Reflections From My First Few Months as President

It has been a busy few months for me as your “new” president. I’ve learned what goes into planning and implementing a midwinter meeting. I’ve been tutored by the program committee on how to set the “tone” for our next annual conference. I’ve developed sufficient proficiency in committee assignments to understand our financial status, select the 2010 “Group Psychologist of the Year” and participate in the required affairs of APA. Indeed, as I reflect back on the past few months of activity I must admit that I was somewhat naïve to all the presidential responsibilities when I “threw my hat in the ring” as a candidate a few years ago. All of the activities that I have participated in—and I am sure I have missed a few—have given me a greater appreciation for my predecessor’s accomplishments. Thus, my first item of business in this column is to thank Bob Conyne for his leadership in 2009 as well as past presidents for the time and resources that they invested in building our Division to its current level of maturity. Bob’s impressive service to our Division is partially reflected by the long list of successful initiatives undertaken during his tenure (e.g., strategic planning, bylaw changes, new funding initiatives, infrastructure clarity, GPRN and a host of others). Plus, he has been a great mentor during my year as “president-elect” and the past few months. So, for our Division, Bob, I’d like to say Thank You!

Now to a brief update from our midwinter meetings. Jennifer Harp, our highly capable and dedicated secretary has provided a summary of the minutes from the midwinter meeting in this issue of the newsletter so I don’t want to steal her thunder, well, at least not all of her thunder. Nonetheless, I’d like to emphasize a few insights and developments that caught my attention while I prepared for and participated in our midwinter meeting.

Dedicated board and committee members: As you will read later in our Treasurer’s report, our Division is on sound financial footing and this is good news, particular in today’s economy. However, from my perspective our most important resource is not the money we have in the bank but the devoted board members, committee chairs and committee members. I was impressed by the dedication of this leadership group as I digested board member and committee reports in preparation for the midwinter meeting. The level of work that our leadership team devotes to the Division is particularly noteworthy since we’ve all been affected by the hard economic times facing our nation. Most of us are being asked to do more with less. It was within this context that I reviewed the remarkable level of work and dedication I see from our Division leadership team. So, my second item of business is to acknowledge and thank the Division leadership. Without you nothing would get done and, believe me, a lot is being done!

Name change: As I noted in a recent email to the membership, the absence of ballots from the November 2009 newsletter concerned the board so we decided to electronically poll our membership in January. We received resounding support to change our name to the Society of Group Psychology and Group Psychotherapy. Bob Conyne has agreed to guide the name change process through the final stages at APA and as soon as this is complete we will notify you.

Attendees at midwinter meeting: Our journal and newsletter are two benefits that touch each member of the Division. As the board discussed these vital functions, it became apparent that direct benefits would result to Division strategic planning by having the editors attend the midwinter meetings. Indeed, this year Craig Park, our journal editor, made substantive contributions to midwinter discussion from his contacts with members and authors. We look forward to including Thomas Treadwell next year. As we enter more fully into this “electronic age” we see the importance of supporting and maintaining clear lines of communication with those who guide our publications.

(Continued on page 4)
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Shannon Salter, PhD

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Donelson Forsyth, PhD

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THE GROUP PSYCHOLOGIST
is published by Division 49:
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of the American Psychological Association

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Submission Deadlines:
February 15, May 15, September 15

All material for publication should be submitted
to the Editor as an email attachment
(Microsoft Word or Word Perfect format).

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From Your Editors

Thomas Treadwell, EdD, TEP

A principal objective for The Group Psychologist is updating members on advances in group psychotherapy and psychology. I was planning to attend the American Group Psychotherapy Association (AGPA) Conference this year, but was unable due to being literally “snowed in” this February. My plan was to invite many of the presenters to consider submitting a brief abstract of their program to The Group Psychologist. Because that did not happen I am using our newsletter to recruit presenters to share their ideas and can therefore use help in contacting presenters. If you, or someone you know, presented at AGPA please encourage them to submit their abstracts to us!

We have been having success with early career psychologists, but we are missing our veterans’ participation! The wisdom and experience that our later career group psychologists can offer is invaluable. Please consider writing an update, brief report, or short article on what you are doing to share with us.

Our notion of strengthening our newsletter to reach mid- and later career group psychologists is indeed not only a challenge but at times somewhat frustrating. We wonder what entices members to contribute their thoughts and ideas to the newsletter. What would it take for YOU to write a brief report on what you are doing? Your ideas are important and we need to share them with our membership. We need to hear your thoughts!

We have been looking for group psychologists to consider working on the newsletter in the role of ‘consultation editor’. However, we did not receive any applications. Perhaps, instead the membership would like to develop a newsworthy column—it can cover any number of interests. Please submit ideas to me ttreadwe@mail.med.upenn.edu

Articles or brief reports and news items can be e-mailed directly to me at ttreadwe@mail.med.upenn.edu as can Letters to the Editor. I would also like to include book reviews, DVDs, videos and online group interactions as part of the newsletter.

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Letitia Travaglini, MA, Research Assistant to Dr. Aaron T. Beck, MD, at the University of Pennsylvania. Student affiliates are encouraged to send brief reports, comments and ideas to Tisha at ltrav@mail.med.upenn.edu.

Bambi Juryea-Gaston, MA, 4th year doctoral student at LaSalle University (Clinical Psychology) and Psychology Extern at the Center for Cognitive Therapy at the University of Pennsylvania. She will begin her predoctoral internship at the Rockland Psychiatric Center in Orangeburg, NY in September 2010. Student affiliates are encouraged to send brief reports, comments, ideas or general questions to Bambi at bjuryea@aol.com.

Brief reports, comments and student editorials are highly encouraged. We are interested to learn and share with Division 49 members what students are encountering in their group programs! Please send your ideas to Leann, Bambi, or Letitia.
Committee reports: There are a host of committees in our Division that support vital functions (finance, program, publications and many more!). However, I wanted to highlight a few initiatives from the Development committee that was created under Bob’s watch; chaired by Nina Brown:

Division visibility & recruitment at the annual convention is being addressed by the creation and dissemination of cards to invite attendees to Division program offerings as well as our social.

Electronic communication is a vital element today. We owe a great debt of gratitude to past presidents (Sobel & Forsyth to name a few) for their leadership in this area. Lee Gillis, a new board member has agreed to chair a subcommittee to explore how we might integrate and develop long-term support for our electronic communications (website, listserv, GroupBuzz, etc.).

Group Psychotherapy Research Network: As you may know, this is an ad hoc committee made up of leaders from several professional associations that focus on group interventions. This initiative received initial support and leadership from Lynn Rapin and Bob Conyne but from my perspective, it is now at a pivotal point in its evolution. The leadership from each professional association is currently being polled using an electronic survey to identify the degree of consensus on inter-organization priorities. I’ll be writing an update on this in a later newsletter but during our midwinter meeting we reviewed preliminary survey results from leaders (board members) of 3 professional associations—Division 49, Association of Specialists in Group Work and the American Group Psychotherapy Association.

Division Strategic Planning
At the 2009 midwinter meetings Bob Conyne guided the board through a strategic planning process to crystallize his presidential initiatives and get board input. As part of the 2010 midwinter meeting planning, I began to consider what leadership in a volunteer organization could realistically accomplish. The working assumption that I landed upon was that it was prudent to continually build upon past initiatives. As a pre-planning exercise to test this idea, I organized the 2009 (Conyne), 2010 (Burlingame) and 2011(Keim) presidential initiatives using a “rational” content analysis. Before presenting my content analysis of 3 years of presidential initiatives, I got input from our president-elect (Keim) and past president (Conyne) to make sure my content analysis maintained the spirit

### Table 1. Domains of Past, Present, and Future Presidential Objectives

<table>
<thead>
<tr>
<th>President</th>
<th>Theme</th>
<th>Face of Society</th>
<th>Membership</th>
<th>Member Benefits</th>
<th>Infrastructure</th>
<th>Liaisons</th>
</tr>
</thead>
</table>
| Conyne (2009) | Prevention    | • Name change          
• Mission clarity   
• Development com. | • Expansion/diversification of members | • Tangible products for members     
• Clear priorities     
• Clear committees     
• Committee accountability     
• Continuous involvement | • GRRN     
• Social justice | |
| Burlingame (2010) | Evidence-Based Group | • Implement name change   
• Development com.—brochure, etc.   
• Focus on brand—research & evidence-based groups | • Nurture new student representative     
• Clarity on who we serve starting with membership | • Student award     
• RSGT     
• What are realistic priorities in volunteer org.?     
• How do committees relate/serve mission | • GPRN     
• RSGT—NIMH | |
| Keim (2011) | Diversity     | • Build the economic stability of the division     
• Clarify our unique niche given new name and mission   
• Develop products for the membership and mental health professionals | • Recruit and retain members at all levels     
• Recruit diverse membership     
• Provide more networking opportunities | • Develop for members of all levels     
• Strengthen the middle career group while continuing to build early and student groups     
• Retain and use the expertise of late career groups | • Greater member involvement on committees     
• Increase outreach to APA and Div. 49 members (e.g., Convention) | • ASGW     
• GPRN |
of their presidential initiatives. I shared the 3-year window at the midwinter board meeting and suggested that it might create a sense of continuity as leaders come and go in our volunteer organization. Moreover, the infrequency of board and committee meetings may make the 3-year framework a useful heuristic to anchor activity over the calendar year. Finally, a 3-year perspective creates a dissemination framework to share Division initiatives with members and interested others. The 3-year window of initiatives received a positive response at our midwinter meeting and thought a reproduction is helpful. Thus, Table 1 briefly reviews the major themes.

Two domains in Table 1 relate to membership, specifically recruitment of new members and attention to how we are serving our current membership—i.e., member benefits. A key indicator of the viability of an organization is its ability to attract and maintain members. An equally important domain is infrastructure which is operationalized, in part, by the standing and ad hoc committees that make up our Division along with our bylaws and policy and procedure manual. In recent years, the Division has invested a great deal of energy in achieving clarity on bylaws, operating procedures, committee roles and responsibilities. Without clarity, confusion and overlapping functions will be the likely result. The fourth domain relates to the face of our society—what members and interested others “see” when they visit our website, our “brand” or how we position our Division with respect to other professional associations that have a group focus. Clearly, the heterogeneity of our division membership makes this face multi-faceted. The fifth domain captures liaisons that we establish with other divisions in APA as well as professional organizations outside of our parent discipline such as the GPRN. Finally, each president establishes a theme for the annual conference that typically is the organizing rubric for their presidential initiatives. In my case, evidence-based group interventions have been a focus of my career which is why I selected it as the 2010 conference theme.

After the board discussed the 3-year window of initiatives we used the five domains (face of society, membership, membership benefits, infrastructure & liaison) to understand how our standing and ad hoc committees might be supporting each domain. This activity was informative but often felt “squishy” as we struggled with a lack of good information on a number of committees. With some trepidation, I’ve reproduced our discussion of committees in Table 2 knowing that we’ve probably got a number of things wrong simply because of lack of information. We placed an X in cells that we felt somewhat confident about with respect to how a committee was currently functioning and we put an A to indicate a committee aspiration. Several board members suggested that this grid could be turned into a poster that hung in our Division suite. Indeed, as we discussed it we felt that committee chairs and members could use “post it” notes to update their committee functioning. At present, it’s my intention to reproduce both Table 1 and 2 in poster form for our Division suite to serve as a communication board as well as to solicit members’ comments. There is nothing “carved in stone” about either table but we felt they might start a discussion of our past, present and future strategic initiatives and how each maps onto existing committees. We welcome commentary, suggestions for revision and input! My intent in this column was to provide a brief yet informative glimpse into the activities of your leadership team. We look forward to your comments and input.

Table 2. Mapping Standing and Ad Hoc Committees by Five Strategic Planning Domains

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<thead>
<tr>
<th></th>
<th>Face of Society</th>
<th>Membership Identification</th>
<th>Member Benefits</th>
<th>Infrastructure</th>
<th>Liaisons</th>
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<tbody>
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<td>Fellows</td>
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<td>Membership</td>
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<td>Awards</td>
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<td>Education/ Training</td>
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<td>X</td>
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<td>Finance</td>
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<td>Publications</td>
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<td>• Journal</td>
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<td>• Website</td>
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<td>• Listserv</td>
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<td>• Newsletter</td>
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<td>Students</td>
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<td>RSGT</td>
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<td>International Relationships</td>
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<td>Foundation</td>
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<tr>
<td>Early Career Psychologist</td>
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<td>Ed. Directorate</td>
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<td>A</td>
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</tbody>
</table>

X = Committee currently active
A = Aspiration at present
President-Elect's Column

Jean Keim, PhD

It is an unusually cold, rainy, day in Albuquerque—a great time to reflect on Division 49. Recently, I attended both our division’s midwinter meeting and the Division Leadership Conference in Washington, DC. The following are some items of interest and reflection following those meetings.

Gary Burlingame started our midwinter meeting off by asking board members to share what brought us to group work. This valuable reflection, reminded me of all the things I personally love about Division 49—community, shared interests, mentorship, collegiality, professional learning, research opportunities and the list goes on and on. However, without question the most meaningful is the support and friendship I have received, particularly this past fall. If I could give any advice to those of you who are not active in the division—choose a committee and get involved. I assure you that it is worth every minute and the rewards far outweigh the work. Feel free to email me at jkeim@unm.edu if you need help getting involved.

I am excited to begin my term as president-elect and humbled by the accomplishments of those presidents who precede me. As Awards Chair, my action items include working with the Diversity Committee on a Diversity Award. If you have suggestions or would like input into the criteria, please contact Sheri Bauman and Michael Waldo who co-chair that committee. I am excited by the work of Nina Brown who chairs the Development Committee. A new brochure is being produced as well as other materials to promote and show pride in our division. Maria Riva and the Program Committee have worked hard to create a great program for the San Diego convention. I also want to highlight the work of the Membership Committee chaired by Elaine Clanton Harpine. Their goal is to double our membership and they challenged each member to recruit one new member, or sponsor a new student or early career member. Have you recruited your new member yet?

My presidential theme is bridging the divide between exclusion and inclusion. I believe through inclusion we grow and benefit the group as a whole. I believe that the fields of group psychology and psychotherapy, and division 49 membership would benefit from more inclusion and less exclusion. I define inclusion in the broadest sense. I challenge us to enrich our membership with diversity of sexual orientation, disability, religion, political views, spirituality, ethnicity, race, etc. As members of Division 49, we can promote inclusion in our teaching, research, clinical work, etc. We can also promote inclusion as a division. I suggest we ask ourselves how we as a division can be more inclusive and welcoming. How might we best celebrate each other rather than stay in our “comfort space”? This might be spending time with a new member and helping him or her to meet others and get involved in the division. It might be bridging the gap between group psychology and group psychotherapy members. It might be reaching out as committees to a few people we have never met on the membership list and asking if they would serve on the committee. Small steps make big differences. I hope during the next few years to see many small steps that will result big growth.

