


BC PSYCHOLOGIST

Summer 2008 Edition



Media & Psychology

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President's Column



Dear Colleagues,

It has been an interesting first half of the year, although it is spinning by much too quickly! We have the opportunity to respond to government needs and interests in mental health care delivery. Clearly there should be conspicuous roles for psychology in assessment, diagnosis, therapy, and research in a provincial mental health care plan. However, government and consumers generally don't know enough about what we do.

In May, I had the valuable opportunity to accompany Drs. Andrea Kowaz, Michael Joschko, and Leora Kuttner to Victoria, where we presented some suggestions to members of the BC Liberal caucus about what psychology can provide to the development of public healthcare and mental health services, and why qualifications, regulation, and accountability are important features to recognize in identifying service providers. Caucus members were responsive with questions and comments, one of which -- "How come we haven't heard more from your organization?" was quite concerning. We were also given opportunity to respond to questions regarding the assessment and treatment of autism, and asked to provide a written brief which we have since forwarded. Dr. Kowaz and I were also able to meet with non-elected officials in the provincial government, including people with responsibility for "Act Now". Overall, the idea was reflected that government is interested in constructive input from relevant professions, but that we need to be available to become relevant.

At present, we have opportunities to increase our presence with government through continuing meetings and responding to specific questions. A current initiative that we could look to contribute to and participate in is "Act Now" -- a government program oriented to promoting healthy lifestyle choices. Other topics, interests and current efforts in the area of advocacy for the profession would include: public education about who we are and what we do; organization of current research reflecting on psychological treatments and relative efficacy compared to medication in the treatment of various disorders; current research of the contribution of psychological interventions to the treatment and rehabilitation of serious medical disorders and injury; participation with and contribution to other groups working on access to psychological services, such as the B.C. Coalition of

Persons with Disabilities and the B.C. Alliance on Mental Health and Addictions; and representation of psychologists working in the public and private sectors.

I tend to emphasize issues that reflect generally on advocacy, but also we need to recognize various other activities of the Association that would benefit from more involvement, i.e. with the Forum/ listserv, the Newsletter, the Psychologically Healthy Workplace committee, Disaster Relief Network, the Continuing Education committee, initiatives with early career psychologists and graduate students, and the services to members coordinated by our office staff.

I believe the profession will benefit from increased member involvement -- bringing energy and ideas to our committees. It is our hope in circulating this newsletter to all Registered Psychologists of the province that we will reach more of you who want to get involved. I look forward to hearing from you.

Best Regards,

Mike Foreman, Ph.D., R.Psych.
President, BCPA Board of Directors



Drs. Michael Joschko, Mike Foreman, Leora Kuttner, and Andrea Kowaz (L to R; front) with the BC Liberal Caucus on May 7, 2008.



Letter from the Director of Administration

Dear current and future BCPA members,

I am pleased to present the July edition of the BC Psychologist. As part of our annual “membership drive”, I think it is important to address all Registered Psychologists as our aim is to gain strength in numbers.

The BCPA is striving to build a solid relationship with the people and government of BC and to be a strong advocate both for the science and profession of Psychology and the mental health of all British Columbians.

We are reaching out through a variety of programs, initiatives and methods. One of the most thriving and widely accepted programs is the Psychologically Healthy Workplace Awards. This program, which works with businesses and employees to foster wellness in the workplace, has been recognized by the American Psychological Association as one of the most successful on the continent.

Another such initiative is the Disaster Response Network, through which BCPA members volunteer to help in the event of disasters. Helping the community of Prince George deal with the stress and uncertainty caused by the ice jam during the winter of 2007/08 is just one example of the types of crises we have responded to. The Disaster Response Network is not only a wonderful way of helping in times of need, but also to foster goodwill with the people of BC and to broaden public perceptions of the science of Psychology and the role it plays in their lives. Further, by working together with the Provincial Disaster Response Team we are also strengthening our position with the government as providers of much needed services.

Our advocacy work with the government and other agencies within the province and on the national stage have seen us working with a variety of organizations including the BC Alliance on Mental Health and Addiction Services, the Health Sciences Association of BC, the Canadian Register of Health Service Providers in Psychology, the Council of Provincial Associations of Psychology and others. We are making a concentrated effort to increase the strength of BCPA, and you joining with us would only further this cause.

All of these efforts have increased our profile and have succeeded in helping British Columbians in a very real way. But why else should you join and work with BCPA? Well, there are many reasons, here are but a few:

- Discounts on Liability Insurance,
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- Discounts on Continuing Education workshops and events
- Free admission to the Annual Awards Reception and Cocktail Social
- Networking with others
- Free subscription to the *BC Psychologist*

The theme of this edition is “Psychology and Media”. Media: to some it means television, radio or the movies; to others it means the internet, photography or the arts. Clearly, “media” is something that affects us all – both personally and professionally. As such we have placed a specific focus on media’s influence on both the profession and the mental health of British Columbians. We have tried to bring together articles and information that will prove to be of interest, and of use. For those of you who wish to learn more, we have also included a resource listing in the members-only section of our website.

Like all media, this publication and its message are designed to affect the receiver by motivating action. I hope that it will motivate you to continue to support our initiatives and to be more involved. For those of you, who are not-yet members, I hope YOU will be motivated to join us.

At your service,

**Rebecca Smith
Director of Administration**

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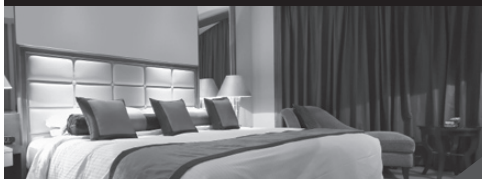
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Lights, Camera... How Does That Make You Feel?

Media Psychology from the Front Lines

by Cheryl Fraser, Ph.D., R.Psych.

I am often asked “How can I become a Media Psychologist? I want to do what YOU do!” Usually the person asking is an undergraduate or graduate psychology student who has seen me on TV and thinks my job is “really cool”. I am also often asked “Why (with an implied ‘on earth’) would I ever become a Media Psychologist?” Usually the person asking that is an experienced psychologist, and they think my job is ...odd. And has nothing to do with “real psychology”. And that makes me smile.

I don't know how anyone else becomes a Media Psychologist, but I've been asked to share with you how I did, and some about what I do.

I became a Media Psychologist because I like people, I love psychology, I like to educate and entertain, and I am really tired of the public thinking psychologists are fat dudes from Texas stalking Britney Spears for a story or right wingnut poseurs spouting radio preaching they never practice and using condescension and the power of a mute button to humiliate their listeners.

And I became a Media Psychologist because I am really, really good at it. Believe me, it is a lot harder than it looks.

