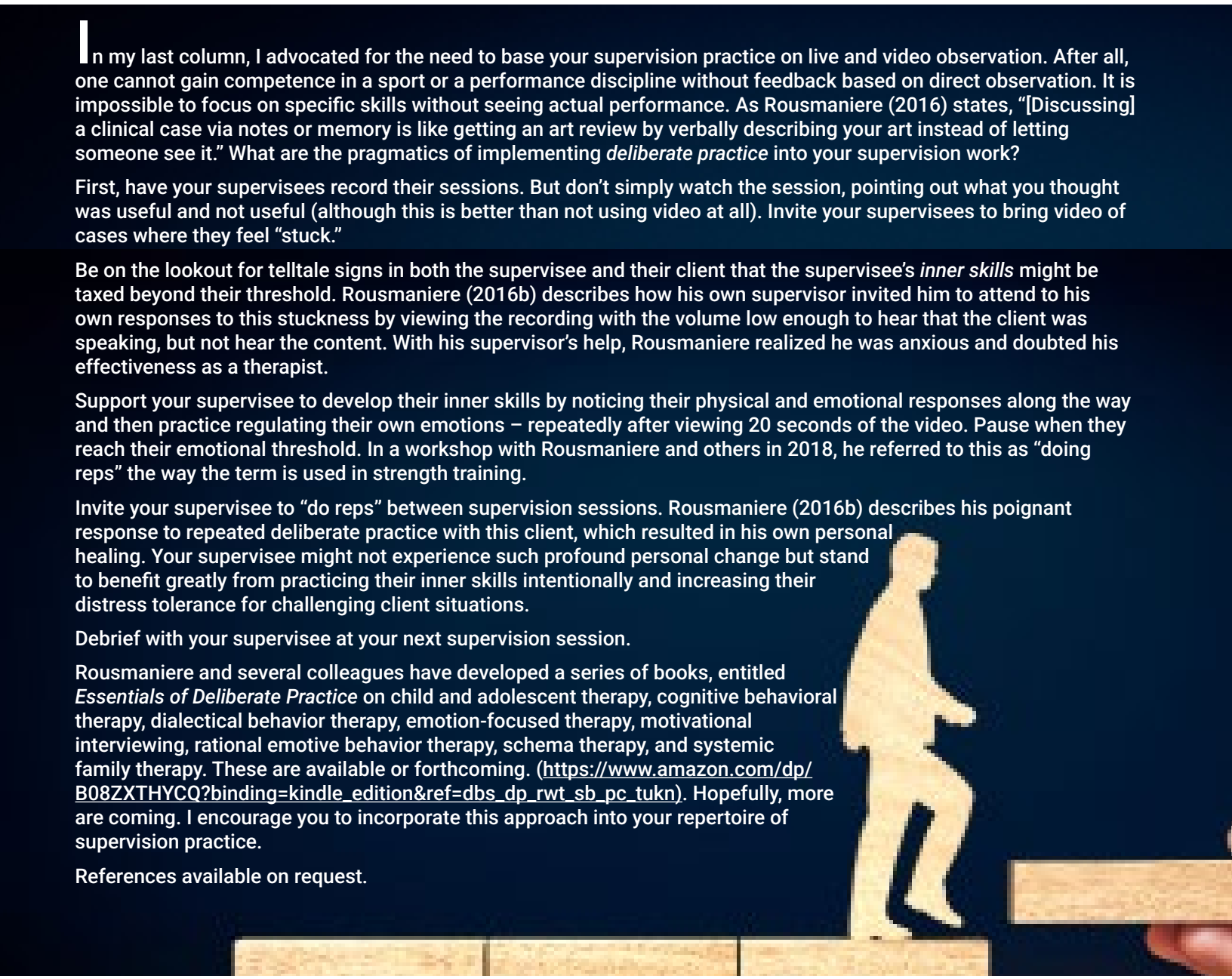
Support your supervisee to develop their inner skills by noticing their physical and emotional responses along the way and then practice regulating their own emotions – repeatedly after viewing 20 seconds of the video. Pause when they reach their emotional threshold. In a workshop with Rousmaniere and others in 2018, he referred to this as "doing reps" the way the term is used in strength training.

Invite your supervisee to "do reps" between supervision sessions. Rousmaniere (2016b) describes his poignant response to repeated deliberate practice with this client, which resulted in his own personal healing. Your supervisee might not experience such profound personal change but stand to benefit greatly from practicing their inner skills intentionally and increasing their distress tolerance for challenging client situations.

Debrief with your supervisee at your next supervision session.

Rousmaniere and several colleagues have developed a series of books, entitled *Essentials of Deliberate Practice* on child and adolescent therapy, cognitive behavioral therapy, dialectical behavior therapy, emotion-focused therapy, motivational interviewing, rational emotive behavior therapy, schema therapy, and systemic family therapy. These are available or forthcoming. (https://www.amazon.com/dp/B08ZXTHYCQ?binding=kindle_edition&ref=dbs_dp_rwt_sb_pc_tukn). Hopefully, more are coming. I encourage you to incorporate this approach into your repertoire of supervision practice.

References available on request.

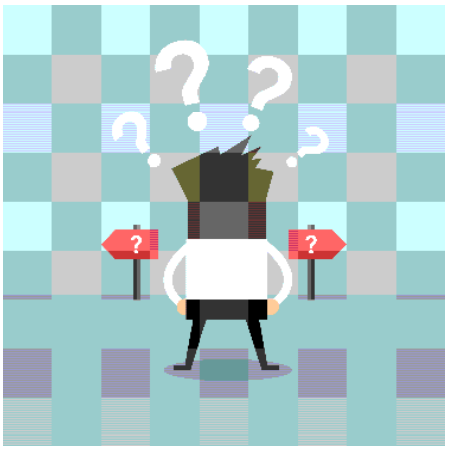


What Ethical Challenges Do Psychologists Face?