I look forward to serving you as President-Elect. Let me know if I can help you reap the benefits of our division.

EGPS Spring Event 2010
“Developing the Group Mind: Applying Neurobiology to Group Therapy”

Dr. Susan Gantt

This year’s Eastern Group Psychotherapy Society’s Spring Event, “Developing the Group Mind: Applying Neurobiology to Group Therapy,” will be held on Friday evening, May 21, 2010, at the Pratt Institute, W. 14th Street, New York City. A gifted clinical psychologist, known for her dynamic presentations, Dr. Gantt is an internationally renowned trainer, supervisor and conference director in Systems-Centered Psychotherapy. She is an Assistant Professor of Psychiatry at Emory University School of Medicine and Director of the Systems-Centered Training and Research Institute. Dr. Gantt will lead a Demonstration Group after the didactic portion of the evening.

As always, there will be plenty of time for refreshments, socializing, and networking!

We hope you will join us for what promises to be a wonderful evening! If you have any questions, please feel free to contact Lynn Pearl, PhD, at lmp17@columbia.edu or Sherry Breslau, PhD, at docbreslau@aol.com. To register, please contact Jan Vadell at egps@optonline.net or visit the website, www.egps.org.
2010 Division 49 Candidate Statements

Candidates for President-Elect

Nina W. Brown, EdD

It is an honor and a pleasure to be nominated for President of Division 49, Group Psychology and Group Psychotherapy. I’ve been a member since the division's inception and hope to carry on the positive work that has been accomplished. The organization benefitted from the dedication and expertise of previous presidents, and I would build on their accomplishments with four emphases: visibility, inclusiveness, member benefits, and the Foundation.

I would work to increase visibility of the organization’s contributions to group research, education and practice in all venues; seek out opportunities to connect with other professionals and new members interested in group; find new benefits and increased publishing opportunities to offer members; and develop a firm financial basis for the Foundation. The latter is especially important to provide funding for student scholarships, offer Division awards, and provide seed money for research on groups.

Examples of my qualifications include a doctorate from The College of William and Mary, additional training in group from the American Group Psychotherapy Association (AGPA), Life membership in the American Psychological Association, membership in the Association for Specialists in Group Work. I am a Professor and Eminent Scholar at Old Dominion University where I teach master and doctoral level courses in group counseling. Publications include 19 books, four of which were translated into other languages, and seven books about group. Current relevant affiliations include membership on Division 49 Board and Program committee, chair of Division 49’s Development committee, and Fellow status in AGPA.

John C. Dagley, PhD

Age can give one perspective, not necessarily enlightened wisdom, but time at least affords the opportunity to differentiate the important from the trivial or fleeting. As I look back over decades or just the most recent months, many of my most fulfilling professional experiences have come from opportunities to participate in, and to lead, small groups of clients, students, employees, faculty, or professional colleagues. From momentous decisions to the routinely administrative, group goal achievement has been enormously rewarding for me. Teams and small groups have always been my favorite home, solely because “group” goals are so much more fulfilling. I enjoy both the process and the outcome. In its most simple form, that’s why I offer my services as a nominee for president of Division 49. Our work is important, perhaps now more than ever as our need grows for rigorous research demonstrating our effectiveness, as does our need for championing education and supervision in group psychology and group psychotherapy in graduate psychology programs. I enjoyed the challenges we experienced and met during my recent tenure on the Board as the Division’s Treasurer, and look forward to contributing to the mission again. I’m appropriately credentialed, I think, in that I’ve co-authored and authored books, chapters, and articles on groups, and I’ve taught for two major universities in the States, as well as for four additional major universities in other countries, including Korea, Finland, Germany and Singapore. I’ve also served as a therapist and an administrator. Thanks for your consideration.

Candidates for Secretary

Scott Conkright, PsyD, CGP

I am honored to accept the nomination to run for Secretary of Division 49. My background is in clinical psychology, and I have been practicing for over 18 years. I write and conduct workshops extensively on the application of Lacanian psychoanalysis to group psychotherapy and as the use of metaphor in group process. I am past president of Atlanta Group Psychotherapy Society, and served on its board for several years. I am also a past member of the AGPA affiliate board. I have taught both graduate and undergraduate psychology and psychotherapy courses in Chicago and Atlanta and I was also the editor of the “Consultation Corner” column of The Group Psychologist, the Division 49 newsletter, between 2007 and 2009.

One of the critical roles of a Board member is to do all that is necessary to insure the financial security of the organization while adhering to the ideals of its mission goals. This can be met by an active involvement with fiscal planning and oversight. Community outreach is also an integral means of educating practitioners regarding Division 49’s mission as well as staying informed of, and responding to, their needs. I am especially interested in getting students and new therapists involved in the unique and rich growth opportunities that Division 49 has to offer. My involvement on the Atlanta GPA Board, and as an Affiliate Society Assembly Representative has provided me with several years of valuable experience.

(Candidates for Secretary continued on page 8)
**Division 49 Candidates for Secretary**

*(Continued from p. 7)*

**Martyn Whittingham, PhD**

I am honored to have been nominated to serve as Secretary on the board. I received my PhD in Counseling Psychology under the mentorship of Rex Stockton and Keith Morr- ran at Indiana University in Bloomington. Under their expert tutelage, I developed a passion for both the practice and science of group work. I am now a full-time assistant professor at Wright State University’s School of Professional Psychology, where I teach group therapy, advanced group therapy and clinical applications of social psychology. I also function as an “embedded faculty” since my office is based in the university counseling center, Counseling and Wellness Services.

From there we have been building a group program that has seen a 400% growth in group services in the last four years. We have been working to include group assessments from the CORE-R Battery and also putting on workshops on how to build a group program at university counseling centers.

My commitment to group work involves bridging gaps. There are many gaps in our field—the science–practice gap, the gap between social psychology and group therapy, the gaps between APA, AGPA and ASGW and the gap between students’ ability to be involved in our Society and their belief they can make worthy contributions. In recent years, we have made strides toward closing all these gaps, and I would appreciate the opportunity to be part of the combined efforts to continue this path.

**Candidates for Member-at-Large**

**Elaine Clanton Harpine, PhD**

I am honored to have been nominated to serve as Member-at-Large on the board and look forward to the opportunity and challenge of serving our Division. Declining membership is one of the primary concerns confronting our Division. As the incoming membership chair, I hope to bring membership to the forefront of our concerns. We must continue to spread the news about the importance of groups and the advantages that groups offer. We must also work within our Division to help new and longstanding members alike to become more involved in the workings of our Division.

Serving on the board would strengthen the role of the membership committee. Board involvement would enable the membership committee to be involved with the inner workings of other board initiatives.

We have many talented and devoted group people in Division 49. We have much to offer as a Division. As we expand our Division’s focus, we will increase our outreach and our membership. We must open the door, especially to graduate students and early career group workers. We must continue to grow as a Division and find new ways to bring groups to the forefront of interest and involvement within APA.

**Dennis M. Kivlghan, Jr., PhD**

I am honored to have been nominated for a Member-at-Large position on the Board of Division 49. My deep and abiding interest in groups began with an introduction to positive peer culture groups at the United Methodist Children’s Home in Richmond, Virginia and was cemented during my graduate school experiences working with Tom McGovern, Jack Corazzini and Don Forsyth. I have been fortunate to have mentors who were and are eminent practitioners and researchers. For over 25 years I have continuously co-lead and conducted research on counseling, psychotherapy and intergroup dialogue groups. Currently, I am a professor and Chair of the Department of Counseling and Personnel Services at the University of Maryland. I had the honor of following Don Forsyth as the second Editor of *Group Dynamics: Theory, Research, and Practice* and I continue to be on the editorial board of the journal. Editing *Group Dynamics* was a seminal experience for me. The real strength of Division 49 and its extension our journal is the complex perspectives and sophisticated understandings of groups that emerge when members of different disciplines and specialty areas engage in the practice and science of group dynamics. One of my goals as a board member would be to expand and deepen the interactions among the different specialties represented in the Division. A second passion for me is mentoring group practitioners and group researchers. I am particularly proud that my students have consistently presented posters and papers in the Division. I am particularly interested in indulging in my passion by looking for ways to increase graduate students’ and young professionals’ participation in the life of our Division.
Cheri Marmarosh, PhD

I am honored to have been nominated to serve as Member-at-Large and look forward to serving our Division. I have accepted this nomination because I strongly believe that group research, training, and treatments do not receive adequate attention, despite the empirical evidence and interest expressed by psychologists-in-training. As a board member, I would like to increase our efforts at reaching out to young professionals and graduate students. I would also like to advocate for members and seek out their feedback to ensure that we meet our diverse needs as researchers, clinicians, and teachers.

I believe that we can recruit and retain members if we reach out to psychologists across disciplines, continue to publish and present our work that highlights the value of groups, and apply our knowledge of group dynamics to our own Division.

As a Division member, I have participated in our APA conference committee, served as the education leadership representative, and accepted the invitation to be an associate editor for our journal, Group Dynamics: Theory, Research, and Practice. I am also a member of Divisions 17, 29, and 39, and serve on the editorial board of The International Journal of Group Psychotherapy. I have taught group psychotherapy for over fifteen years and have published several theoretical and empirical papers that address attitudes about groups and group psychotherapy. I would be honored to have the opportunity to represent you and work together toward strengthening our Division. Thank you for your consideration.

Leann Terry, PhD

I am honored to have been nominated for Member-at-Large and look forward to the opportunity to serve our Division in new ways. Having recently transitioned from a graduate student to an early career psychologist (ECP), I would bring a number of valuable qualities to the position. First, my knowledge of the needs of students and ECPs would allow me to advocate for them and provide resources and services that suit their stage of professional development. Secondly, my experience with the Division would allow me to step into the role quickly. I have served as Chair of the Student Committee, as a member of the Membership Committee, and worked with the Board to create a formal Student Representative position. These experiences give me a springboard from which my serving as Member-at-Large would start. Finally, I have energy and passion to serve the Society. My professional home has been firmly housed in the group world since the beginning of my graduate study with Dr. Rex Stockton. I can’t think of a better way to integrate my passion for groups and my dedication to service than through this Division.

My current interest in groups is predominately focused in clinical and research areas. As an Associate Staff Therapist at Pennsylvania State University’s Center for Counseling and Psychological Services I co-lead two interpersonal process groups. Process groups fascinate me; their complexity and therapeutic power provide the highlights of my work week. On a research side, I’ve focused on the characteristics of group leaders and how this influences their perceptions of group therapy clients. I hope to continue this research on group leaders…but am happy to take a short break after finishing my dissertation. Being at an early stage of my career gives me unique perspectives on the challenges facing ECPs. I would like to bring this knowledge to the board so we can attract and retain new members.

As a Member-at-Large, I want to focus on the needs of students and ECPs. Connecting students to group psychologists and group psychotherapists gives them a wider community than their department provides. I value making these connections at APA and other gatherings, but believe we need to expand into more electronic venues. Methods such as Facebook, video conferencing, and blogs on our own website are ways to continue these connections throughout the year. I would also advocate for providing member-only resources on our website that are tailored to students and ECPs. Offering practical resources, such as annotated bibliographies, clinical group guidelines, and syllabi of group courses are a few ways to serve our members. I look forward to developing an Early Career Psychologist Committee as one of my primary responsibilities. Meeting the needs of students and ECPs is difficult; we are a diverse group with varying interests unique to our stage of professional development. As a Member-at-Large, I would bring my energy to this challenge and look forward to the opportunity to serve.
Candidates for APA Council Representative

Gloria Behar Gottsegen, PhD

My longstanding involvement in the field of group psychology and group psychotherapy, over 20 years that include professional practice and university teaching, along with concern about protecting and enhancing the vital interests of group psychologists, has led me to a devoted and extensive relationship with Division 49.

My current and former service to Division 49 includes:

- Federal Advocacy Coordinator
- Charter member and Fellow of Division 49
- Member-at-large (four terms)
- Alternate Council Representative
- Chair, Fellows Committee
- Chair, By-laws Committee
- Member, Editorial Board of Group Dynamics

I am eager to continue my record of proven and effective service, energy and commitment to Division 49.

Robert Kaltenbach, PhD

I am honored to have been asked to continue serving on the Council of Representatives by the nomination committee and the Board of Directors of Division 49. It is personally gratifying to have such an expression of confidence in my abilities and judgment. I now ask you to consider my candidacy for this highly important and responsible position.

As a member of the COR, one does not only represent the division but serves on “…the legislative body of the Association and shall have full power and authority over the affairs and funds of the Association…” This, I deem to be an awesome responsibility. This is important to you, so consider why you should choose me to represent you.

I have a BA, MA, and PhD in psychology. I worked as a college counselor (U Southwestern L.A.), teacher of counseling and group dynamics (Peabody Overseas Div.), and teacher/clinician (Medical College GA). At MCG I was Director of Group Psychotherapy Training for psychology and psychiatry residents, Director of the Functional Rehabilitation Program and Director of a group therapy outreach clinic for veterans with PTSD. As a licensed psychologist, I provided individual and group therapy to mental health and medical patients.

My involvement with Division 49 spans two decades. I served several terms as Treasurer, was a candidate for President and currently represent you on the COR. I know the issues confronting Div 49 and APA.

I trust you agree that I have the experience, maturity, interest and judgment to continue as your representative on the Council of Representatives.

Join the Ad Hoc Committee on Public Education, Public Interest, Social Justice, and Global Issues!

Irene Deitch, Chair of Division 49’s Ad Hoc Committee on Public Education, Public Interest, Social Justice, and Global Issues, seeks members to serve. The committee welcomes social, organizational, and international psychologists, researchers, and practitioners, graduate students, early career psychologists, new members, and any member with special interest in any of these areas. This committee liaisons with the APA Directorates and the APA Office of International Affairs. To get involved, please contact Irene Deitch at profid@aol.com.

Group Dynamics reports a new Associate Editor, Cheri Marmarosh, PhD (George Washington University). She replaces Eric Chen, PhD (Stanford University).
Candidates for Student Representative to the Executive Council

Kyle Barry

I am a 4th-year graduate student at Wright State University, School of Professional Psychology. I have experienced some wonderful group-related opportunities facilitating groups in my practicums; actually, leading and co-leading groups sparked my interest in group work. As a novice therapist these experiences have also been anxiety provoking, and at times caused me to question whether I wanted to continue with group work after graduation. I believe that the support I received, from supervisors and mentors within Division 49, helped me to challenge myself to become a better therapist for my group members, and provided me with grounding that will sustain my capacity for a career of group work. I am excited and honored by the possibility of serving as Chair of the Student Committee for Division 49 so that I am able to help connect other students to the support, create opportunities, and share wisdom within the division.