My background lends itself to this work in two ways. First, I am a trained actor, comedian, improviser, and public speaker with over 30 years experience. Some highlights: I have studied acting with Drama Studio London, England, Improvisation with Theatresports founder Keith Johnstone, voice and elite public speaking with Richard Greene (who has coached presidential candidates, top actors, and Princess Diana...nice company to be in), talk radio technique with Sabo Media, NYC, and I have been trained by and shared the stage with the top motivational speakers in the world. I am a professional actor, regular improvisation performer, and founding member of Rock Paper Scissors comedy troupe.

And a lot of it comes naturally. For to be a great media psychologist, you need to be able to think on your feet at a speed that leaves light in the dust, weave through the reporters question like a cheetah in a rattlesnake field and instantaneously produce a succinct, entertaining, educative,

funny, charming soundbite. Without swearing. Okay, that last part doesn't come easily but hey, I am a professional. Don't try this at home.

The second relevant aspect of my background is of course my training as a psychologist. (Otherwise I'd be a media... something else.) I obtained a B.Sc (Hons) in psychology at UVic, then completed an M.A/Ph.D clinical program at SFU. I won over \$100,000 of awards and scholarships, and I was awarded the gold medal for best undergraduate psychology student from the BCPA (a tradition that I hope we continue) and the Dean's medal for the top Ph.D candidate across all disciplines at SFU. Next I was awarded a Fulbright fellowship for a two year internship and post-doc at the University of California, San Francisco. I then established a private practice in Vancouver, and one on Vancouver Island. I taught at SFU and Malaspina University-College, and was associate director of the Clinical Psychology Centre at SFU. In other words, I'm no slouch, professionally.

And the media couldn't care a bit about that second part... the whole wildly well trained, academically lauded, super credible bit. And that is what you really need to know about Media Psychology.

The media is about entertainment. Period. Except for PBS, and okay, sometimes CBC, really, the media is about entertainment. I may not like it, you may not like it, but the media is in business to keep people from switching the dial. And my job, as a Media Psychologist, is to keep people listening. How do I do it? You guessed it. By being entertaining. At least, my granny sure thinks I am. It works in business, it works in love, and it absolutely works in Media Psychology. Find out what they want, go and get it, and give it to 'em.

Now, here's the catch. As any of you who know me personally are aware, I rarely do what I am told, and I prize integrity and compassion above all else. So, while I could make millions doing sleaze media, (Dr. Cheryl at the Pickton farm with grieving relatives...) my personal

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challenge is to give 'em what I want, while making them (the media) happy by also providing what they want. So my Dr. Cheryl mandate is "Infotainment". Hey, nowhere is it written I can't be entertaining AND informative, funny AND deep, irreverent AND helpful. My mandate is to throw a lot of good psychology into my media. And we both, my media and I, leave the table happy.

Some of you may still be wondering what all this media psychology actually entails, so let me tell you about my last 10 days. On a Friday, I was woken up at 2:45am PST because Newfoundland wanted to interview me...I was expecting to begin seven CBC radio interviews with stations across the country at 4am, but those darn Newfies wanted on the Dr. Cheryl train. So I gave eight interviews over three hours - some of them were live on air, some were pre-taped. All of them were on the topic of workplace stress and whether vacations are necessary (did you know there are 41 million unused vacation days in Canada?) The next day I guested on a Vancouver radio show speaking about a new study of female sexuality out of Ontario that was widely misinterpreted in the media as indicating that most women are bisexual. I sourced the original research and interpreted it correctly for the public...but the trick is, I was also funny, entertaining, and gave great soundbites. I then spent two days in the recording studio working on a CD program on *Creating Lifelong Passion*, which will be available at the end of summer. I then flew to San Francisco for an intensive four-day course with the top motivational speaker on the planet, with whom I want to work this year. I did another quick radio interview from my hotel room commenting on a new book about a couple who spiced up their sex life by having sex every day for a year. That was fun. I got home to Vancouver Island late Sunday night, and Monday at 4pm received an urgent request from Richard Greene, who wanted me as a guest on his nightly Air America radio show speaking about *Enlightened Relationships*, based on Eckhart Tolle's *The Power of Now*. Which I haven't read. And the show started in an hour. So last night I did a very quick study of Tolle's views on relationships (thank you Google), which Richard knew dovetailed with my own work and *Passion* teaching, and I was then on the air for two hours, being infotaining.

Next week I fly to New York, where a brilliant writer friend has arranged for me to meet with the editors of several of the top fashion and bridal magazines. Did I mention I also write for magazines? I have my eye set on a regular Love column in a magazine with a circulation bigger than the entire population of Canada. From there I will fly to Toronto and meet with my television agent, who has submitted me for consideration for the top talk show in the country. We'll strategize my TV career, eat lunch, and probably have a martini. All in a day's work.

Meanwhile, back at the ranch...okay, it isn't a ranch, it is a cottage...I have a successful private practice and an offer to teach a human sexuality course and an intro psychology course for the local university. And this is where you come in. You may have no interest in pursuing a career in Media Psychology, and I don't blame you. It is a job for an actor, an entertainer, an educator first...and for a psychologist a far, far distant second. But there is also a role for Psychology in the Media.

Psychology, in terms of clinical work, is a private enterprise, conducted behind closed doors. We are represented to the public by actors playing television shrinks, shrinks who wear short skirts, ask "how does that make you feel?" and call that therapy, and then date their clients. Not good. Your role, as a registered psychologist, is to educate the public by bringing our very private practice public.

How can you do that? By giving interviews, commenting on news stories, appearing on radio programs, and answering questions using my infotainment model. In my opinion, you don't do our profession any favours by appearing in the media and coming across as nervous, arrogant, or worse, boring. Or, egads, arrogant AND boring. So here is my beginner's kit for giving great shrink media.

1. **Infotainment**, baby. Get your information across, but entertain. If you are funny, let it show. If you are not, let your animation and your natural excitement for our field show. Psychology is the most fascinating subject on the planet. We study people, passion, love, hate, delusion, mid life crisis, and rats in mazes. That's INTERESTING! So I cringe every time one of our colleagues is in the media giving a dust-dry opinion and sucking the joy out of the study of people and patterns. No wonder the public prefer the short-skirted ethically loose incorrect stereotype.
2. Become the mistress/master of the **soundbite**. Simply put, be brief, very clear, and make one point at a time. This is often the antithesis of our training, which is to swim in the complexities and be the finger pointing at the multiple options, not to be the one saying "this is the way it is, darn it". But this is education, information, media for the masses. It is about the answer, not the question. Make one point. If you need to present both sides, present one, then the other. And like it or not, you are being hired for an opinion. Give one. And back it up with science.
3. **Make a list**. Reporters and producers love lists. Come up with the three reasons divorce is so prevalent or the top five ways to deal with panic attacks or the four mistakes most job applicants make in their interview. This makes your job much easier, and you end up sounding really smart and organized.