Is PAA's Practice Advisor Program Helpful in Addressing These Needs?

PAA is committed to researching and evaluating member services for ongoing improvement.

PAA interns **Kira Brunner** and **Jessie Swanek** researched our high-demand Practice Advisor program in Summer 2021 and presented the findings as part of a symposium on professional ethics at the Canadian Psychological Conference in June 2022, alongside Dr. Judi Malone and Dr. Ann Marie Dewhurst.



Kira Brunner coded and condensed data from PAA's Practice Advisor program, complaints made via the College of Alberta Psychologists, and claims made through BMS insurance.

Top categories of advice requests through PAA were competence and self-knowledge (18.33%), privacy (18.33%), and confidentiality (13.33%). Similarly, complaints made through CAP most often related to competence and self-knowledge (29.93%), confidentiality (11.68%), and avoidance of conflict of interest (10.95%).

Legal expense claims through BMS were mostly related to objectivity/lack of bias and competence and self-knowledge (37% and 25%, respectively), while top civil claims through BMS were categorized as 'other' (32%), and competence and self-knowledge (28%).

Interestingly, ethical concerns are typically more frequent under CPA's Code of Ethics principle I, then II, then III, then IV, validating its hierarchy. We also surveyed our membership on ethical values – there appeared to be a great need for further peer consultation opportunities, and/or formal course work or professional development. For the full report, please contact me at kirabrunnerpaa@gmail.com.

Jessie Swanek evaluated the Practice Advisor program to learn what support could be added. This program appears to be unique for psychology associations. Advisors, members, and PAA staff find this to be a helpful service, but members indicated a need for further clarity about accessing this program, steps, and follow-up. The areas with the most inquiries were records, consent, and multiple relationships/dual roles, based on a comparison of the PAA Practice Advisor Program 2020 Annual Report and the College of Alberta Psychologists.

Program data shows that 69% of queries are answered by an advisor within 1 day, and only 7 queries were not handled by an Advisor. Six recommendations were made to enhance the program, including building a community of practice for the Advisors, clarifying this program, ensuring access was only through one route, adding a member feedback form, and identifying alternative programs. This evaluation also underscored the need for peer consultation or other programs addressing ethics or practice queries, as well as clarifying CAP's Professional Guidance Program. The full report is up on the website, here.

Jessie Swanek, MA Carleton University, 2021 PAA Student Intern

Kira Brunner, BA/BSc McGill University, 2021 PAA Summer Research Intern

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Technology in Practice Task Force

Reflections on Telepsychology and Inter-jurisdictional Practice



By Dr. Michael Stolte

"Psychologists are faced with increased demand to be available across provincial boundaries."

Technology continues to change existing norms amongst many professional groups. One challenging trend is the increased demand for telepsychology—particularly across jurisdictional boundaries. As provincially regulated professionals, psychologists are faced with increased demand to be available across provincial boundaries, though to do so can be difficult as each province has its own application and approval process. This can be a challenge, as in some situations, psychologists are put in the difficult situation of navigating compliance with regulatory standards and the ethical requirements of being responsive to client needs.

Let me provide a practical example. John, an oil field worker who lives in Newfoundland and works on a rotating work schedule in Northern Alberta, is experiencing depression. Through his work employee assistance program, he accesses a psychologist via telepsychology and the evidence-based and professional therapy he receives is effective. However, he would also like to involve his spouse in some sessions, as his spouse sees the depression impacting his home and family life and would like to be included. When he is back at home in Newfoundland, John makes the request to include his spouse but is somewhat taken aback when he is told that his treating psychologist is unable to provide a psychological service in that province, despite John's counselling access experience being nearly identical via a video link. The psychologist attempts to make a local referral, but John is frustrated. His interpretation is that the psychologist is inflexible and not supportive of his needs, despite reassurance to the contrary. John quits therapy in anger.

According to the College of Alberta Psychologists Telepsychology Guidelines (2018) "Registered Psychologists from Alberta offering services to clients outside the province must be registered with the regulatory body in the location in which the client is receiving services and where the psychologist is providing services (if required by the distant jurisdiction)" (p. 4). This is an understandable practice limit, but it does create an ethical and legal conundrum for psychologists that cannot always be easily resolved.

One novel solution that has emerged in the United States is PSYPACT—an inter-jurisdictional agreement between state regulatory authorities that, with additional approval mechanisms and fees, allows for psychologists to practice across state boundaries that have signed onto the agreement (https://psypact.site-ym.com/). Psychologists can apply for a temporary practice permit (limited to 30 days) or can apply for an "e-passport" that allows for the practice of telepsychology across state boundaries. At the time of this writing, 33 states had enacted PSYPACT. There is a centralized application and approval process with flow charts identifying requirements, scope of authorization, time and practice limits, renewal processes, and fees.

Though not a perfect solution, I would encourage our regulators to identify if something similar could be achieved in Canada, perhaps using the existing registry on The Canadian Register of Health Service Psychologists (https://www.crhsp.ca/) as a starting point. We owe it to John and others in similar situations to figure out expedited models for how to do this in the expanding landscape of telepsychology.

Disclosure: I am a full member of CRHSP.

Annual Report Now Available Online

The 2021-2022 PAA Annual report is now available on the PAA website.
https://psychologistsassociation.ab.ca/about/annual-reports/