For the past two years I have been working with Leann Terry, Past Student Committee Chair, and the committee to build a place for students within Division 49. We have been welcomed with open arms and have received nothing but support and guidance from the membership. The student committee has been actively participating in updating Division 49’s website, helping to create an award for group-related APA student posters, establishing a Facebook group, and providing volunteers for Division 49 presentations at APA. I believe now is the time to expand Division 49’s student membership, and this will be my major goal over the upcoming year.

Jennifer Kaladow

I am honored to have been nominated for the position of Student Representative of the Executive Committee and very much look forward to having the opportunity to serve Division 49 in this role. I am currently an advanced doctoral student in Counseling Psychology at Indiana University. My enthusiasm for groups began during my masters program at Indiana University and has continued throughout my doctoral studies where I have worked with Dr. Rex Stockton. It was during my very first group class that I was able to witness and experience firsthand the powerful impact that groups have on people. This experience instilled in me a desire to further my knowledge and training in this area during my graduate studies. Throughout several practica, as well as during my pre-doctoral internship, I was a group facilitator in a vast array of settings including both inpatient and outpatient, and have seen the powerful effects that groups have on a diverse range of individuals. On a daily basis I am keenly aware of the value and importance of groups, as we as individuals, are constantly a part of one type of group or another, whether it is as a member of a classroom, family, or therapy group for example. As Student Representative, I will work to ensure that the Mission Statement for student affiliates, as well as the subsequent goals and opportunities previously devised by members of the student committee are met, as I believe that striving to accomplish these is the way to realize the ultimate goal which is the advancement of group work.

Division 49 Dissertation Award

The Division gives an award each year for the best dissertation on small groups that was completed during the previous year.

The most recent award winner, for 2008, is Dr. Lindred Greer, who received her PhD from Leiden University and is now a faculty member at the University of Amsterdam. The title for Dr. Greer’s dissertation was “Group Composition and Conflict: The Role of Individual Differences.”

The 2010 award, which will be presented at the APA Convention in San Diego, includes a $1,000 cash prize, a special plaque, and a 3-year free membership in the Division.

This award is given every year, so interested students who will complete their dissertations this year should think about competing for the 2011 award. To enter, simply send a brief (5 pages, typewritten and double-spaced) abstract of your dissertation to Dr. Richard Moreland, 3103 Sennott Square, Department of Psychology, University of Pittsburgh, Pittsburgh, PA 15260. The research can involve any phenomenon in any kind of group, studied using any methodology. Any questions can be sent to Dr. Moreland at cslewis@pitt.edu.
Fees and Group Psychotherapy

Leon J. Hoffman, PhD, ABPP

The following questions are intended to cause group psychotherapists to be curious about all fee-related aspects of their psychotherapy practices. This topic may be particularly fitting during our current economic debacle, though it will apply to any other time as well. Some group psychotherapists at times see group patients individually, either when preparing them for the group or during group treatment. Therefore, some references are made here to fees in individual settings.

In setting fees, as in all areas of professional practice, group psychotherapists must be sure that they are qualified to perform the services they provide and are up to date and are aware of and follow all applicable ethical and legal requirements of the jurisdictions that apply. If unsure, get consultation right away, be it psychological or legal.

That said, consider the following:

• What do you charge for the psychotherapy you provide? Is it the optimal fee for you? If not, what would make it “better” or more suitable? Would a higher fee or a lower one be preferable? How did you decide upon your fees? What considerations do you find important?

• Are third parties in any way involved? Do you negotiate or discount fees with insurance companies or other third-party payers? If so, in what way do you involve your patients in those decisions?

• Do you provide psychotherapy to children, adolescents, adults and the elderly or to any other specific populations? Do you practice in a rural, urban or suburban area? Do you provide your services to inpatients and/or outpatients? Are those services conducted in a private practice, a public setting or some combination? In what ways does your seniority or skill level come into play?

• Do you conduct individual, group psychotherapy, couple or family therapy, supervision, consultation or forensic services? How is any testing or report writing factored in? Do you charge for phone time (including phone fees) and for calls between scheduled sessions? How? If you provide psychotherapy by phone, how do those fees compare to in-person charges? Do you charge all group patients or all individual patients the same fee? Why?

• If you conduct alternate group therapy (where the leader is sometimes absent), how are fees set? How do you handle fees for those sessions where you are absent because of illness or other causes (whether in group or in individual psychotherapy)? If you use a substitute psychotherapist, are any aspects of the patient’s fees altered? If you provide concurrent therapy (whether conjoint or combined), how do you relate your fees to those of the other therapist(s)?

• Does the frequency with which you see a patient affect your fee? How does length of session figure in? Do you charge by time or by service? What is your rationale? Do you charge for initial consultations? How much time or how many sessions typically constitute an initial consultation? With what do your fees vary?

• Are your fees paid in advance? If so, how far in advance? If not, why not? Do you provide sliding-scale fees, either downward or upward from your customary fee? (Yes, upward!) Do you ever use “free will” offerings or “pay-as-you-can” approaches? Where, if at all, does barter come into your consideration? Do you accept credit card payments?

• What uses do you make of contracts (agreements), if at all? Are they written or verbal? If you do not make use of contracts, why not? On what basis do you decide?

• Do you regularly evaluate your fee schedule? What causes you to do so?

• How “human” do you keep all your fee-related transactions? What roles do electronic devices play in any fee transactions, discussions or considerations? To what extent do you keep all fee-related activities “human” (meaning in person, by telephone or mail only, not otherwise electronic?

• If you provide bills do you generate them for all patients or only for those who require them or ask for them? Do you mail them or personally give them? If you personally give them, when do you do so? Are you consistent? Do you charge for postage? Why or why not? What do you include on your bills?

• What special provisions (if any) do you make for confidentiality and privacy? How is the information pertaining to patients’ fees stored and secured? Who has access and under what circumstances? Who else has involvement with any aspect of the patients’ fees (e.g., billing or collections)? How are refunds, collections, and litigation addressed?

• How do you handle fees if a patient’s financial circumstances change? Are there fees for a patient’s missed sessions or bounced checks? What do you do about delinquent payments or failure to pay?

• Are your fee practices based upon clinical or practical reasons or both? Where do your countertransferences come in, especially those of an aim-attached type? Are patients aware of what other patients are charged? Why?

• If you provide co-therapy, what fee contingencies do you consider? Do you and any co-therapists receive equal or different fees? How is that decided?

• If you conduct research using your patients what provisions, if any, do you make for paying them for time and expenses?

• What things would you do differently if you were not feeling the impact of our current financial challenges? Have other national or international events affected your financial deliberations? What might they be? Are you engaged in any fee-related practices that you should reconsider? Finally, what provisions have you made for the satisfaction of outstanding fees in the event of your death?

I hope that the above helps my group psychotherapist colleagues to address the fascinating, challenging, complex, often thorny aspects of our fee-related work.

For answers, discussion, or consultations regarding any aspects of this article, please feel free (pun intended) to contact Leon J. Hoffman, PhD, at 111 N. Wabash Ave., Suite 2122, Chicago, IL 60602; 312-332-1262; or violoncellist@live.com.
Methods and Techniques in Group Therapy for Bereaved College Students

Nicole Capone and Amber Connell
West Chester University of Pennsylvania

Bereavement in College Students
As of 2007, 22% to 30% of college students had experienced death within the past 12 months (Mathews & Servaty-Seib, 2007). During the late 1980s and early 1990s, college undergraduates were surveyed on their experiences of death. The results showed that 23% lost a family member within the previous year and 27% had lost a friend within the past year. Nevertheless, dealing with such losses is not considered a normative transition for adolescents (Balk, 1996). However, there is a severe lack of bereavement services on many college campuses. If this issue is not addressed effectively, a student may have problems completing developmental tasks needed for later years. They may undergo problems forming an autonomous life and identity; and have difficulty handling schoolwork while maintaining personal relationships (Balk, 2001). Other issues that plague young bereaved people is that many of them begin to feel as though they matured too quickly from having to deal with loss and grief during a time in their lives that should be marked with happiness and fun (Balk, 1996).

College life already brings constant academic pressure, an emphasis on having fun, and distance from families; therefore, a student should not have to struggle with significant deaths alone (Mathews & Servaty-Seib, 2007). Yet many bereaved individuals feel alone (Balk, 2001). Because their lives are constantly changing, college students suffering with bereavement need to be taught not only coping skills but also how to adapt to their environment (Balk, Tyson-Rawson, & Colletti-Wetzel, 1993). It is for this reason that many college students seek bereavement counseling. They typically do not come looking for services directly due to their grief, but rather because it causes complications with the other aspects of their lives as college students (Balk et al., 1993). Universities should help students so they do not suffer academically, but they should also offer care and compassion. Therefore, faculty, advisors, student services, and others can focus their efforts to help those struggling with bereavement (Balk, 2001). Faculty members and advisors have direct contact with students so they may have a better chance at reaching them due to their closer relationship. They can listen and request instructors to work with the student while they are balancing academics and grieving, and student services can offer counseling and workshops. Now is the time for schools to investigate the prevalence of bereavement, educate the school community, determine the longitudinal consequences of unresolved bereavement, and institute interventions to help with recovery (Balk, 2001).

Counseling and Psychoeducational Workshops
There are numerous ways universities can respond to students’ needs for the grieving process. Advertisements of university services, whether it be a counseling group or other beneficial service, can be placed on the university’s website, given out as pamphlets, or placed on bulletin boards. Campus television stations and the university’s radio station would also be good avenues to reach students. In addition, symposiums about bereavement can be conducted, a memorial can be built for students that have died, and teleconferences on bereavement can be made available. The student newspaper can also write stories about the severity of the issue, the importance in seeking treatment and the services offered by the school (Balk, 2001). These are some suggestions the university can use to promote the bereavement services that can meet students’ need.

Courses on death and dying can be offered, which would give all students the ability to learn more about bereavement, and ideas on how to cope with the grieving process (Balk, 1997). Universities can further aid students by establishing a bereavement center. Non-bereaved students can be trained as peer-helpers to offer peer support where they can provide interventions for those at risk for bereavement complications, raise awareness about bereavement throughout the campus, and conduct research to increase the program’s effectiveness. An administrator would then formulate a list of helpers that can be referenced when a person seeks counseling. If the problem is one of a more serious nature, then a licensed counselor can further aid the student (Balk, 1997).

Vickio (2008) believes that psychoeducational workshops can be beneficial for those that do not feel comfortable in a group setting. Workshops require limited staff, do not require a confidential and ongoing relationship with members, and clinical records are not involved. The goal is to provide education and support, more so than treatment. Students are given a framework for understanding their grief because they have the opportunity to interact with other bereaved students. Workshop topics can be chosen after an assessment is given on students’ needs; for example, if a school has experienced a recent death, a workshop can be formed to deal with this specific loss. Workshops should be held in an accessible location that provides a comfortable environment and privacy, for example a lounge area or classroom. The time it is held must be convenient for students, so one after dinner or following evening classes can be optimal (Vickio, 2008).

Bereavement Groups
Another strategy is for the university to have a structured bereavement group. This group could meet once or twice a week for a

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Group Therapy for Bereaved College Students

(Continued from p. 13)

predetermined number of weeks or for the entire semester. Meetings typically last about 90 minutes (Janowiak, Mei-Tal, & Drapkin, 1995). A graduate student can co-facilitate the group with a licensed counselor, and the focus can be on such topics as coping with the loss, handling academic life with personal grieving or feeling comfortable sharing experiences (Balk, 2001). Balk (1996) states that bereaved college students benefit greatly from naturalistic generalizations, a term that means relating to and growing via the shared experiences of others. An example of the effectiveness of group counseling came from a study performed by Janowiak et al. (1995) where two students from a doctoral program led the bereavement group and were supervised by a licensed practitioner. The group consisted of eight members that met for 90-minute sessions and it lasted seven weeks. Beginning sessions focused on confidentiality, educational material on bereavement, and a list of goals that each student wished to accomplish. Relationships formed quickly, and as time went on more members were willing to reveal personal stories and deeper feelings. Evaluation questionnaires revealed that overall the group’s effectiveness was great because the members were able to share their personal grief with others, which helped lessen the pain of their losses. Nevertheless, the group members and leaders felt that a 10-12 week group would be more effective (Janowiak et al., 1995).

Bereavement groups can either be closed ended or open ended. Closed ended groups exist for a limited time, which is about six to eight weeks (Worden, 2008). This can be advantageous because the group can be defined by the type of loss, grief length, compatibility, etc., which can increase members’ comfort level. Also, leaders are more willing to head this type of group because there is a definitive ending. The definitive ending can also help the members feel a sense of closure, and the agenda can be planned due to the time limited format (Hughes, 1995). Open ended groups have no definitive ending, and people come and go as the group fulfills their individual needs. With this type of group, it is more difficult to educate new members on what has occurred in the group because they are unaware of the history. Also, it can disrupt the cohesiveness of the group, and trust must be built with the new members (Worden, 2008). However, it can allow the bereaved to develop other roles for themselves, such as role models or mentors for the newly bereaved, assistants for the leaders, or the ability to initiate functions for the group members to gather outside of the therapy sessions (Hughes, 1995).

Screening Criteria

There are a few aspects that determine how the group is formed. A homogenous group is one where people are placed in a group because they share similar losses, for example a group for bereaved spouses (Worden, 2008). Sometimes, this is not feasible because some bereavement programs are not large enough or do not serve in areas where there is a significant number of people suffering from the same loss. The goal then is to try and have a few people with similar interests in the group, so that they can give support to each other. Another aspect is how recent the loss is because it is important to not include those that suffered their loss less than 6 weeks earlier. Most would not be ready for a group experience, because the loss is so recent. However, some groups prefer to include members from all stages so that they can learn from others, who are further along in their grieving process (Worden, 2008).

There are two kinds of losses that must be separated before placing people in a certain bereavement group (Worden, 2008). Multiple losses are where a person has lost a number of people over a short period of time, and the person is normally so overwhelmed with grief that he or she can not effectively participate in a group. There are also losses that would be too difficult to talk about, for example suicide, because it would make people in the group too anxious. If these types of losses are included, then there should be more than one person who dealt with that type of situation. Lastly, those with serious pathologies would not be included in a bereavement group because they would be better served by individual counseling (Worden, 2008).