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4. **Learn how to speak.** No, really. Use your voice, use the pause to punctuate and to emphasize meaning, allow your personality to shine through. And if you don't have a personality...see point 1. And refer the reporter to me.
5. Particularly for clinical topics, be very clear that you are not providing therapy or advice. You are providing information for educative purposes. Study the B.C. College, the CPA, and the APA **ethical guidelines**, and follow them.
6. Realize that we are experts in human and animal behaviour, and as such, we can **comment on anything**. No, really. I have been asked to provide an opinion on everything from why the Star Wars movies are so popular (I related it to Jung's collective unconscious and the hero's journey) to how to deal with an estranged mother on Mother's Day (one option; take her to a play, not to dinner – at a play you get entertained and don't have to speak about touchy topics and end up committing matricide) to how to cope with premature ejaculation (a short segment, of course).
7. **Buy a flack jacket.** If you go public, you automatically allow every Freud, Dick, and Harry to analyze you, criticize you, and believe they can do Media Psychology better than you. And maybe they can. So far, though, I am still waiting. But really, have some compassion for those of us brave/stupid enough to try to blaze a trail in an attempt to give the public accurate, entertaining, and useful psychological information. I direct a lot -did I say a lot? - of people to the BCPA referral service. You likely have a client or two who, unbeknownst to you, found their way to therapy because they heard me on radio or came to one of my Passion evening public talks or saw me on CBC Marketplace or The Shopping Bags or read an article that I wrote, or in which I was quoted, in Parents Canada, Elle magazine, etc. Sometimes people seek out a psychologist because they were exposed to me, and they find me human. I attempt to bring our profession down off our ivory pedestal, and make us relatable.
8. Most of all, **have fun**. I always do. And, hopefully, that means the audience does, too.

So go for it. As a psychologist, you are already a fantastically skilled communicator, with valuable information to share. Media platforms are simply that, podiums to stand on while we do what we do. And what we do is assist people to live with more happiness, clarity, and awakening. I think the more people we can reach, the better. So Oprah, here I come.

Dr. Cheryl Fraser is a registered psychologist in private practice. She also specializes in media psychology, and is a well known guest in radio, television, and print media. She is currently developing a CD home study series and writing a book based on her popular Passion weekend seminars. For more information, or to order the CD set, visit: www.becomepassion.com

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Speaker: Dr. Gordon Neufeld, Ph.D.
Date: November 27 & 28, 2008
Location: Travelodge Silver Bridge Inn,
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The Explosive Child

Speaker: Dr. Ross Greene, Ph.D.
Date: December 5, 2008
Location: Norman Rothstein Theatre
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Focus On Clinical Therapy

Feeling Good Together: Mastering The New Cognitive Interpersonal Therapy

Speaker: Dr. David Burns, MD
Date: October 16 & 17, 2008
Location: Travelodge Silver Bridge Inn,
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Acceptance and Mindfulness in Clinical Practice

Speaker: Dr. Steven Hayes, Ph.D.
Date: November 3 & 4, 2008
Location: Round House Community Arts & Recreation Centre
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Media Tips: Preparing for an Interview

by the American Psychological Association

Taking an Initial Media Request

If you've issued a news release you can expect calls from reporters. You may also receive calls from reporters at other times, looking for expert comment from a psychologist, a perspective on an issue of relevance to those in your profession or the view of your state/provincial psychological association on a controversial issue. Remember that if you receive a call from a reporter, you do not have to speak with them right away, nor do you have to agree to an interview. Some steps to take when the phone rings:

- Ask the reporter specifically what he/she would like to address, what he/she is working on, what the news hook is and what they want from you.
- Ask the reporter what his/her deadline is for writing/airing this story. (You may find the attached "media inquiry form" useful in prompting you which questions to ask, as well as maintaining a written record of media inquiries to evaluate your success at a later date and recording contact details to add to your media list.)
- Arrange a time to get back to him/her. (The amount of time you have to prepare will always vary based on topic, deadline, time of day, etc.)
- Always respect deadlines. Remember to check back with the reporter even if you are unable to set up an interview, or provide them with the information they require. Offer to do anything else to help, but, if it's a subject that you have decided against an interview on, leave "no comment" to the reporter.
- If you've agreed to an interview, start your preparation – research and messaging.

Questions to Ask When Scheduling an Interview

It's exciting to be contacted by a reporter for an interview. But don't be so quick to answer questions right away. Instead, tell the reporter that you're interested in talking to him when you have more time. Unless the reporter is on a tight deadline and needs a quick answer, he should be able to schedule an interview time. Then, before you end the call

or reply to an e-mail, be prepared to ask a few questions of your own.

- When is your deadline?
- When will the story be published or aired?
- What is your contact information? Get the
- What type of information would you like to know? The reporter will probably be vague, but this will help you prepare tips or review any updated research before the interview takes place.
- Who else will you be speaking to? Reporters usually need at least three sources for a story. Asking this question depends on your comfort level with the reporter and the nature of the story. Use your best judgment because a reporter could be offended by being asked this. But if there is someone whom you would recommend as another expert, make the suggestion. You may win some points!
- Where did you hear about this story idea? This is good to know if you didn't specifically target the reporter. It's helpful to know who is talking about the story or where a release is being distributed.

If you forget to ask any of these questions before the interview, it's okay. After the interview is over, you could also ask many of these questions.

You've arranged the interview – what next?

Once you've agreed to an interview it's time to do your preparation. Do your research:

- Know the media outlet. If this is your local newspaper you are probably already familiar. Regardless it's useful to look at recent copies of print editions, listen to radio shows and watch TV shows if possible, as well as checking Web sites.
- Know the reporter and the reporter's background. If you are working with a reporter with whom you are not familiar look up his/her recent articles.

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- Know the outlet's audience: is this a specialist publication, a publication or TV channel targeted to a specific audience, or is it read by people in your local area? Remember that your audience is not the journalist but their readers, viewers or listeners.
- Gather any expert information you may need, or speak to colleagues if necessary.
- Anticipate the reporter's questions and prepare responses.
- Practice – you'll find it helps if you answer the questions out loud, or recruit a colleague, friend or family member to help you prep by asking you questions and critiquing your answers.



Sending an E-Mail Pitch

You've researched your local media outlets, and you have a few reporters from your media list who you'd like to approach with a story. One of the best ways to share your idea is through a "pitch" letter. Each reporter, editor and producer has his or her own contact preference, but most now prefer an initial introduction by e-mail, so for the sake of this week's set of tips, we'll talk about pitching by e-mail.

A pitch e-mail briefly tells three main points to the reporter – your story idea, why the idea is important, and why the reporter's audience will be interested. The most difficult part of getting your message across, however, can be getting your e-mail read. Here are some tips to help get your pitch e-mail read and possibly turned into a story.

- Contact the reporter who is the best fit for your story (most likely someone from your media list).
- Personalize your message. Start out by using the reporter's name; perhaps mention a recent story you read or saw.
- The first paragraph needs to be attention-getting and compelling—remember you're selling a story idea that is not necessarily hard news (which is when you'd want to use a news release). Some ways to capture attention are to be straight-forward ("I've been following your weekly health column. I have a great column idea about the connection between stress and physical health.") or hooking onto a local angle. ("There have been a lot of foreclosures in our city recently. A good story idea is about how people can deal with their stress about the cost of housing. ... ")
- Keep the tone of your message conversational. Avoid writing in all capital letters or large, bold fonts—your e-mail will just be flagged as spam or junk.
- Keep your message to a few paragraphs, all in the body of the e-mail. Remember to tell the reporter why the story is important and why their audience would be interested.
- If you have a PDF document or photo is available, let the reporter know that, but do not attach it in an unsolicited message.
- Write a subject line that is also straight-forward and precise but less than 10 words. (For example, "Story Idea: Survey shows Americans feeling more stress" or ("[Your Town] psychologist available to speak about stress")
- Following up with a pitch e-mail is often essential. Avoid calling the reporter just to find out if they received your email and are interested in writing about your story. Instead, call the reporter, offering additional information (For example, "We have been having a large problem with home foreclosures around this city. You may also be interested to know that the APA survey shows that many Americans are feeling extreme stress about housing.")

Have a good success story of pitching the media? Interview tips? Experiences working with the media? Feel free to share it on the listserv.

For more information on signing up for the BCPA members-only listserv, email bcpa@telus.net or call 604-730-0501.



Measuring the Impact of Media Violence

by Craig Takeuchi

Once upon a time in central B.C., there was a town without television. This town, located in a remote valley, couldn't receive TV signals until folks asked the CBC to install a transmitter in 1973.

When UBC psychology professor Tannis MacBeth learned about the town's plans, she seized the opportunity to study the impact of TV on viewers. What she discovered was revealing.

MacBeth and her research team studied the children and adults in two other similar towns for comparison. The town without TV was called "Notel". A second had one TV channel. A third had received four channels for 15 years. The researchers studied all the towns before Notel received television, and then two years after its introduction to TV.

They studied various skills, such as creativity and literacy, but the most significant change was a doubling of physical and verbal aggression by Notel's children. This change wasn't reported in the other towns for that same period.

"It was also true for children who were initially low in aggression as well as those who were initially high in aggression," MacBeth, now retired, explained by phone. "And that's important, because the networks have claimed for some time, 'Well, yeah, sure, there are some people who are characteristically aggressive and they watch violent stuff and they may behave more aggressive afterward, but they did it anyway—they're aggressive people.'"

Violence in media, it seems, is everywhere these days. Beyond low-brow action or horror flicks, critically acclaimed TV shows like *Prison Break* and *The Sopranos*, Oscar nominees and winners *No Country for Old Men*, *There Will Be Blood*, and *Eastern Promises*, and numerous video games have all upped the ante on graphic depictions of murder, physical injury, gunplay, and physical and verbal conflict.

Yet MacBeth has documented that most violent content is gratuitous. "In our study, which was a large sample of

programs, about 70 percent of the violence...was not necessary to tell the story." Action and violence, MacBeth acknowledged, transcend cross-cultural barriers when selling shows internationally. "Jokes and some aspects of character roles don't necessarily export very easily across cultures and languages."

A debate about the impact of media violence has raged for decades. In spite of a large body of research, the causal link between media violence and behaviour has often been questioned.

In a report entitled "Media Consumption as a Health and Safety Risk Factor", Stephen Kline of the SFU Media Analysis Laboratory stated that the relationship between media and violence is one of the most controversial: "Not all children who watch a steady diet of violent entertainment are aggressive or antisocial because media risks interact with other risk factors such as class, community crime, and family dysfunction."

Nonetheless, the lab conducted a pilot study for a community risk-reduction strategy in North Vancouver in 2003 by challenging students to go cold turkey off all media for intermittent periods. Teachers anecdotally reported less classroom disruptions and less aggressive play behaviour.

Similarly, in a 1987 study by University of Winnipeg psychology professor Wendy Josephson, grades two and three boys watched either a violent or nonviolent TV show before playing a floor-hockey game. The boys who watched the violent show displayed more aggressive behaviour in the game than did boys who watched the nonviolent show.

Some, however, argue that there are beneficial effects of portraying violence on TV and in movies. "The catharsis idea is that maybe this enables people to release their aggressive impulses in a safe way and therefore they will be less aggressive," MacBeth said. Yet in all her research, she could not find any studies to verify this hypothesis. If there

(Continued on next page)

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were a cathartic effect, she said, the aggressive behaviour observed in her Notel study would have lessened rather than increased.

Gordon Dahl and Stefano Della Vigna of the University of California (San Diego and Berkeley), wrote a study published a year ago that reported violent crimes actually decreased on days with large audiences attending violent movies. However, the results were attributed to extended incapacitation and decreased alcohol consumption. Also, the study only addressed short-term, not long-term, effects.

The majority of research on violent media, according to MacBeth, has focused mostly on TV because people choose which films to go see whereas TV comes directly into people's homes.

In 1993, Canadians Concerned About Violence in Entertainment, the Canadian Radio-television and Telecommunications Commission, and the Canadian Teachers' Federation developed criteria for a television code on violence. The code, fashioned for the Canadian Association of Broadcasters, included stipulations such as no adult programming between 6 a.m. and 9 p.m., restrictions on violence in children's programming, program rating systems, and frequent viewer advisories.

The code also requires "V-chip" encoding (the "V" stands for "viewer control"). Recently manufactured TV sets have the V-chip, invented by former SFU professor Tim Collings. It allows users to block out unwanted programming based on a classification system. Ratings include designations such as C (children), C8+ (children eight and older), PG (parental guidance), and 18+ (adult).

In spite of this code, Laval University professors Guy Paquette and Jacques de Guise discovered that from 1993 to 2001, physical violence on three Anglophone networks increased 183 percent. According to the Canadian Association of Broadcasters, however, audience complaints about violence have dropped by 37 percent between 2001 and 2006.

From Toronto, C-CAVE president Rose Dyson said that the "restrictions on public television are certainly better than on the private broadcasters and better than what's allowed in the theatres".

Yet if the controversial Bill C-10 is approved, tax credits for Canadian films deemed not in the public interest, including those depicting violence and sex, may be cut. Canadian stars

Sarah Polley, Sandra Oh, and Gabrielle Miller, as well as directors and average citizens, have opposed the bill because of concerns about censorship. Should artistic freedom be sacrificed for public protection?

Dyson, who will appear before the Senate this week to support the bill, calls it discretionary funding. "I think that everybody in society, artists included, has a certain responsibility to the larger public interests. And while we certainly want to create a nurturing environment for artistic freedom, we have to put some boundaries around it."

The impending Bill C-10 has overshadowed its small-screen counterpart. Bill C-327 would require the CRTC to monitor both compliance with regulations on violent TV scenes and punishment.