Group Leadership

There are guidelines to follow in choosing an appropriate facilitator or director. It would be beneficial if the facilitator is a trained counselor, but whoever is chosen must be knowledgeable about grief, and establish trust (Vickio, 2008). Emotional reactions within the facilitator may result, so those that have experienced recent or traumatic losses should not be chosen. It would be advantageous to use two directors because one can focus on the group as a whole, while the other can attend to individual participants. Facilitators must understand and recognize the differences between the members regarding the losses they suffered, and their demographics. They should highlight the differences and incorporate them so all members feel a part of the group (Vickio, 2008).

The director is responsible for shaping people’s expectations before they enter the group because everyone comes to the group with their own expectation of the bereavement group. If these expectations are not met, then group members would be disappointed and not likely to return. During the interview for group selection, any unrealistic fears or misconceptions are addressed (Worden, 2008). The director’s role is termed an “executive function,” which means it is his or her responsibility to set up the boundaries of the group, establish rules, manage time, and intercede when the group diverts from the topic (American Group Psychotherapy Association [AGPA], 2007). This gives the group structure, a sense of control and members will feel comfortable knowing the rules regarding behavior. An important rule is confidentiality so all members can experience the freedom to express as little or as much as they want within the group (Worden, 2008).

The director’s role in the beginning sessions should be more active because the members do not yet know each other, and may be apprehensive during this new experience. As the group bonds and members begin to engage more, then the director can take on a more passive role (Worden, 2008). The director should also present him or herself as a caring individual that is concerned about the well-being of the members. This is important because the members look to the director for emotional support, and this then sets the tone for how the members treat and regard each other (AGPA, 2007). The director should also “emotionally stimulate” the group in the event that some members may need prodding or encouragement to open up and discuss their feelings. This will ensure that each member has
the opportunity to talk, and allows for efficient therapeutic dialogue (AGPA, 2007). “Meaning attribution” is where the director helps members develop their ability to understand themselves, others, and people not within the group so they can positively change their lives. The director can take an active role in helping members gain this insight, or it could happen automatically between the members without the director’s assistance. Gaining this insight is crucial for the members so that they can become more aware of how some aspect in their past is affecting them in the present (AGPA, 2007).

A controversial area is what the director should reveal about him or herself. The director should not reveal anything that he or she is uncomfortable sharing, and information should only be offered if it would help the group with what is being discussed at that time (AGPA, 2007).

**Suggested University Model**

The following section will explain a proposed model for bereaved college students that university’s can follow. The primary techniques for a group of this nature will be group sharing in order to obtain closure. Each session will revolve around a different aspect of bereavement, such as expressing repressed feelings for the deceased, discussing positive and negative events and situations right before the person died, and the sharing of positive memories of the deceased. The leaders of the group should introduce each topic and ask for volunteers to start the sessions. However, once the group begins discussion, feedback and suggestions will be primarily given by other group members with the therapists giving periodic assistance. Some specific techniques that will be used are role-plays and an “empty chair.” Therapists will lead these activities to aid in the expression of repressed feelings by group members (AGPA, 2007).

In the role-plays, the group member, who is expressing, will choose another group member to act as the deceased person or someone else involved in the conflict. He or she will then give the “double” information about the person he or she is playing. After the roles are defined, the leaders will have the members act out a scene or situation that the original group member was having difficulty dealing with outside the group. The “empty chair” technique is very similar with the only exception being that the group member expresses him or herself to an empty chair that is supposed to represent the deceased person. This technique allows for free expression of feelings that the person was unable to say before their loved one died.

Balk et al. (1993) gives suggestions on objectives during an 8-week bereavement-counseling group. The first objective they present is getting to know one another. During this session, Balk et al. (1993) suggested that group leaders explain the nature and purpose of the group, explain the objectives of the following sessions and encourage group participation and self-disclosure. The second objective Balk et al. (1993) described is building upon the foundation of the first session. In this meeting, group members are once again encouraged to participate in the group and share their personal experiences. Lastly, this session will begin to help members confront reality and respond to their own particular situations. The third session addresses the topic of sustaining interpersonal relationships in the face of bereavement. During this session, they suggest having members express a person either within or outside the group with whom they feel comfortable discussing the loss. This person will be someone the group members will be encouraged to build a relationship with over the course of the group. The fourth session will focus on maintaining emotional balance. The group members will write down emotions that they have struggled with since the death and then there will be a discussion and education of skills used to manage the presenting emotions. The fifth session will be used to help members maintain a positive self-image and to build up their self-efficacy. They suggest doing so by having members draw some aspects of themselves that represent their self-image. The drawings will allow members to become more self-aware and thus more capable of handling challenges that come their way by using the strengths they innately have. During the sixth session Balk et al. (1993) would focus on coping skills related to cognitive redefinition, denial, and avoidance. Members will share the techniques that he or she already uses. Facilitators will then show via example how to reframe and redefine their situations in order to cope with the loss. Positive and negative aspects of denial and avoidance will be addressed by group discussion. The objective for session seven will be on proactive strategies. This session will help the members solve their problems by seeking information and support. Members will begin to take action in their lives and to identify alternatives for the areas in which they are struggling. Lastly, Balk et al. (1993) suggested that the eighth session focus on emotion regulation coping skills. Members will use their personal experiences to show each other how they have used their new skills to not only regulate their emotions but also to have an emotional release regarding the loss and to process the release in a healthy manner.

The course of this group will follow the course of a typical college semester with the group starting and ending at the beginning and end of the school’s semester. Breaks from the group can be offered when school is not in session for the week. With the nature of the group being college students, several sessions will focus primarily on how to deal with the specific stressors of academics and college life. The group will help members create and stick to a schedule including such things as classes, homework, clubs, activities, and social time. Group members will also be encouraged to become involved in other activities around campus and to seek out social interaction with classmates, people in their residences, and off campus. Lastly, the group will help its members to come to terms with the fact that many of their loved ones are back at home, while they are away at school. Teaching members to keep an open line of communication with family at home will help them be able to express their grief and provide another outlet for facing the loss during times when they are away from the group.

Over the course of the group homework will also be used to facilitate healing outside of the therapy sessions. Examples of the homework suggested for bereavement groups include: writing letters to the deceased, visiting the gravesite (if feasible), looking at old pictures or videos, and bringing in some pictures to share with the other members. Lastly, it will be recommended that group members make a memory book about the deceased. Along with the homework, handouts will be provided at each session about the normal stages of grieving as well as tips and quotes about loss and healing. All homework will be assigned at the end of the sessions and at the onset of each new session last week’s homework will be reviewed. The participation (Continued on page 16)
in the homework exercises will also be used to serve as a tool for assessment at the end of the group.

Duration of Group
For themed group therapies, such as the suggested college model bereavement group, the AGPA (2007) recommends time limited sessions. This type of therapy usually last for a pre-determined number of weekly sessions, such as 8, 12, or 15. Currier et al. (2008) compiled a meta-analysis of the most effective group therapy studies for bereavement and found that on average the number of sessions was 10 and that average session length was 70 minutes. It is expected the model group will last 12 weeks because the topic of bereavement brings with it many other psychological disturbances and thus bereavement therapy is typically preventative (Currier, Neimeyer, & Berman, 2008). A 12-week group is also planned because it will fit into the course of a college semester. Each session will last approximately 75 minutes. This will allow for adequate sharing and group cohesion as well as providing time for the directors to close the sessions by making sure each individual member is processing his or her feelings in an appropriate manner.

Expected Outcomes and Evaluation
At the end of treatment, the members of the model group are expected to have an overall reduction in their feelings of bereavement and loss of their loved ones (Currier et al., 2008). A reduction in denial and avoidance of the loss will be expected. Other positive outcomes that are expected are the ability to experience and move through the pain of the loss, adjustment to life without the loved one, and the ability to remember the deceased in a positive way (Stubenbort, et al., 2001). Considering Currier et al.’s (2008) position that bereavement therapy is typically preventative for more serious disturbances, it is expected that the members will be less likely to develop depression, anxiety, post traumatic stress disorder, or similar dysfunctions. Nevertheless, many participants of group therapy will also be in individual therapy at the same time or will move on to individual therapy following their experiences in group (Barlow, 2008).

As per the suggested model for a college bereavement group, it is expected that each group member would share his or her story of loss throughout the sessions, as well as participate in the sharing and catharsis of the other group members. Successful completion of all homework assignments and sharing those experiences with the group is also expected. Lastly, due to the nature of the group composed of college students, it is expected that they will be better equipped to handle their academic stressors as well as the personal feelings associated with bereavement.

The method of evaluation to be used for this group is successful completion of the homework assignments. The major homework assignment of this group is to make a memory book and to show it to the group. The rationale behind this is that the person will go through positive and negative emotions and memories in the process. Having the group members complete the assignments and subsequently share them with the group will be a good way to judge personal motivation and group cohesion (AGPA, 2007; Barlow, 2008; Currier et al., 2008; Stubenbort et al., 2001).

References

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The Influence of Therapist Characteristics on Expectations of a Group Member

The following is an extended abstract of my recently completed dissertation. If you would like additional details or have questions, please feel free to contact me at LJT18@psu.edu.

Leann J. Terry, PhD

The primary focus of the current study was to investigate the effects of group leader’s interpersonal type and intensity of that type on expectations of a group member who was depicted as either Aloof-Introverted or Unassured-Submitive. This study statistically accounts for the amount of supervised group experience on the leader’s expectations of the group member. A secondary focus was on evaluating the circumplex ordering of the Interpersonal Adjective Scales (Wiggins, 1995).

The theoretical basis for the current study is rooted in the interpersonal field (Kiesler, 1983, 1996; Tracey, Ryan, & Jaschik-Herman, 2001). One model in this field theorizes that interpersonal behaviors can be classified into two dimensions: Dominance and Nurturance (Wiggins, 1995). Interactions between two people are influenced by the level of complementarity of their behaviors. Carson (1969) proposed that complementary behavior on the dominance dimension of behaviors is reciprocal (dominance pulls for submission, and vice versa). However, complementary behavior is corresponding on the nurturance behaviors (friendliness pulls for friendliness, and hostility pulls for hostility). Anticomplementary interactions are those in which the action on the dominance dimension is not reciprocal (dominance is met with dominance) and not corresponding on the nurturance dimension (a friendly act is met with a hostile act). As Tracey (1994) described, anticomplementary interactions are related to increased relationship stress and are viewed as aversive. Despite the potential for anticomplementary interactions to be influential in relationships between a group leader and group members, this has not been examined through research. This was investigated in the current study by focusing on the interpersonal traits of group therapy leaders and a fictional group therapy member.

An additional factor to consider, beyond the interaction of a group leader and group member’s interpersonal traits, is the group leader’s interpersonal traits themselves. Depending on a group leader’s traits, he or she will perceive the world differently and his or her behaviors will reflect that perception. Thus, two individual group leaders may perceive the same group member differently, based on the group leaders’ interpersonal traits. These different perceptions may cause different expectations for the same group member, and their behaviors would reflect these different expectations.

Research on expectations, such as that of Rosenthal and his colleagues, has a long history in the social psychological field. Relevant to the current study, Rosenthal and Rubin (1978) reported the mean effect size for interpersonal effects in the domain of person perception, or the perception of other people’s success, as $d = .55$. Thus, the expectations of how well someone will succeed, for instance the expectations a group therapy leader holds for the success of a group therapy member, is crucial to study. Swann and Ely (1984) provided an additional complication to this conundrum; they pointed out that people who start therapy may have feelings of uncertainty and may be eager to support a therapist’s expectations. Thus, an investigation of what are therapist’s early expectancies was warranted; particularly in the group therapy context where much less work has been done on expectancies.

The current study used two key process variables in the group therapy field: alliance and cohesion. Piper, Marrache, Lacroix, Richardson, and Jones’s (1983) definition of cohesion from the Cohesion to the Therapist Scale (CTS) was used. The CTS was modified to assess the group leaders’ perspective of what they think the client’s perception of them will be (i.e., their perceptions of the client’s cohesion to themselves, as therapists). Factor analyses were conducted to examine the structure of the revised CTS. The Working Alliance Inventory, Short Form Therapist (WAI-S; Horvath, 1991; Tracey & Kokotovic, 1989) is a 12-item self-report instrument to measure the therapist’s perspective of the working alliance. A modified version of the Working Alliance Inventory, Short Form Therapist (WAI-Short Form TM) was used to measure group leader’s expectations of the working alliance with the depicted group member.

The interpersonal traits of the group leaders were assessed using the Interpersonal Adjective Scales (IAS; Wiggins, 1995). The Interpersonal Adjective Scales is a self-report instrument that measures interpersonal traits across two dimensions: Dominance and Nurturance.

Group leaders were recruited using email solicitations via group therapy focused listservs and graduate level mental health programs. Participants completed an online survey, which included: the IAS (Wiggins, 1995); a randomly assigned group member description (depicting either an Aloof-Introverted group member or an Unassured-Submitive group member); questions assessing their expectations of that group member (the CTS-M and the WAI-Short Form TM); and demographic questions. The total sample size was one-hundred and twenty-eight ($N = 128$). Sixty-nine percent were female ($n = 88$) and thirty-one percent were male ($n = 39$), with one participant not indicating a gender. The mean age was 41 years old ($SD = 14.21$) ranging from 21 to 89 years of age. Forty-nine participants (38.3%) were graduate students and 79 (61.7%) were not graduate students. The mean number of supervised groups that participants conducted was 14.18 ($SD = 21.99$). Both the mode and the median number of groups conducted was 5.00 with a range from 0 to 99.

(Continued on page 18)
Therapist Characteristics

(Continued from p. 17)

The first research question, “Do scores on the Interpersonal Adjective Scale result in circumplex ordering?”, was answered using the circulant correlation model method for testing circumplex structure. Of three common methods (the circulant correlation model, circular order model, and the spatial representation model) the first is the most rigorous as it uses equality and inequality constraints (Gurtman & Pincus, 2000). The constraints can be imposed on the hypothesized spacing of the model on or the communality estimates. In the former case, this allows a test of whether the variables are spaced equally along the perimeter of the circle (Fabrigar, Visser, & Browne, 1997). In the latter case, this allows a test of whether all the variables have equal amounts of common variance (Fabrigar et al., 1997). The results demonstrated that the least restrictive model (unequal-spacing and unequal-communalities) fit the data best. A graphical representation of the polar angles/locations of the eight variables of the least restrictive model was given and compared to the location from Wiggins (1995). The circumplex structure found in the current analysis of the IAS lends support to the use of the interpersonal circumplex in future clinical applications.

Contrary to the hypothesis, it was not found that as the interpersonal type of the group leader became more anticomplementary to the group member’s depicted interpersonal type, the expectations about the client decreased. Also contrary to the hypothesis, it was not found that the more intense of an interpersonal type group leaders had, their expectations would be lower.