CRTC chairman Konrad von Finckenstein presented a speech to the Commons heritage committee on March 4 to declare the commission's opposition to the bill. "We believe that the present system," he stated, "based on industry self-regulation in adherence to obligatory codes, and backed up by the CRTC as the final arbiter, does provide an effective means to achieve the desired purpose."

The real problem, von Finckenstein argued, is that the CRTC lacks a "full range of penalties to deal with violations". He argued for the power to impose administrative monetary penalties as a mid-range solution.

The CAB Web site states that the bill is redundant "since the existing system of industry codes and standards were developed through extensive and thorough public processes and consultations." The CAB, which the Straight was unable to reach by deadline, also argues that "Bill C-327 does not provide any compelling evidence of increased violence in television programming."

The organization also points out that "the CAB has created a mandatory system of codes that set high standards for all its members. Adherence to these codes is not voluntary. As a condition of licence, Canada's private broadcasters agree to observe these codes and their licences are reviewed regularly by the CRTC."

Despite what their supporters might believe, the thorny and complicated issue of media violence won't go away if Bill C-10 and Bill C-327 both pass into law. The volume of the debate, however, will certainly rise.

Craig Takeuchi is the movies editor of the Georgia Straight newspaper. His articles have been published in various local and national publications, including RicePaper magazine and The Tyee.



Letters from the Webmaster: Your Forum E-Mail



by Zal Saper, Ph.D., R.Psych

Your email goes on a complex and perilous journey before it gets to its intended destination. As people on the forum have said, email is not a secure communication medium. However, few people understand just how insecure it is. This can be traced back to the way the Internet works, or to the DNS system, also known as the Domain Name System.

It used to be that the Internet was a small place and any given computer system had the capability of keeping track of all the computers on the web and their numerical addresses. As the Internet grew, it became impossible for any computer to keep track of all of the addresses of all the computers connected to the web. The solution that people came up with was DNS. DNS works by having each computer keep track of only a few addresses for a limited period of time. With a list of other computers that communicate with one another, like a detective, the computer finds the address of the computer that your email is looking for. Each computer keeps a copy of the email and passes on another copy adding its own address and name to the header of the email. You can check the header of the email by looking at the full text. Since email is not encrypted in any particular way, all the computers along the way have a plain text copy of your email that is automatically deleted hours, days, or months later. If the system keeps backup tapes, your email could be recovered for years or even decades later.

Security considerations aside, the fact that your email goes through a number of computer systems means that if one system has a power failure or reconfiguration it could delay your email for several hours. For example, a recent incident occurred in which a set of emails from a person were delayed for some time when others were going through relatively quickly. This was probably because the path taken by these emails differed from the paths taken by other people's emails.

There are other hazards to which email is subject to. Emails can be blocked by a particular service provider because of the procedures designed to counter spambots. Spambots (sometimes called zombies) are computers attached to the internet that are hijacked and used to send out unsolicited email. Most of these are computers that run on Windows

and whose owners have no idea they have been taken over. In order to cope with these spambots, some service providers block emails coming from specific ranges of IP addresses, or the numerical addresses used by computers. A certain local Internet service provider denies that they block IP addresses belonging to Shaw, which is the Internet service provider that connects our server to the Internet. However, it is clear to many in the Internet community that these emails sometimes do not get through. This is particularly vexing because we are paying for a business address, not a residential address, and Shaw indicates that this local Internet service provider is well aware of which IP addresses are business addresses. They have tried to discuss this matter with that particular company on many occasions.

Another contributing factor to the lack of secure emailing is that the emails had a different reply-to address from when they were sent directly from our server. This could have resulted from the Internet service provider recognizing the differences between the addresses and blocking the emails. There is a new proposed set of rules by the IETF (the Internet Engineering Task Force); where by service providers will not block the emails that have a DNS entry specifying that these types of emails are valid. We implemented these changes according to the proposed rules in the hopes that this would help.

Unfortunately, this service provider did not take notice of the changes made so we began sending emails through another service. We use the same service to store and send our streaming video. Emails now go through a Shaw email address and then are sent out to another external service, which filters the email addresses and sends the email out from an IP address not blocked by the local service provider. As an aside, the above is the general case, but there is one email address that the external service cannot send to. We send this address directly from our server. As we continue to face challenges, we will be continuing to make changes to the system, hoping to simplify the system while balancing the risks and benefits of making changes and anticipating and implementing speedy solutions.



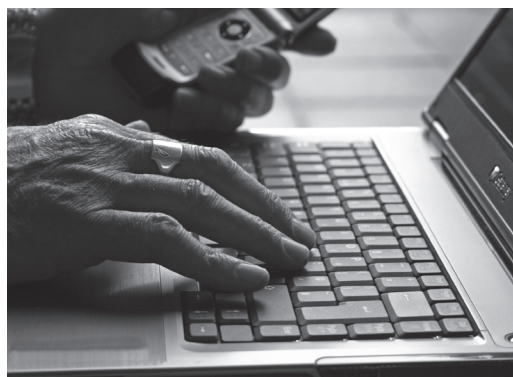
Letters from the Webmaster: Your Website

by Zal Saper, Ph.D., R.Psych

Some people are not yet sold on the importance of having a website. If you are not sure whether you need a presence on the Internet, perhaps the following discussion will convince you that having a website is valuable and could be important to your practice.

Having a presence on the Internet could benefit you in a variety of ways such as providing online advertising that works for you year-round. Nowadays, people look to the world-wide web for information. Members of the public who might not have immediate access to a telephone directory, or might have access to a directory but not for the right city or region, could quickly find this information through the Internet. Customizing your website to turn away certain types of work before people call could both benefit you and the public by providing current information about you and your practice, all of which would be made available when people search for you online.

The referral process can be a complicated one, when members of the public are unsure of the process and what to accept from you as a Registered Psychologists.



Having a website with information about you and your practice might aid in this process. Including things such as a picture will help people feel a sense of connection and perhaps feel more confident about contacting you.

A short while ago, an acquaintance complimented me on my website. What he didn't know is that the website he saw was constructed by the automated Web Profile script on the BCPA website and formatted using a standard template. Those of you who have used the automatic webpage constructor on the BCPA have a similar layout, although

there is a choice of background and colours you can use to individualize your webpage.

Another option would be to construct your own website or pay someone to construct it and host it on another server and have the referral service webpage link to it. Simply fill in the web address on your Membership Info form to link it to the referral service.

The automatic webpage builder can be found under Members/Profile Management/Manage your Web Profile. The form allows you to construct your own webpage and includes functions such as uploading a picture. You can also enter a title for search engines, description and keywords. These fields are very helpful as they allow you to customize the way Google and other search engines see your website. The most important fields are the title and keywords separated by commas. Although the way the search engines use the information from your website is a closely guarded secret, it is pretty clear that the title and keywords should contain the search terms used by the target audience. The rest of the form contains space for lists of techniques or problem areas. Once you have completed the form and finalized the website, the referral service will automatically link to the new site, which will help the search engines find your new website. It takes time for the search engines to find and 'index' your webpage, but linking it to the referral service is probably the best way to ensure that the search engines find your webpage quickly.