As hypothesized, there was a significant relationship between the predictors and the criterion variable of the (Dis)Satisfaction with the Leader’s Role from the CTS-M, in which the significant contributor to the model was a three way interaction between the group leader’s interpersonal type, intensity of that type, and the randomly assigned group member description.

To follow-up on the significant three-way interaction a probing of the simple slopes was necessary. Dawson and Richter’s (2006) method for testing significant slope differences was utilized. In addition, a graphical method was used. In a three-way interaction, there are six pairs of slopes that may be tested for significant differences. To evaluate this, six pairs of slopes were tested across the two randomly assigned client descriptions. Results demonstrated that when group leaders were randomly assigned a description of an Aloof-Introverted group member, the relationship between their interpersonal type and their expectations of how satisfied the member would be with their role was stronger when the intensity of their interpersonal type increased.

The current finding of an interaction between the interpersonal type, intensity of that interpersonal type, and the interpersonal type of a client has potential clinical implications. For example, a group leader who is more intense may be more rigid and have less flexibility in his or her potential reactions to clients. This group leader may be less likely to change his or her schema of a client. This may be problematic, given the current findings that intensity of the group leaders interpersonal type moderated the relationship between the satisfaction and their interpersonal type. If the Aloof-Introverted client actually is not as satisfied as the group leader believes, then it may be more difficult for this perception to change in group leaders who are more intense in their own interpersonal type. Thus, even with potentially inconsistent “evidence” regarding the satisfaction of a client, it may be that more intense individuals are less likely to change their perceptions. Further research is necessary to investigate this possibility. Additional implications of these findings and directions for future research were given.

References
Why Should Psychologists Be Concerned About Beginning Readers?

Elaine Clanton Harpine, PhD

Learning to read occurs during such a sensitive period of childhood development that reading can then affect us across our entire life span. If children successfully learn to read in first grade, then reading becomes a positive part of their life. If children are labeled as failures, at-risk of failing, or as slow readers, then reading can become the catalyst that leads to many school-based mental health problems (Oldfather, 2002).

Research has directly linked reading failure with classroom discipline problems, aggression, bullying, violence, delinquency, adolescent substance abuse, crime, dropping out of school, and the development of depression and anxiety (Catalano et al., 2003; Greenberg, Domitrovich, & Bumbarger, 2001; Greene & Winters, 2006; Miller, & Shinn, 2005; Prilleltensky, Nelson, & Pierson, 2001). Once a child falls behind, failure in reading begins to seep into every crevice of the educational process. Poor readers struggle to write, cannot read their social studies or science texts, have difficulty with story problems in math, and do not volunteer to participate in activities that require reading.

Reading failure leads to retention. Children who are retained are more likely to drop out of school before graduation (Natasi, Moore, & Varjas, 2004; Orfield, & Lee, 2005). Dropping out of school increases the likelihood of turning to crime (Snowden, 2005) or suffering from a lifetime of inadequate employment (Twenge & Campbell, 2002). Reading failure has also been linked with early signs of depression (Herman, Lambert, Reinke, & Ialongo, 2008). A perceived sense of failure is intertwined with mental health (Berking, Orth, Wupperman, Meier, & Caspar, 2008). Reading failure becomes a risk factor for depression because learning to read is a key step in early childhood development. Group interventions which reduce reading failure reduce such at-risk behaviors (Clanton Harpine & Reid, 2009; Fleming, Hamachi, Cortes, Abbott, & Catalano, 2004; Kellam, Rebok, Mayer, Ialongo, & Kalodner, 1994; Maughan, Rowe, Loeber, & Stouthamer-Loeber, 2003).

Learning to read is classified as the most important indicator of academic competence (Fleming et al., 2004) and is considered by many to also be one of the most important indicators of psychological wellness (Toppelberg, Munir, & Nieto-Castanion, 2006). When children’s reading scores improve, children’s mental and psychological well-being improves (Slavin & Madden, 2001).

Because reading is so closely intertwined with self-identity and early development, the teaching methods that we use to teach children to read become an integral component of school-based mental health. What happens in the classroom has a direct effect on the child’s psychological well-being today and throughout tomorrow. Reading is a developmental growth step that the child needs in order to be successful. If the child is not successful in learning to read, the stigmatization of failure will prevent the child from achieving his/her full potential.

New research is also showing that reading failure can be reversed. Through intensive training in word decoding skills, the white matter of the brain can be changed (Keller & Just, 2009). Students who were once labeled failures can become success stories.

By reversing the cycle of perceived failure that begins in first grade when children fail, it is possible to make a difference in the child’s ability to advance in school, succeed in life, and also prevent later psychological adjustment problems. As Albert Bandura (1995) has shown, negative self-efficacy can be reversed and children can overcome dysfunctional experiences.

If reading difficulties start children on the road to failure, then correcting reading deficits early should help prevent later school-based mental health problems. In 1998, G. Reid Lyons from the National Institute of Child Health and Child Development told Congress that correcting failure is essential, and that if we correct reading failure in the first grade then 90 to 95% of children improve and learn to read at grade-level. He went on to explain that 75% of children who read below grade level at the end of third grade never overcome their reading problems (Lyons, 1998; Lyons, 2002). Such a label can have devastating effects on a child’s development and adjustment throughout life (Miller, & Shinn, 2005; Nelson, Prilleltensky, & Peters, 2003; Ryan & Deci, 2000). Perceived inferiority reduces a child’s motivation and ability to learn. If you think you are going to fail, you typically do. Codes, colors, and numbers have not proven to be the least bit successful in keeping children from labeling their peers as smart or slow readers.

The inability to read cannot be separated from perceived failure; they must be treated at the same time in order to be truly successfully corrected (Bandura et al., 2001; Clanton Harpine, 2010). Therefore, a purely educational skill-building reading program is not enough to alleviate reading failure. Self-efficacy must be rebuilt.

The National Reading Panel (2000) found through a meta-analysis that small groups were more effective than one-on-one tutoring or classroom instruction as a means of teaching children to read. Groups have also been identified as a highly effective means of prevention with children (Kulic, Horne, and Dagley, 2004); therefore, the group setting becomes a natural choice for school-based interventions. Care is necessary, however, because reading groups can also stigmatize children.

We cannot simply place children in a group and think that the group setting will erase reading failure. Reading groups have been used for years and have failed (NRP, 2000). If the group is to serve as a venue for positive change, the necessary elements of change must be built into the group from its very beginning. A successful group prevention program needs to teach children to read effectively and also to erase the stigmatizing effects of failure.

Group-centered interventions (Clanton Harpine, 2008) can be used to bring about a change in behavior, learning, and psychological well-being with children and youth. A group intervention prevention program employing intrinsic motivators has considerable potential to address school-based mental health issues.

Learning to read is one of the most important stages of development in most children’s lives. Failure to learn to read or being classified as a slow reader hinders development. Helping children learn to read should become a major psychological goal in school-based mental health.

(Continued on page 20)
A Clinical Review of a Series of Sandplay Sessions in a Children’s Therapy Group

(*Please note names and other identifying details have been changed to protect the confidentiality of the clients.)

Elisabeth Counselman Carpenter

This article will discuss the benefits of clinical group therapy for children experiencing anxiety, stress and behavioral difficulties through the use of expressive arts, with a particular focus on the process of and benefits of group sandplay therapy. The “Creative Expressions Group” was designed for latency-age children and implemented at a family and children’s outpatient mental health clinic. The group was comprised of boys and girls between the ages of 9–13 who had terminated individual treatment, but continued to experience difficulties due to emotional dysregulation; often triggered by family or social stressors. The goals of the group were to: offer a means of non-verbal expression, encourage age appropriate socialization skills, increase self-awareness and build self-esteem through sharing experiences in a therapeutic setting. This was an open group with eleven children participating in the group throughout the year, with four members presenting from start to finish and another two members presenting for the majority of the year. The average number of attendees for the week was six group members. The group met for a total of 44 weeks, during which the children used drawing, paint, puppetry, collage, mask-making and sandplay to express their feelings and move towards healing. By group self-report, the most popular modality was sandplay.

Purposefully, sandplay was not introduced until the latter part of the year when the group was more established and had survived the tasks of the initial stages, particularly the tasks of understanding the purpose for being in the group and finding their unique niche within the group structure (Yalom, 1995). Sandplay requires a certain amount of trust between the group members and between each member and the facilitator because
each sand scene that is created by an aspect of the child’s psyche (Carey, 1999; De Dominico, 1999; Kalff, 2003). The children had experienced some turnover during the middle phase of the group and were just settling in to a routine with the group’s newest members.

The group sandplay process took place over a 6-week period during which most of the group members were able to complete four consecutive trays. Each group member was provided with their own tray to create their own ‘sand picture’ and a basket to hold their miniatures during the selection process. The trays were set up around the edges of two conference tables pushed together that served as the “working space.” The miniatures were displayed at the back of the room on a third conference table. Due to agency regulations regarding the space being used, the trays had to remain dry. The children demonstrated a natural inclination to play in the sand trays, so minimal explanation of the process was necessary. The directive given to the group was to initially take turns in groups of two to select their miniatures. After everyone had selected an initial number of pieces, the group members could return to pick more pieces at their discretion. The children were given 35–40 minutes to build the sand scenes. Then, the group spent 25 minutes sharing and processing each member’s tray as the group members were encouraged to give a title to their sand picture and, if they chose, to tell a story about the scene.

The rules given during this directive included not throwing or eating the sand or purposefully breaking the miniatures. Additionally, group members were encouraged to respect each other by not speaking during group members’ story sharing or reach into another group member’s tray without asking first. By actively staying out of the tray, the child is not interrupted in their process for self-healing and creative expression (Wienrib, 1983). Setting and maintaining boundaries is perhaps the most important task of the group sandplay facilitator. The tray is a microcosm of the psyche and to have another group member reach in to touch pieces or to move things around is a significant interpersonal violation. At times, this was an issue for a number of the children in the group, which created the opportunity to address issues of impulsivity and boundaries.

Yalom (1995) identified 11 primary therapeutic factors that help clients grow within group therapy. These include altruism, development of socializing techniques and universality. Group sandplay is a wonderful conduit for these factors to develop and assist the client with the healing journey. Powerful individual growth is facilitated through the sensory experience of moving and manipulating the sand and the miniatures while experiencing the group as a holding environment. Through this experience of group sandplay, the individual group members were able to address issues that had been difficult for them to confront verbally while making progress in reaching their emotional goals. In particular, sandplay helped them to develop social skills.

Yalom (1995) emphasized the importance of altruism in a group as a critical part of group process. Altruism occurs when group members experience through the act of giving itself, through listening, feedback and experiencing reactions from other group members (Yalom, 1995). Giving and receiving within the group creates an intimate environment in which healing can take place. Sandplay provides a unique opportunity for group members to give and receive and creates an environment for altruism to grow.

In any children’s therapy group, taking turns and listening are important but often challenging tasks. Depending on their developmental stage, children in group may struggle to use verbalization as a processing tool. While they may want to be supportive of each other, children sometimes struggle with what to say or the right way to say it. Also, children often interrupt one another and verbalizations can become more about attention-seeking behavior than processing one’s emotions. The sand tray, however, captures the children’s attention and draws focus to both the object and the tray’s creator. Group members learn to hone their skills in taking turns, as each member shares their picture. Group members also build upon both their narrative skills and listening skills during the sharing of each other’s pictures. Group members take turns in sharing their world in such a way that as the group listens to the story, a holding environment is created for the person sharing. By sharing of their time and attention during group sandplay, the children have the opportunity both to heal and be healed by listening to each other’s stories.

In addition to sharing of time and attention, group sandplay allows children to be tangibly altruistic through the selection process of the miniatures. Certain figures were very popular and often more than one child would look for the same figure to use for their scene. For example, the soldiers were highly coveted between two of the boys, David and Chaz*, who were close friends within the group. Both of these children had been in trouble for aggressive incidents either at home or at school. However, through the sandplay process, they had the opportunity to address some of their issues of sharing. On their own, without any intervention from the facilitators or other group members, they were able to negotiate and problem-solve in regards to who could use the soldiers. They decided to split the bin of soldiers in half one week, and subsequently take turns with them the next two weeks. There was never an incidence of physical aggression or verbal disagreement. The boys were proud of themselves about this negotiation. They stated to this writer, “…see, we figured it out for ourselves. Look, we found a way to share.” The look of pride on their faces demonstrated how empowering this experience had been.

Perhaps one of the most significant components of sandplay is the development of socializing techniques. The selection of miniatures process proved to be a period of growth and skill-building for children who had all been identified by professionals as having “social issues.” Earlier in the group process, the social interaction between group members necessitated encouragement and guidance from the leaders. However, during sandplay, group members progressively engaged in increasingly effective verbal interactions while choosing their pieces. They often encouraged one another to look through a bin that perhaps had been overlooked and most frequently helped one another find a miniature that was “lost.” For the first time, limit-setting regarding chatter and story-telling during the miniature selection period was needed because of the increase in children’s conversations about their ideas for their trays.

As stated earlier, respecting boundaries was a significant issue for a number of children in the group. One child in particular, David*, had difficulties with physical boundaries at school with his peers. He often was the target for bullying, and would let a situation continue without asking for help, which culminated in physical aggression directed at the bully. This often resulted in suspension from school further perpetuating his role as a social target. Furthermore, if a peer attempted to set limits with him, he would often cry or throw things. Within the group, his in-

(Continued on page 22)
that "we don’t have anything to talk about and I don’t want to be her
Lucy’s attempts and actively avoided her. She stated to the facilitators
to share stories and trying to sit next to her, DeAnna was rejecting of
reached out to DeAnna in group by asking her questions, attempting
as a child of divorce, Lucy spent time traveling between two homes.
and depression. Lucy’s family had significant financial problems, and
eight-year-old African American female, struggled with social anxiety
had a long history of behavioral issues and acting out behavior. She
One example of the experience of universality developed between two
children to recognize similarities between each other easier. The
growth (Yalom, 1995). For these children, knowing they were not alone in
mon bonds through perceived similarities and shared concerns which
(Yalom, 1995). Universality allows for group members to develop com-
mon bonds through perceived similarities and shared concerns which
eventually leads to acceptance of one’s issues and facilitates individual
growth (Yalom, 1995). For these children, knowing they were not alone in
their experiences was critical, but difficult to address directly. Due to the
nature of the group selection process, group members were particularly
diverse in regards to their ages, cultures, ethnicities, backgrounds and
presenting problems. Superficially, one of the only commonalities was
each child had been in clinical treatment, and at times, it was difficult
for group members to see the connections between one another. Often
the children would focus more on their differences, such as who had the
earliest birthday and which group member was in highest grade, rather
than who else had overcome social problems, or learned to manage
anxiety, or struggled with parents who divorced. Helping the children
find common connections in their emotional struggles was a goal that
was difficult to achieve. Sandplay provided an additional tool to teach
the children to recognize similarities between each other easier. The
sandtray becomes an object through which social relationships can be
built. As common themes develop in the tray and there is shared interest
in various symbolic figures, a visible connection between the children
develops that allows these connections to become clearer.