If you have paid for the referral service and web profile option with your membership, but have not yet completed the Web Profile form, I recommend that you fill it out now. It is an easy-to-use way to get your self on the Internet and can be easily modified at any time.

Dr. Zal Saper has been a Registered Psychologist in BC for 13 years. His practice includes medicolegal assessment and individual treatment. He is also the administrator of the BCPA website, and enjoys Aikido and computer-generated music.



BCPA Disaster Response Network: *Events and Happenings*

by Jeanne LeBlanc, Ph.D., R.Psych.

If there was a disaster right now, would you know how you could help? Do you know who you would report to or what to expect?

During the past few months, the BCPA Disaster Response Network (DRN) has been in the midst of continued change and development in order to answer these questions and develop a sense of community among fellow responders. The wheels of progress are slow sometimes, but they are definitely moving! In the months to come, you can look forward to the following:

1. A list-serve specifically for BCPA DRN members. We are awaiting various technical issues to be ironed out, as well as the opportunity to find out which members would like to be included.
2. On-line and regional DRN training. Thanks to the efforts the Province's Disaster Stress & Trauma Response Services, two programs are currently in the works.
 - a On-line training modules from North Carolina's DRN are currently being reviewed. BCPA and Heleen Sandvik (the chair of DSTRS and Provincial Coordinator of the Disaster Psychosocial Project through the Ministry of Health Emergency Management Branch), is pursuing a number of options to help us regionalize this training and make it available to all DRN members (with Continuing Education credits, too!).
 - b Regional training in Psychological First Aid. The DSTRS is making available to representatives from various provincial mental health professional associations a "Train the Trainer" program for this course, this fall. Thanks to the support of BCPA, the current plan is to team up with BC Counselling Association (and perhaps others), to provide multi-disciplinary training in areas of British Columbia for mental health professionals once we complete our training. It is clear disasters occur in areas outside of Vancouver, thus we believe it is important

to make training available to as many as possible in other areas of the province. This will also provide a chance for continuing education for those who participate.

3. Updating the Policy and Procedures manual for BCPA. This has not been done in quite a while, and could use a bit of tweaking. Thanks to Rebecca Smith of BCPA, we will be refining and clarifying the information so that all DRN members will have a useful tool for answering questions and informing them of procedures in case of disaster.
4. At the national level, APA's Disaster Response Network is recommending the addition of a Canadian DRN Advisory Committee member at the next meeting in September with their governance oversight group. They have high hopes that this will be passed.

Finally, I wish to thank everyone for their patience and flexibility as these changes are slowly beginning to take place. Your participation is key, and I am looking forward to our future growth, thanks to your willingness to be part of this service to us all.

Sincerely,

Jeanne LeBlanc, Ph.D., R.Psych., ABPP^(RP)
Board Member and DRN Chair, BCPA

If you are interested in signing up for the Disaster Response Network and take advantage of all the training opportunities, or would like further details, please contact a BCPA staff member at 604-730-0501 or email bcpa@telus.net.

BCPA Disaster Response Network

Disaster Psychosocial Services in British Columbia



BCPA is a member of APA's Disaster Response Network. One key difference is that while most DRN members in the states participate through affiliations with their local Red Cross, BCPA's DRN volunteers primarily serve through Disaster Psychosocial Services (DSTRS) under the Ministry of Health.

The DSTRS Network is comprised of professional therapists/clinicians who are willing to volunteer their time in the event of a disaster. The Network presently consists of approximately 600 volunteers from the B.C. Association of Clinical Counsellors, the B.C. Psychological Association and the B.C. Association of Social Workers. As these three professional associations are provincially based it is possible to provide local, community-based psychosocial support when the need arises.



The psychosocial services that DSTRS and BCPA DRN members may provide include:

- Coordination of Disaster Behavioural Health Volunteers
- Collaborative Assessment of Community Needs
- Psychological First Aid
- Brief Assessment
- One-to-One Support
- Brief Crisis Counselling
- Crisis Line Response
- Psycho-educational Interventions
- Development/ Distribution of Materials
- Worker Care
- Consultation
- Group Presentations



Psychosocial response involves a range of supportive services with those who are affected by an emergency or disaster, including the promotion of individual, family and community resiliency. These various services are used to help diminish long term psycho-social effects, to clarify the current situation and to improve adaptive coping strategies.



If you are interested in participating or finding out more about BCPA's Disaster Response Network, please contact us at bcpa@telus.net or 604-730-0501.

HELP US HELP THOSE IN NEED





Your Healthcare & Associated Benefits of Joining BCPA

by Rebecca Smith

These days there is no debate over the fact that the cost of healthcare is rising. With recent focus on the state of healthcare south of the border, due to the pending election and films like “Sicko” by Michael Moore, Canadians have taken to regarding our own healthcare system with relief and pride. However, most Canadians do not truly understand how our system works, and who pays for what benefits or services.

While our healthcare system is viewed as one, federally mandated system, it is in fact an interlocking of ten provincial and three territorial systems. While these systems must meet the requirements and standards set out in the Canadian Healthcare Act, each has the responsibility to manage, implement and deliver healthcare to its citizens. Therefore each system is different from the other. This is where the confusion begins.



British Columbia has seen a great number of changes in the Provincial Medical Services Plan (MSP) over the last decade. As costs rise there has been a whittling away of services that were once paid for (either wholly or partially) by MSP. This of course has meant that unless covered by a privately held insurance program (either individually funded or provided by employment) British Columbians have had to begin paying for services and health items (such as prescriptions) out of pocket. These services and items can be costly when considering the total cost for a family, unexpected illnesses or injury.

British Columbia Psychological Association understands that many of our members are not “employees”, and many do not work for organizations that are able to/choose to provide these extended healthcare benefits. This is why we

offer an alternative to expensive individual plans: the BCPA GroupPLUS Benefit Package.

As an Association Plan, we are able to offer a package of benefits to those of our members who wish to participate rather than requiring that all our members participate (as most group plans do). Fortunately, due to some savvy negotiating and the dedicated help of our Group Insurance Representatives: Bob Smith and John Tomlinson, we have been able to keep the rising costs of this package well within the industry norm while maintaining as great a benefit package as possible in the current healthcare climate.

The BCPA GroupPLUS Health and Dental Plan offers standard group coverage in its core benefits, such as: Life Insurance, Accident and Serious Illness Insurance, Extended Health and Dental Insurance and the Employee Assistance Program. It also has a number of options from which plan participants may choose to augment their programs such as: Dependent Life Insurance, Accidental Death and Dismemberment Insurance, Long Term Disability and Critical Illness Insurance. When a BCPA member chooses to join the Association plan (either within thirty days of joining BCPA or between September 15th to November 15th 2008) they may do so without providing any medical evidence of insurability.

We have also been fortunate in having the services of our representatives and of the Disability Management Institute, who offer assistance to plan participants in completing benefit applications, securing attending physician statements, and expedited assessment, diagnostic or treatment in certain cases.

If you are interested in joining the BCPA GroupPLUS Health and Dental Plan and wish to learn more about plan details, please refer to the materials posted under insurance in the Members Only section of our website. We would also be happy to mail out a benefit information package if you contact our office to request it (604-730-0501 or bcpa@telus.net). If you have specific questions about the plan or personal benefits please do not hesitate to contact Bob Smith at: 604-534-0898 or bob.smith@sunlife.com.



WAIS-IV: Differences & Developments

by Marie-Josée Gendron, Ph.D., & Tara-Jean Wenc, M.Ed.



- Introduction of the new Wechsler Adult Intelligence Scale – 4th Edition with Canadian Norms
- Review the theoretical bases of this new test
- Demonstrate the increased emphasis on fluid intelligence
- Introduction of the new subtests such as figure weights, visual puzzles, cancellation, grocery list and social perception
- Review the four index structure of this new tool (verbal comprehension, perceptual reasoning, working memory and processing speed)
- Presentation of the many linking studies between the WAIS-IV and the Wechsler Memory Scale – 4th edition and the Wechsler Fundamentals: Academic Skills
- Examine how the psychologist can use these data for assessing ability achievement discrepancies and pre-morbid functioning in individuals suffering from dementia or other cognitively debilitating conditions
- Review of numerous clinical studies conducted with the WAIS-IV demonstrating unique performance profiles (i.e. mild cognitive impairment, borderline intellectual functioning, anxiety, etc.)

***** All participants enjoy a 15% discount on the WAIS-IV with on-site purchase**



September 19, 2008 (Friday)

Harbour Room, Vancouver Rowing Club, 450 Stanley Park Drive

For more information or to register, please visit www.psychologists.bc.ca or call 640-730-0501.
(Discounted rates available to members and affiliates.)



Neuropsychological Assessment Issues: Problems, Applications & Examiner Responsibilities

by Muriel D. Lezak, Ph.D.



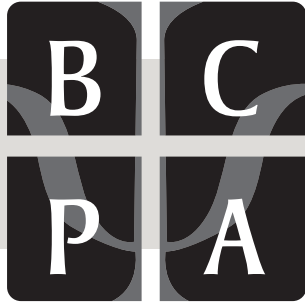
- Know how etiology of a brain disorder can interact with course and time since onset in affecting patient functioning
- Appreciate the relevance of lesion side, site, and size for behavioral alterations
- Understand why the psychological consequences of stroke and traumatic brain injury (TBI) typically are very different
- Know which neurological disorders increase the likelihood that patients will also be depressed
- Be aware that different levels of anxiety differ in their effects on cognition
- Know what the cognitive similarities between PTSD and mild TBI are and what accounts for them
- Appreciate how pain can interfere with cognitive efficiency
- Understand the importance of maximizing patient performance
- Be aware of external limitations to the scope of the neuropsychological examination and know some ways to get around them
- Know when published test norms are appropriate and when they are not
- Understand how best to communicate examination findings to different interested persons (e.g., patient, lawyer, spouse, psychologist)



October 17, 2008 (Friday)

Harbour Room, Vancouver Rowing Club, 450 Stanley Park Drive

For more information or to register, please visit www.psychologists.bc.ca or call 640-730-0501.
(Discounted rates available to members and affiliates.)



PhotoTherapy Techniques



by Judy Weiser, R.Psych., A.T.R.

(This article is continued on our website: www.psychologists.bc.ca)

PhotoTherapy Techniques use clients' own personal snapshots and family photos – and the feelings, memories, thoughts and information these evoke – as catalysts for therapeutic communication.

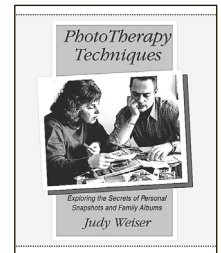
The Secret Lives of Personal Snapshots and Family Photographs

Every snapshot a person takes or keeps is also a type of self-portrait, a kind of “mirror with memory” reflecting back those moments and people that were special enough to be frozen in time forever. Collectively, these photos make visible the ongoing stories of that person's life, serving as visual footprints marking where they have been (emotionally, as well as physically) and also perhaps signaling where they might next be heading. Even their reactions to postcards, magazine pictures, and snapshots taken by others can provide illuminating clues to their own inner life and its stories.

The actual meaning of any photograph lies less in its visual facts and more in what these details evoke inside the mind (and heart) of each viewer. While looking at a snapshot, people actually spontaneously create the meaning that they think is coming from that photo itself, and this may or may not be the meaning that the photographer originally intended to convey.

Thus, its meaning (and emotional “message”) is dependent upon who is doing the looking, because people's perceptions and unique life experiences will always automatically frame, and actually define what they see as real. Therefore, people's reactions to photographs that they feel are special can actually reveal a lot about themselves, if only the right kinds of questions are asked.

PhotoTherapy Techniques: Exploring the Secrets of Personal Snapshots and Family Albums (1999, second edition) by Judy Weiser, R.Psych., A.T.R.



Written by psychologist, art therapist, consultant, instructor, trainer, and PhotoTherapy pioneer Judy Weiser, this book explains and demonstrates each of the major techniques, and provides theoretical rationale from both psychology and art therapy contexts. It also includes many photo-illustrated client examples, case transcripts, and practical experiential “starter” exercises so that readers can immediately begin using these techniques in their own practice.

(<http://www.phototherapy-centre.com/bookvid.htm>)



IHE
Consensus
Conference
Series

A Consensus Development Conference on

Depression in Adults:

How to Improve Prevention, Diagnosis, and Treatment

Mark your calendars for the upcoming IHE Consensus Development Conference on Depression in Adults to be held **October 15-17, 2008** at the Westin in Calgary, Alberta.

The Honourable Michael Kirby (Chair, Mental Health Commission of Canada) will lead a distinguished jury of citizens and experts to develop practical recommendations on how to improve prevention, diagnosis, and treatment of depression in adults. Expert Panel Chair **Dr. Scott Patten** (Professor of Psychiatry, University of Calgary) will lead a panel of experts in presenting available evidence on depression in adults.

For regular program and registration updates please go to www.buksa.com, email: consensus@buksa.com, or check www.ihe.ca.