The sandplay process also played a role in facilitating universality which
was a challenge with this particular group’s demographics. In treatment,
clients often feel that they are unique in their suffering and experiences
(Yalom, 1995). Universality allows for group members to develop com-
mon bonds through perceived similarities and shared concerns which
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the children would focus more on their differences, such as who had the
earliest birthday and which group member was in highest grade, rather
than who else had overcome social problems, or learned to manage
anxiety, or struggled with parents who divorced. Helping the children
find common connections in their emotional struggles was a goal that
was difficult to achieve. Sandplay provided an additional tool to teach
the children to recognize similarities between each other easier. The
sandtray becomes an object through which social relationships can be
built. As common themes develop in the tray and there is shared interest
in various symbolic figures, a visible connection between the children
develops that allows these connections to become clearer.

One example of the experience of universality developed between two
of most ‘un-like’ group members, for whom finding a connection was a
particular challenge. DeAnna*, a nine-year-old Caucasian female,
had a long history of behavioral issues and acting out behavior. She
came from an intact, socio-economically stable background. Lucy*, an
eight-year-old African American female, struggled with social anxiety
and depression. Lucy’s family had significant financial problems, and
as a child of divorce, Lucy spent time traveling between two homes.
Initially, the girls felt they had nothing in common. While, Lucy often
reached out to DeAnna in group by asking her questions, attempting
to share stories and trying to sit next to her, DeAnna was rejecting of
Lucy’s attempts and actively avoided her. She stated to the facilitators
that “we don’t have anything to talk about and I don’t want to be her
friend”. The common bond that both girls shared was difficulty in mak-
ning and keeping friends.

Although Lucy and DeAnna perceived themselves as very different, in
the sand, their trays were often indistinguishable. Both girls’ sand pictures
focused on concerns surrounding family and domestic issues. Week after
week, they built detailed homes with rooms, furniture and decorations
on the walls. Although DeAnna chose people to live in her scenes, and
Lucy would choose animals, the stories they told were always similar in
terms of the tone and resolution. Themes are often reflected by one
another and carry over into one another’s trays, which is not uncommon in
group sandplay (DeDominico, 1999). As the girls looked at each other’s
worlds, they were able to recognize the mirrors between the worlds they
each had created. While earlier attempts had been made at pointing out
the similarities between DeAnna and Lucy through verbalization, they
were better able to grasp the commonalities after seeing them play out in
the sand. Slowly, DeAnna warmed up to Lucy’s attempts at building
friendship and a tentative bond developed.

The sandplay process of this group enabled group members to move
through issues which had been previously difficult to address in earlier
sessions. Sandplay allowed the group to develop altruism, address is-
issues of boundaries and limit setting, develop socialization skills and
demonstrated universality. Of all the different expressive techniques
used throughout the year, sandplay appeared to unearth some of the
more powerful hopes, dreams, fears and issues of each of the children
while provide a healing experience. Hopefully, other group facilitators
working with children will continue to research, explore and train in
this interesting and powerful modality in order to further understand the
benefits that group sandplay brings to the group process.

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Books.

Beth Counselman Carpenter, MSW, LCSW is a licensed psychotherapist
currently in private practice in Norwalk, CT. Beth holds a Bachelor of
Arts degree in Sociology from the University of Richmond and a Mas-
ters in Clinical Social Work from New York University. She is currently
pursuing her doctorate in Social Work at Adelphi University.

Her post-graduate studies include training in play therapy, creative
expressions and sandplay therapy. Beth has authored articles published
in Play Therapy Magazine and the East Coast Sandplay Journal. Beth
has guest lectured at Norwalk Community College and was a Division
49 presenter at the 2009 American Psychological Association Annual
Convention in Toronto, Canada. In addition, she frequently presents to
local community organizations and schools on such topics as stress man-
gement, play therapy, sandplay therapy, bereavement, and creativity.
**Student Highlight**

**A Tough Act to Follow: What Can Student Members of Division 49 Expect?**

*Gregory T. Capriotti & Kyle G. Barry*  
*Wright State University*

A new day has dawned for graduate student affiliates of Division 49 across America! As of October, 2009, we watched our past chair (and fearless leader) of the Student Committee Leann Terry enter into the land of the early professionals. While we will sorely miss Leann’s tireless work ethic, enthusiasm, and dedication to the Student Committee, she is doing exactly what the Student Committee for Division 49 is designed to do—allow students to integrate themselves into group culture early in their graduate careers. As an early professional, Leann is now in a great position to continue her contribution to the field of group psychology and group psychotherapy. Prior to her graduating, she already has several years of experience as an active member of an APA Division. What a great opportunity. Before Leann is officially an early professional, she needs to be appropriately honored by the student committee (this currently is not in the bylaws but we will be sure to suggest this to the Board of Directors).

Our involvement truly began in April of 2008, as Leann rallied the troops together and organized a meeting at the residence of our mentors Bob Conyne and Lynn Rapin. We joined Leann (along with fellow Student Committee member Leslie Markowitz) as she led the charge in shaping the future of Division 49’s Student Committee, through the development of a mission statement, complete with a list of goals and opportunities for student affiliates. This seemed a daunting task to complete in one afternoon, but we learned that the power of a group of dedicated individuals committed to the improvement of the division, could achieve great things. We truly witnessed the power of groups in action!

The day started out with a bang as we joined Lynn and Bob on their beautiful patio to have a delicious lunch, only to be greeted by rain as we all took our first bite. After moving inside and finishing our meal, the true work began. In an unexplainable way, the group interpreted this to mean that great things were to come! After several hours of discussion and a lot of dry erase board use, we drafted a very comprehensive and ambitious mission statement, along with a very nifty graphic representation, both of which can be seen in the July 2008 edition of *The Group Psychologist*. We all left the meeting with a sense of excitement and purpose, marveling in our dreams of a bright future for the Student Committee of Division 49. This meeting would not have happened without the vision and dedication of Leann. Bob Conyne described his “play by play” experience of the meeting in the same July 2008 issue of *The Group Psychologist*. In his words, “After a short while I realize that Leann is facilitating one of the most effective and enjoyable task group planning sessions I’ve been involved with over the years” (p. 5). Enough said! This is one of our fondest memories of Leann as our Student Committee Chair. The energy during that meeting is difficult to capture in words, but we can attest that it was palpable.

As we emerge into a new era of the Student Committee, we view our job as continuing to build upon the framework that Leann has been instrumental in establishing. The momentum of the Division 49 Student Committee is in full swing, in a very positive direction. We are calling out to all student affiliates of Division 49 and encouraging you to revisit the Student Affiliate mission statement on the division website as we can use it as a channel to funnel in new ideas for the improvement of our organization. We equally encourage faculty members, supervisors, group workers, and others who have interactions with students to encourage them to become involved with the Student Committee. We could not have imagined a more welcoming and friendly environment to develop our professional identity as group workers.

Leann if you are reading (and we know you are!), we wish you luck as you continue to on the journey toward a very promising career in group work and we thank you for your contributions over the past several years. It was a pleasure to have worked with you. We know you walk-the-walk and talk-the-talk of group work and have embodied the model we developed. We hope that you are enjoying the fruits of your labor through your tireless organizational participation, and the opportunities you helped create as Student Chair. Quite a legacy and big shoes to fill! We hope that other students follow your lead and engage with Division 49 in teaching, research, and practice as they develop their professional identity. The beauty of becoming involved in this division so early in our graduate careers as a Student Affiliate is that we will continue to be colleagues for years to come and our contribution to Division 49 as a whole has just begun. So, thank you and farewell for now from the land of the Student Committee. Students...stay tuned for great things to come!

Greg and Kyle are both 4th-year doctoral students at Wright State University School of Professional Psychology in Dayton, Ohio, and current Co-Chairs of the Student Committee for Division 49. Both are mentored by Dr. Martyn Whittingham.
Committee Reports

Development Committee Report

Nina W. Brown, EdD, Chair

A Development Committee was formed at the January 2009 Board meeting and was charged with marketing and publicity for Division 49, Group Psychology and Group Psychotherapy. Members of the committee are Jean Keim, President elect, Membership Committee Chair, Josh Gross, Finance Committee Chair, Student Committee Chair, Awards Committee Chair, Andy Horne, David Richels, and Leann Terry.

This committee will coordinate fundraising activities to support the missions of Membership, Awards, and Student committees. Additionally, the committee wants to enhance publicity activities, such as the web site, brochure(s), and logo design. The committee invites input and suggestions from all Division 49 members.

The first priority was the web site redesign as this was considered as urgent and important to advertise the division and its programs, market goods and services, announcements, and general communications to division members. Thanks to Leeann and Kyle, the services of a website design professional were secured and an audit of the site was conducted at no cost. The audit and recommendations were presented at the August Board meeting. The recommendations from the audit were pursued, but were found to be too costly. Upon review and consultation with APA, Don Forsyth (webmaster), and Steve Sobelman (former president and web site host who also pays the fees for the current web site), a more modest and phased update for the website is being considered. Dr. Sobelman also recommended a new host and server as he is no longer associated with the business that now hosts the site. Dr. Lee Gillis volunteered to organize this task.

A brochure is being developed by the APA graphic services after approval of the copy for the brochure. That design will not be started until January. Other projects under consideration include a flyer advertising our conference presentations and hospitality suite open hours to be placed in the 2010 conference totes, a brochure, a directory of members with paid advertising, and branded goods.

Several products advertising the division were reviewed at the meeting: magnets, clings, decals to be placed on materials to be disseminated such as candy bars, note pads, book marks, and a postcard size invitation to join the division. Also presented was the possibility of distributing materials at the convention via the exhibits table. There is a charge of $300 per item for APA to monitor and refresh the distribution table, and it requires a minimum of 750 of each item to be distributed. Also discussed was the possibility of placing postcards or brochures about the division in conference tote bags. The cost was estimated to be $3,000, and the idea was rejected by the Board. Instead, postcards advertising the division presentations will be developed in cooperation with the Program committee chair Dr. Riva, and these will be distributed at each presentation and on an exhibit table.

Double Our Membership by 2011

Elaine Clanton Harpine, PhD, Chair
Membership Committee

The membership committee has set a goal to double our division membership by January 2011, and we need your help. If each member will go out and enlist just one new member, our membership numbers will surpass 600 by 2011.

You may encourage a new early career person who is just launching their career in groups, a student, or someone, you know, who has worked with groups for years but never joined our division. You may also decide to sponsor a student or early career professional with a one-year gift membership. Remember, it is not required that you be a member of APA in order to be a member of Division 49.
A membership form is available on the back of this newsletter or a membership form is available online at http://www.apa.org/about/division/div49.html

The membership committee also realizes that simply doubling our membership will not make us a stronger division; therefore, we also offer four new interest groups for old and new members alike. So, when you enlist a new member, encourage them to get involved with a new group as well. An active member becomes a committed member who chooses to stay involved.

- Group Psychotherapy and Counseling
- Group Prevention
- Group Research
- Group Social Psychologists

The membership committee feels that these new interest groups will help us reach out and blend together the diversified interests of group psychologists and group workers everywhere. For more information, contact membership chair, Elaine Clanton Harpine at clantonharpine@hotmail.com or elaineh@usca.edu

Get involved! The count has started; we want to top 600 members by January 2011.
Ad Hoc Committee on School-Based Mental Health Group Interventions

Elaine Clanton Harpine, PhD, Chair

Our primary goal as a committee is to unify and emphasize group work in school-based mental health settings. Our primary accomplishment in 2009 was organizing our 2nd Annual School-Based Mental Health Group Interventions Conference, October 8-9, 2009 at the University of South Carolina Aiken. Our keynote speaker was Dr. Keith Herman from the University of Missouri. This conference was jointly sponsored by Division 49, USCA, and Division 27 of APA.

We are already making plans for our third annual School-Based Mental Health Group Interventions Conference. We have been asked to move the conference to different locations in order to make it easier for grad students to attend. We are reviewing the possibility of hosting the conference in Austin, Texas. Proposed theme: Preventing Academic Failure in Hispanic Communities.

We are continuing the Prevention Corner column in The Group Psychologist; the first column appeared in the fall/winter, November 2007 issue, the column has been included in each issue since November and we are presently working on respondents for the next issue. If you would like to submit an article or submit a reply, please contact Elaine Clanton Harpine at clantonharpine@hotmail.com

One of our primary goals as a committee in 2010 will be to continue emphasizing group research and organizing research teams. We have one research team, combining faculty and grad students from the University of South Carolina Aiken and Augusta State University. During our committee meeting at APA in Toronto, we discussed possible research team projects. Andy Horne volunteered in Toronto to submit a proposal for a research team for 2010. If anyone is interested, we invite you to join our committee. We feel that research teams will strengthen our efforts as a committee and as a division to pull together group workers in school-based settings.

We are also organizing a special issue request, combining the efforts of several Div. 49 researchers, to the School Mental Health journal (The special issue has been approved; we are still collecting the articles for submission.) and have made contributions to the upcoming special issue on prevention (emphasizing prevention in the schools) for Group Dynamics.

We welcome anyone interested in school-based mental health or working with groups in a school-based setting to join our committee.

Secretary’s Report

Jennifer Harp, PhD

Proposed Division Name Change
In the Fall 2009 newsletter, The Division initiated a vote to the membership on the proposed Division 49 name change. However, zero votes were received from that polling procedure. At the January 2010 Board Meeting, the Board agreed that an electronic vote was in order. Electronic voting ensued with a deadline of January 31, 2010.

With a total of 28 votes, 26 members voted in favor of the Division name change. One voted against the change. One member abstained.

Dr. Gary Burlingame, Division President, announced the results to the membership via the Division listsev.

Our membership has approved the proposal that we become the Society of Group Psychology and Group Psychotherapy. Final approval requires several phases of application and coordination with APA. These procedures will be carried out by Dr. Bob Conyne, Past President.

APAC Division 49 Mid-Winter Board of Directors Meeting
Presidential Conference Room
Embassy Suites Hotel
Atlanta, GA
January 9–10, 2010

Attendees: Gary Burlingame, PhD (President); Robert Conyne, PhD (Past President); Jean Keim, PhD (President-Elect); Lynn Rapin, PhD (Treasurer); Jennifer Harp, PhD (Secretary); Nina Brown, EdD (Member-at-Large); Kathleen Ritter, PhD (Member-at-Large); Irene Dietch, PhD (Member-at-Large); Maria Riva, PhD (Member-at-Large); Lee Gillis, PhD (Member-at-Large); Bob Kaltenbach, PhD (Council Representative); Andy Horne, PhD (Member-at-Large); Craig Parks, PhD (Journal Editor)

The mid-winter Board meeting was called to order at 8:40 AM on January 9, 2010.

Dr. Burlingame asked board members to introduce themselves with the reasons that they are “group people.” A lively, yet brief, sharing of experiences ensued. Dr. Burlingame then highlighted the themes (Continued on page 26)
Secretary's Report
(Continued from p. 25)

and relevance of board members’ experiences to our task in the weekend’s proceedings.

Dr. Burlingame then introduced the agenda and his goal of focusing on reports that require our fullest attention. Strategic planning was also named as a major goal for the weekend’s meeting.

The roster was circulated for updates.

The minutes from the August Board meeting were presented as approved (electronically, after the August meeting).

Past President’s Report
Dr. Conyne’s presidential activities were reviewed, including the initiation of formal strategic planning, bylaws changes and funding changes. The Division now has greater income, generated from its journal, and the implications related to changes in funding for the division were noted. The creation of three new student scholarships was finalized, as well as increased funding for the Dissertation Award. Dr. Conyne emphasized his theme of “prevention groups,” and the hope that Presidential themes will continue with each year. In closing, Dr. Conyne noted that he continues to encourage the development of new products, student representative involvement, and social activities through greater involvement of members’ participation in the Hospitality Suite. (for greater detail, see Past-President’s Report). Dr. Burlingame then recognized Dr. Conyne and his 2009 Presidency as providing excellence and significant direction for the Division.

President’s Report
Dr. Burlingame emphasized the Evidenced-based Treatment Conference and the Group Practice and Research network. Strategic planning is a priority at this time. The highlighting of membership activity and as well as prudent report review was requested as the meeting moved into its working phase.

President-Elect’s Report
In preparing for her 2011 presidency, Dr. Keim is focusing on economic stability and diversity issues. She also plans to continue and build upon strengths and direction identified in recent presidencies.

Treasurer’s Report
Dr. Rapin distributed and reviewed the report. Financial Report highlights were noted (for details, see report). Full year report will be available in February 2010. All 2009 charges still needing to be processed must be submitted to Dr. Rapin by January 20, 2010. Dr. Rapin addressed specific questions related to the specifics of the report. Planned costs for the coming year were anticipated and discussed. Dr. Rapin distributed Expense Report Forms (electronically) and Committee Expense Request Forms. Dr. Kaltenbach commented on APA’s financial realities and anticipated changes. Membership rates and activities were briefly reviewed as part of our financial picture. Up to $500 is available for the work of Standing Committees work and any special projects from Ad hoc or Liaison Committees.

Dr. Rapin asked that requests for such funds be submitted using the above Committee Expense Request Form.

Secretary’s Report
Dr. Harp briefly reviewed her activities with Bylaws revisions and updates. She raised some philosophical issues related to bylaws revisions. That is, how much do we want to be guided by the bylaws, or do we want to guide the bylaws? Historical context for this discussion was noted. Discussion ensued with board members expressing sensitivity to these issues as well as a commitment to moving forward with recent proposed and approved changes. Regarding the Division name change (to “Society”), it was noted that no ballots were received from the membership using the paper ballot. ACTION ITEMS: Implementation of Name Change. Poll the membership with electronic ballot with a deadline of January 31, 2010. Dr. Conyne to then oversee name change. The Executive Committee will be involved with and support the name change procedure.

Dr. Harp also asked for clarification regarding document and committee report preparation for board meetings. ACTION ITEM: Current presidents will determine the method to be used for the collection of such documents in preparation for board meetings. Preparation costs are a concern. Dr. Keim volunteered to provide us with feedback related to costs as she uses a trial preparation procedure for next year’s mid-winter meeting.

Publications Committee
Newsletter: Report and feedback from Dr. Treadwell were presented. Identified areas of concern were related to a need for more feedback from the Board and the Membership. This includes a need for more submissions from mid-level and senior members of the Division. As a body, the Board reaffirmed its support and appreciation of Dr. Treadwell’s work. Board members agreed to more actively support the newsletter with article submissions. Also, it was suggested that the newsletter editor attend the mid-winter meeting. A motion to this effect came from Dr. Conyne, seconded by Dr. Deitch. MOTION CARRIED. ACTION ITEM: The newsletter editor, in addition to the journal editor, will be invited to regularly attend mid-winter and convention board meetings.

ACTION ITEM: Approval of Dr. Treadwell’s request for Adobe product which will improve editorial capabilities. It was determined that this product will be part of the resource package provided for the Division newsletter editor.

Electronic Communication
In discussing publications and communications, Dr. Brown noted the need to distinguish between the listserv and the website. Lack of clarity related to role and function of those overseeing website and listserv was addressed. ACTION ITEM: Dr. Gillis to oversee the listserv and this will transition from Dr. Forsyth to Dr. Gillis in a manner that they work out together. Dr. Gillis will also explore options for the development of a new website.

Journal
Dr. Parks presented a full report of current journal issues. He noted that page limits have increased, (from 320 to 400); that numbers of manuscript submission along with lag time and its implications for publications are of concern (for details, see report) and that
methods for the amelioration of these lag time issues are being addressed. Editorship issues were discussed with Dr. Parks noting that our associate editors are active and effective. Dr. Parks noted some trends in submissions, stating that more were coming from Organizational researchers and Sports Psychology. Dr. Parks is employing a graduate student as manuscript coordinator. Journal operating funds are being maintained at WSU. Clerical support is provided by WSU. Dr. Parks has also clarified issues and questions related to APA’s calculation of rejection rate and explained how this is determined. Some ongoing difficulties with communications with APA were noted. A graduate student mentoring program in early phases of development. APA supports this program and is interested in learning about the mentorship program structure.

Financial Committee
Dr. Rapin, noting the time constraints and timing of the mid-winter meeting, suggested a meeting of the Financial Committee via electronic communication. This will be presented to the Executive Committee for approval.

Program Committee
Dr. Riva presented an update of Program Committee activities. Proposals have been reviewed and accepted. We have 14-hour blocks at the Convention plus others hours that will allow for flexible scheduling. Dr. Riva is now moving into the convention scheduling process. Dr. DeLucia-Waak will oversee the hospitality suite. Dr. Conyne indicated that there is a need to make the hospitality suite’s activities more visible. Scheduling of the Convention Board Meeting was discussed with the hope of finding a three hour block for this purpose. Logistical issues related to programming and scheduling were addressed. ACTION ITEM: We will identify some method for publicizing our program and hospitality suite activities to convention attendees.

Development Committee
Dr. Brown presented some creative ideas for recruitment at the Convention, suggesting ways to promote the Division, and weighed the costs of various approaches. ACTION ITEM: Board members and students will hand distribute cards that invites attendees to the Division Program and Social. Dr. Brown and Dr. Riva will coordinate efforts.

An electronic version of the brochure is also being created for listserv use. Fund-raising for Development was suggested. A discussion related to the establishment of a Foundation through APA then ensued. Various approaches for such an endeavor were considered, including ways to invite or voluntary contributions for scholarship and research.

Products and service that Division 49 might offer were also discussed and considered. Dr. Brown solicited input and feedback regarding possibilities and direction for the Development Committee’s mission. ACTION ITEM: It was agreed that our products need to be aligned with our strategic development. Research-related products (guidance, mentorship, expertise) seem to represent a unique contribution of our Division and board members engaged in some brainstorming for such possibilities.

Issues related to the Website development were discussed. The goal is a new design with ongoing management of the website. Dr. Gillis is willing to be on a subcommittee of the Development Committee to explore options for our website. ACTION ITEM: Dr. Gillis will develop a plan to move the website from our former company to our own independent operating capabilities. Dr. Gillis will develop a series of recommendations for web-redesign. Costs for various proposals will also be determined.

Education and Training Committee
It was noted that Dr. Sally Barlow submitted her report and it is available in the board meeting packet. The application for the Council of Specialties has been submitted and is awaiting approval.

Membership Committee
The Board reviewed Dr. Clanton-Harpine’s report and its recommendations. Special Interest Groups, liaison through Social Psychology networks, and thought given to strategies for implementation were considered and discussed. ACTION ITEM: Dr. Parks will network with Dr. Moreland and Division 8 to disseminate information about our division. Also, Dr. Parks will explore options with providing information to the Social Psychology website. Dr. Clanton-Harpine’s suggestions will be discussed in the Strategic Planning session. ACTION ITEM; Dr. Burlingame will contact Dr. Clanton-Harpine to suggest that she coordinate efforts with Dr. Brown. Dr. Kaltenbach also agreed to be in contact with Dr. Clanton-Harpine in order to provide support and communication.

Fellows Committee Report
Report reviewed. There are two requests from Richard Hayes: (1) Approval of Committee Members (2) Recommendation: Consideration of the current application pool and fellowship process. Discussion ensued with suggestions to be communicated by Gary to Richard.

Diversity Committee Report
Report reviewed. ACTION ITEM: Dr. Keim, in her role as Awards Chair, will work with the co-chairs for the development of a Diversity award through the Awards committee. Dr. Kaltenbach will update Dr. Michael Waldo and Dr. Shari Bauman as to APA’s Council of Representatives goals and activities related to Diversity.

Student Committee Report
Kyle Barry and Gregg Capriotti are involved with the Student Committee. ACTION ITEM: Nominees for Student Representative will be identified for the slate.

WORKING COMMITTEES
Annual Report by Bob Conyne: Previously submitted and reviewed.

Committee on Nominations and Elections
The slate was discussed and reviewed in preparation for the 2010 Election. The election slate was developed, will be finalized and Dr. Conyne will then submitted it to the APA office by February 16.

Committee on Award
The nominee for Group Psychologist of the Year award, Dr. Bill Piper, was approved by the Board.
Nominations for Elective Boards and Committees

Dr. Burlingame presented the list of Boards and Committees to the Board and asked for suggestions regarding nominations. No names were identified at this time, but Dr. Burlingame remains open to suggestions.

LIAISON REPORTS

Council of Representatives Report

Dr. Kaltenbach presented his report with a continued emphasis on the financial health of APA. APA has enacted numerous budget revisions, cost containment measures, dues policy changes, cancellations of activities and a reduction in work force. Implications for APA and the Division were presented to the Board. Reactions and ethical considerations related to these changes were also considered. Those interested in further details may contact Dr. Kaltenbach for discussion and/or explanation.

Federal Advocacy Coordinator’s Report

Dr. Gloria Gottsegen’s report was noted and reviewed. APA’s advocacy work was highlighted. ACTION ITEM: Dr. Rapin to ascertain costs of ongoing participation with the Federal Advocacy role and other possible funding opportunities. The Board will consider liaison role as part of our Strategic Planning efforts.

AD HOC COMMITTEES

GPRN

(Preliminary GPRN Survey Results were presented. ACTION ITEM: Board members were reminded to complete survey, if they have not already done so. Continue to look for consensus related to inter-organization priorities. Consider feasibility and logistical realities of future meetings and goals related to this project. Dr. Burlingame will keep us apprised.

Social Justice, Public Interest & Public Education Committee

Dr. Deitch presented her committee report and commented on her communications with the Board. Dr. Deitch explained the procedures involved in moving toward Division/Liaison participation with the Social Justice committee. Financial considerations and priorities related to such a decision were discussed and considered. ACTION ITEM: Ad hoc committee reestablished for 2010. Dr. Deitch will report back to the Board with more information related to the Division of Social Justice and will coordinate efforts with Dr. Ritter.

Research Committee

RSGT: Report reviewed and presented by Dr. Burlingame. Of concern is the finding that group treatment is currently losing ground in terms of funding trends.

Diplomate and Credentials Committee:

Report was presented and reviewed. ACTION ITEM: Identify a new Chair for 2010.

Committee on School-Based Mental Health Group Interventions

Dr. Clanton-Harpine’s report was presented and reviewed. ACTION ITEM: A request for funding for the School-Based Mental Health Conference. Dr. Burlingame motioned that the Division support the request; Dr. Rapin seconded the motion. MOTION CARRIED.

STRATEGIC PLANNING SESSION

Dr. Burlingame suggested a SWOT analysis method of tracking current initiatives and activities. Grid analyses involving committees and activities in the Face of Division, Membership Identification, Member Benefits, Infrastructure, Liaisons were conducted in a preliminary fashion. Board members contributed to the discussion identifying current status of the Division in these areas. Board members also identified various aspirational goals.

Dr. Parks succinctly identified the unifying underlying principle that guides group work in all areas of the Division. His words proved to be both clarifying and powerful in the strategic planning discussion. ACTION ITEM: Dr. Parks will write a succinct paragraph related to the underlying principle which guides group work. He will provide Dr. Burlingame with a copy so that this statement can be shared in publicity for our Division. We then considered our presence and relationship with other organizations and ways that other organizations might identify with our Division. Dr. Conyne noted that Dr. Parks captured a part of our Mission Statement. Dr. Kaltenbach proposed that the statement might also serve as an Editorial Statement. Also, as part of our product development, Dr. Parks will investigate publications possibilities when he meets with APA.

ACTION ITEM: Dr. Burlingame requested that all committee chairs and members consider where they are in the grid, whether it be related to current status or aspirational goals.

ACTION ITEM: Identify areas for ongoing and future focus: Areas identified as GPRN. CoS. RSGT. Sunset inactive roles and committees.

ACTION ITEM: A poster with the grid to be posted at the Hospitality Suite; A Strategic Planning meeting to be held in the Hospitality Suite in San Diego.

A group picture of the current Board of Directors was taken.

Closing

Dr. Burlingame reviewed and summarized the themes of our strategic planning. He also identified our areas of work for the day and a half of meeting. He thanked the Board members and encouraged ongoing awareness of the strategic lens we are agreeing to use in our planning efforts.

The mid-winter meeting was adjourned at noon on January 10, 2010.
The Board had its mid-winter meeting again at an Atlanta airport hotel where they treated us very well at reasonable expense. Our commitment to reduce costs is continuing, but we are also moving forward on decisions to spend dollars wisely for the division. See Presidential column and Meeting Minutes to see more detail. APA will be providing me with the final 2009 audit of our account and I will inform the membership of final 2009 expenditures at that time.

If you are a committee chair and have an idea you wish to pursue, please follow Bob Conyne’s suggestion for completing a request or contact me at lynn.rapin@uc.edu for request forms. We want you to help the board in making the division user friendly.

The second initiative is to develop a Family Caregiver “Briefcase” of resources for psychologists treating caregivers. This, too, would be a compendium of psychological information on the APA website that would provide resources on assessment, intervention, planning tools, and information to share with patients. Information is being sought, so pull that old paper of the shelf and send it in.

APA advocacy will focus on Health Care Reform to include parity and increased recognition of psychologist competency in prevention and wellness and to reduce health care disparities.

A professional production will put a “new face” on the opening ceremonies of the convention in San Diego. The goal is to create a greater sense of community by welcoming families and guests, not just members, to the activities. There will be a “bring the family” event, a “Kids’ Camp,” a reception for members (not just VIPS) at the sculpture gardens at the Mingei Museum, and hands on training sessions. It’s a good year to get involved.

From Our APA Council Representative

President Goodheart's Presidential Priorities

Robert Kaltenbach, PhD

One of the more exciting presentations at the Midwinter Council of Representatives meeting was President Carol Goodheart’s opening address launching the priorities and goals of her Presidency. Her positive tone was infectious, and her goals are both attainable and beneficial.

At the top of the list of priorities is to “Foster Collaborative Leadership,” which was demonstrated through the all discussions. She is seeking input and involvement from all members. This can involve us as a division or as individual members as you will see below. The next goal “Integrating Science and Practice to Advance Psychology,” has two major initiatives: an Advancing Psychology Task Force and a Caregivers Task Force.

The Advancing Psychology Task Force was created to develop and disseminate resources for practitioners. The major product will be PsycLink, the Practice Wiki, which is an at-your-fingertips online information resource which members may access and share clinical information and practice tools. Karen Zager, chairperson, is seeking volunteers to write the knowledge base and an additional 200 volunteers to “test drive” accessing the Wiki and evaluate the information. One may volunteer directly to Karen.

The second initiative is to develop a Family Caregiver “Briefcase” of resources for psychologists treating caregivers. This, too, would be a compendium of psychological information on the APA website that would provide resources on assessment, intervention, planning tools, and information to share with patients. Information is being sought, so pull that old paper of the shelf and send it in.

APA advocacy will focus on Health Care Reform to include parity and increased recognition of psychologist competency in prevention and wellness and to reduce health care disparities.

A professional production will put a “new face” on the opening ceremonies of the convention in San Diego. The goal is to create a greater sense of community by welcoming families and guests, not just members, to the activities. There will be a “bring the family” event, a “Kids’ Camp,” a reception for members (not just VIPS) at the sculpture gardens at the Mingei Museum, and hands on training sessions. It’s a good year to get involved.

Significant Actions of the Council of Representatives Midwinter Meeting 2010

Your APA Council of Representatives held the Midwinter Meeting on February 19–21, 2010 in Washington, DC. Below are brief summaries of actions and points of interest.

APA did not have a deficit budget in 2009 as anticipated, but was relieved to have a $6+ million safety margin. This was due to increased sales from the early release of the Publication Manual and severe cost cutting measures. The 2010 budget was held to the same amount as 2009.

We have a new user friendly website (apa.org) and a new Practice Organization website (APA Practice Central). Council approved the first Core Values Statement. To wit “The APA commits to its vision through a mission based upon the following values:

Continual Pursuit of Excellence,
Knowledge and its Application Based on the Application of the Methods of Science,
Outstanding Services to its Members and to Society
Social Justice, Diversity and Inclusion
Acting Ethically in All that We Do

(Continued on page 30)
From the Council Representative

(Continued from p. 29)

Revised Model License Act is accepted after much debate. The sticking point was the status of “School” and I/O Psychologist. The compromise regarding the title of school psychologists is that unlicensed persons (PhD, EdD, SEd, MA) may use the title psychologist if “school” is in the title and credentialing is provided by a state education authority or by statutory provisions.

See exact wording as follows:

*Nothing in this Act shall be construed to prevent (cite relevant state education authority or statutory provisions) from credentialing individuals to provide school psychological services in those settings that are under the purview of the state education agency. Such individuals shall be restricted in their practice and the use of the title so conferred, which must include the word “school,” to employment within those settings. This provision is not intended to restrict the activities of licensed psychologists.*

I/O psychologists may use the title if licensing is optional or not required by the state. They may not offer individual or group therapy without a license.

Association Amends Ethics Code to Address Potential Conflicts Amongst Professional Ethics, Legal Authority and Organizational Demands

Add Language Reiterating that ‘Under No Circumstances’ May Standards Be Used to Justify Violating Human Rights

The American Psychological Association has amended its Code of Ethics to make clear that its standards can never be interpreted to justify or defend violating human rights.

The action, which came during the winter meeting of APA’s governing Council of Representatives, amended the Codes Introduction and Applicability section, as well as Ethical Standards 1.02 and 1.03, to resolve any potential ambiguity in the original language. These changes become effective June 1, 2010.

“APA’s longstanding policy is that psychologists may never violate human rights,” said APA President Carol D. Goodheart, EdD, Saturday in announcing the changes. “These standards now unequivocally conform to that policy.”

The standards, from APA’s “Ethical Principles of Psychologists and Code of Conduct” (2002), address situations where psychologists’ ethical responsibilities conflict with law, regulations, other governing legal authority, or organizational demands. Previously, it appeared that if psychologists could not resolve such conflicts, they could adhere to the law or demands of an organization without further consideration. That language has been deleted and this new sentence added: “Under no circumstances may this standard be used to justify or defend violating human rights.”

The meaning of these two standards (1.02 and 1.03) was called into question during the last Bush administration when the Justice Department issued legal rulings authorizing so-called enhanced interrogation techniques.

“These amendments to the Ethics Code provide clear guidance to psychologists regarding their ethical obligations when conflicts arise between psychology ethics and the law or ethics and organizational demands,” said APA Ethics Director Stephen H. Behnke, PhD. “This action by the Council of Representatives makes all psychologists’ ethical responsibilities abundantly clear.”

Following are the two ethical standards and the changes adopted. Language that is underscored was newly adopted; language in brackets and with strikethrough was deleted.

1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority

If psychologists’ ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists clarify the nature of the conduct, make known their commitment to the Ethics Code and take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.
1.03, Conflicts Between Ethics and Organizational Demands

If the demands of an organization with which psychologists are affiliated or for whom they are working are in conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.

The American Psychological Association, in Washington, DC, is the largest scientific and professional organization representing psychology in the United States and is the world’s largest association of psychologists. APA’s membership includes more than 152,000 researchers, educators, clinicians, consultants and students. Through its divisions in 54 subfields of psychology and affiliations with 60 state, territorial and Canadian provincial associations, APA works to advance psychology as a science, as a profession and as a means of promoting health, education and human welfare.

Questions? Contact Rhea Farberman, Public Affairs Office, at 202-336-5700 or Public.affairs@apa.org.

APA Council Votes to Move Its August Meeting Out of the Manchester Hyatt Hotel

The Council of Representatives, the major legislative body of the American Psychological Association, will not meet at the Manchester Hyatt Hotel during the Association’s August 2010 Convention.

In response to a donation to the Proposition 8 campaign by the owner of the Manchester Hyatt, Doug Manchester, a number of APA Divisions and members voiced concerns about APA’s use of the hotel during its annual meeting.

“Today’s decision allows Council to make an important statement that it stands in solidarity with the LGBT community and its allies in protest of Mr. Manchester’s political views. Members of our Council will now not be faced with having to choose between their responsibilities as members of Council and their wish to express their opposition to Mr. Manchester’s action by not entering his hotel,” said APA President Dr. Carol Goodheart.

APA is not calling for a general boycott of the Hyatt hotel but will make every effort to provide choices to members or groups who do not want to use the Hyatt hotel. Other lodging and meeting space will be available.

“It is important that we be respectful of the decisions of individuals; those who choose to stay at the Hyatt and those who do not,” said Goodheart.

In addition, APA plans to use the meeting to highlight the Association’s policy statement in support of same-sex marriage and the science that supports that position.


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Listserv

Are you participating in Division 49’s e-mail listserv? If not, then you’ve missed out on many interesting and potentially valuable messages about job opportunities (academic and nonacademic), calls for papers in special journal issues, conference announcements, and so on. The listserv has also allowed members to consult with one another on issues of mutual concern, such as evaluations of various therapy techniques. Several hundred Division members are already on the listserv—if you want to join them, contact Don Forsyth at dforsyth@richmond.edu.

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Change of Address?

Do you have a change of address? Question about your membership status? Please call the Division Services Office of the American Psychological Association at 202-336-6013 or e-mail division@apa.org.

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Help Us With Our Membership!

Please encourage your colleagues to join Division 49. An online membership form is now available at http://www.apa.org/about/division/div49.html. Our Membership Chair, Elaine Clanton Harpine, PhD, will be pleased to help. She can be reached at ElaineH@usca.edu.
Dear Worried,

I’m glad that you are reaching out for support in helping this student. Successfully educating students with challenging behaviors requires a team approach and strong support systems for teachers. The case you describe raises a variety of complex issues that require careful consideration. The first thing you need to do is refer the student for a special education evaluation using the established process in your district. In most districts, this involves contacting your behavior support team, school psychologist, and/or the special education administrative office. Under the Child Find provision of the Individuals with Disabilities Education Improvement Act (IDEIA), school districts are required to initiate a special education evaluation whenever school personnel have reasons to suspect a student may have a disability. As you note, the school district is aware the child has been diagnosed with ADHD and also that his associated behaviors are interfering with his education. Moreover, his reading skills are delayed. Thus, he may be eligible for special education under two categories: Other Health Impairment and Specific Learning Disability. A thorough evaluation is needed to make this determination. If he does not qualify for special education, he almost certainly would be eligible for legal protections under a 504 Plan (part of the Americans with Disabilities Act) which requires the school to provide accommodations and/or medications related to ADHD impairments.

It is very important for you to know that IDEIA provides extensive legal protections for students and families. Under federal law (IDEIA) schools cannot require students to take medication; in fact, you may want to let your principal know that there is legal precedent for requiring schools to pay for medications that they recommend to a student. Additionally, schools cannot force parents to home school their child. This is the very reason that education disability laws were first enacted forty years ago; to ensure that all children had access to free and appropriate education. IDEIA laws protect students even in private education settings. Aside for fulfilling the schools legal responsibility, the thorough evaluation provided by special education referral will be helpful in planning needed supports for this student. The process should involve a team of professionals and the student’s parents who will together plan, implement, and monitor his behavior support plan.

Part of the plan certainly will need to include supports to help him be more successful in your classroom. Although the specifics of the plan will depend on the results of the evaluation, there are many resources available to help teachers create more ADHD-friendly environments. The National Resource Center for ADHD (http://www.help4adhd.org/) is a good place to start. In general classroom management strategies focus on structural changes to the classroom environment (reducing distractions, providing quiet workspace,
surrounding student with prosocial peers), teacher behaviors (providing clear expectations, giving high rates of reinforcement for meeting those expectations, closely monitoring of his behaviors), and student supports (visual schedules, self-monitoring routines, recruiting attention).

As you note, a major concern for most children with ADHD is their social skills. One evidence-based practice for supporting the academic and social development of students with ADHD in the classroom is a practice called Classwide Peer Tutoring (CWPT). You can find more information and resources about this method at the What Works Clearinghouse (http://ies.ed.gov/ncee/wwc/reports/beginning_reading/cwpt/index.asp). The review at this website focuses on its general effects for all students in a classroom, but there are several other studies that have shown very positive effects specific to students with ADHD. When combined with peer coaching, CWPT has been shown to not only improve academic skills but also social skills across settings.

Finally, I would encourage you to work with your school counselor to incorporate social skills lessons into the classroom. Most school counselors are trained to teach social skills in classroom settings in as few as two 20 minute sessions a week. The student you describe though would need additional supports to help these lessons stick. For one, he may benefit from small social skills groups focused on teaching and practicing specific skills that he is lacking. Bear in mind that children with ADHD require high adult to student ratios (on the order of 1:2) for them to be successful in small groups. Also, research has shown that children with ADHD will not acquire lessons taught in social skill groups unless there is also a plan to generalize these skills outside of the group setting. In other words, he would need adults to help prompt him to practice and use the skills in the settings where you want him to use the new skills (e.g., in the classroom, cafeteria, playground). All of this should be part of the planning generated from the behavior support team that forms related to your special education referral.

I wish you success in your efforts to support this student. Your concern for his welfare is justified. You may be one of his last lifelines to keep him from falling through the cracks.

Keith Herman, PhD
University of Missouri

Dr. Keith Herman is an Associate Professor in the Department of Educational, School, & Counseling Psychology at the University of Missouri. Dr. Herman chiefly teaches doctoral coursework in the areas of parent behavior management, developmental psychopathology, and research design. Originally trained as a counseling psychologist at the University of Florida, Dr. Herman retrained in school psychology at the University of Oregon and also completed postdoctoral fellowships at Brown University and Johns Hopkins University. Most recently, he was a faculty member in the School of Medicine at Johns Hopkins University. His research takes a prevention science approach to understanding, preventing, and treating child depression. He has developed a conceptual model describing social developmental pathways to child depression with emphasis on modifiable aspects of schooling and parenting that contribute to children’s risk.

Federal Advocacy Coordinator Report

Gloria B. Gottsegen, PhD

Each year Division and State Federal Advocacy Coordinators join together at their annual March meeting to visit their respective congressional representatives to lobby for legislation important to the science and practice of psychology. In addition, they are responsible for organizing division members to be more active in federal advocacy.

Gloria Gottsegen, Division 49 Federal Advocacy Coordinator, attended the State Leadership Conference in Washington, DC, March 5–9, 2010. The conference’s main theme was "The Power of Advocacy."

Among the keynote speakers to the conference were The Honorable Alexis M. Herman, former U.S. Secretary of Labor; Ray Pollack, JD, Executive Director of Families USA; The Honorable John J. Cullerton, Illinois State Senator; The Honorable Olympia Snowe, U.S. Senate and Alan Rosenblatt, Center for American Progress Action Fund.

Delegates attended workshops on such diverse topics as: The Psychologically Healthy Workplace; The Politics of Health Insurance Reform; Maintaining Education and Training Requirements for Psychological Testing; The Tools May Change, but the Strategies Remain the Same; Parity in Practice: From Passage to Implementation.

Among the actions for which APA Federal Advocacy Coordinators are seeking congressional support are: the Medicare extension through 2011 of the restoration of the reimbursement cut; Making psychologists eligible for psychotherapy code reimbursement; adding psychologists to the Medicare “physician” definition and the passage of health reform that integrates psychological services in primary care, preventive services and benefit packages.
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American Psychological Association
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