IHE
INSTITUTE OF
HEALTH ECONOMICS
ALBERTA CANADA

AMHB
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... Advancing Mental Health



With support from
the Alberta Depression Initiative

Advanced Clinical Supervision in Psychology

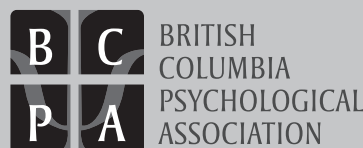
A certificate course offered by

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Division of Applied Psychology,
& the Psychologists' Association of Alberta

September 3rd - December 3rd, 2008
January 7th 2009 - April 15th, 2009

Registration procedures:

Registrations may be completed on-line at
<https://www.ucalgary.ca/cted/business/psychology/>
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NOVEMBER 28, 2008

BCPA Annual General Meeting

also featuring

* BCPA Networking Luncheon

* Advances in the Treatment of PTSD
(with Steven Taylor, Ph.D.)

* Annual Awards Reception & Cocktail Social

Venue: Jericho Sailing Club, Vancouver, BC

British Columbia School of Professional Psychology

406-1168 Hamilton Street Vancouver, B.C. V6B 2S2 (604)682-1909 Fax (604) 682-8262

email: wilensky@interchange.ubc.ca

www.emdrtraining.com

EMDR Basic Training Course in Vancouver

The British Columbia School of Professional Psychology is presenting a Basic Training in Eye Movement Desensitization and Reprocessing (EMDR). This course is the new curriculum mandated by the Eye Movement Desensitization and Reprocessing International Association (EMDRIA).

Objectives of Course:

Participants will learn to use EMDR appropriately and effectively in a variety of applications. Such use is based on understanding the theoretical basis of EMDR, safety issues, integration with a treatment plan, and supervised practice. In addition to the Instructional and Supervised Practica portions, there will also be a Consultation component to the training.

Qualified applicants will have a minimum of Masters level training in a mental health discipline and must belong to a professional organization with a code of ethics, or be a Graduate student with appropriate supervision.

Instructor: Marshall Wilensky, Ph.D., R.Psych. EMDRIA - Approved Instructor

Format: Lecture, discussion, demonstration, video 20 hours; Supervised practice, 20 hours; Consultation, 10 hours

Dates: Session One - October 3 - 5, 2008; Session Two - December 12 - 14, 2008

Times: Friday 9:00 am - 5:00 pm; Saturday and Sunday 9:00 am - 4:30 pm

Consultations: Wednesdays, October 29; November 19, 2008; January 14, 2009; 6:30 pm - 9:30 pm

Location: 3026 Arbutus St, Second Floor (at 14th Avenue)

Tuition: \$1,800 (before September 5, 2008); \$1,900 after

Textbooks and Manuals included

Send cheque or money order, payable to B.C.S.P.P., 406-1168 Hamilton St., Vancouver B.C. V6B 2S2. Payment plans available by special arrangement

Approved for Continuing Education by Canadian Counselling Association For more information and to register online, go to www.emdrtraining.com. Or contact Alivia (Scalzo) Maric, Ph.D., R.Psych. at 604 251-7275/
email: amarica@shaw.ca



BCPA News & Announcements

1. Practicum Placements Information

BCPA office received a number of requests for information about and/or facilitation of informal practicum placements. This was discussed at the June 2008 Board meeting. The Board decided to add a web page to BCPA website that could be used to facilitate contact between BCPA members with supervised practicum or other training opportunities available for qualified individuals requesting this service.

Please contact BCPA offices via phone or email (bcpa@telus.net or 604-730-0501) if you have a position or posting you would like listed on this new Webpage.

2. Diabetes Expo 2008

The Canadian Diabetes Association organized three Diabetes Expos in the Greater Vancouver area: Vancouver (April), Vancouver – Chinese (May), and Abbotsford (June). As a voluntary body committed to advancing psychology in the province, the BCPA was invited to participate in the Ask the Experts segment in all three Expos.

We would like to thank the following members for volunteering at the Expos as Mental Well-Being Experts: **Joti Samra, Sandra Yuk-Shuen Wong, and Sarina Kot.** The feedback we received from the general public was very positive. Many diabetes patients and their family members got a chance to talk to our members about their psychological concerns in addition to learning about our Association.

3. Database Update

We would like to remind all of our members to update their member profile by logging on to the website and clicking "Profile Management" under the "Members" toolbar. If you are a member of the referral service, please make sure all fields are correct and updated. If you have any questions on how to go about doing this, please contact the BCPA office at 604-730-0501 or email inquiries to gen.bcpa@telus.net.

4. Request for Authored Books By Members

As you may already know, our website has a direct link to Amazon.com. This allows visitors to the website an

opportunity to purchase books authored or co-authored by BCPA members. If you want your book(s) featured on our website, please send us your information at bcpa@telus.net.

5. Psychology Month 2009

In February 2009, the BCPA will launch a province wide Psychology Month campaign. To ensure its success, we need all the volunteers we can get! We are currently requesting volunteers for four 'Brown Bag Lectures' that will be geared to promote public education and awareness of important topics in mental health and well-being. Lectures will be held throughout the month. If you are interested in participating, please contact bcpa@telus.net or call 604-730-0501. The BCPA will provide the venue and all promotional materials. We will continue promoting the month of February and providing details of events. With your help, we can make this a successful Psychology Month!

6. Annual General Meeting 2008

Mark your calendars! The 2008 AGM will be held on November 28, 2008:

12:00-1:30pm:	Networking Luncheon
1:30-5:00pm:	<i>Advances in the Treatment of PTSD</i> by Steven Taylor, Ph.D.
5:00-6:00pm:	Annual General Meeting
6:00-9:00pm:	BCPA Awards Reception & Cocktail Social

7. GroupHealth Global Insurance Information Meeting

On May 29, 2008 the BCPA held a Member Information Meeting to discuss the insurance plan. For those of you who were not able to attend, and who may have questions regarding the plan, please contact the Representative for GroupHealth Global, Bob Smith, at 604-534-0898 or toll free at 1-866-694-0362.

8. Retraction

The 'Interpersonal Therapy' Workshop with Scott Stuart, M.D. is being rescheduled from January 28, 2009 to a later date. Please check the website for the new date and time.

BCPA UPCOMING EVENTS:

WAIS-IV: Differences and Developments

September 19, 2008

Tara-Jean Wenc, M.Ed., & Marie-Josée Gendron, Ph.D.

Neuropsychological Assessment Issues: Patient Challenges, Clinical Applications, & Examiner Responsibilities

October 17, 2008; Muriel D. Lezak, Ph.D.

Advances in the Treatment of PTSD

November 28, 2008; Steven Taylor, Ph.D.

BCPA Networking Luncheon

November 28, 2008

BCPA Annual General Meeting 2008

November 28, 2008

Annual Awards Reception & Cocktail Social

November 28, 2008

ACT and the Treatment of Depression

March 20, 2009; Robert Zettle, Ph.D.

Multicultural Assessments

April 24, 2009; Richard Dana, Ph.D.

Employing MMPI Results for Court Purposes

June 12, 2009; James Butcher, Ph.D.

Employing PAI Results for Court Purposes

June 13, 2009; Leslie C. Morey, Ph.D.

Interpersonal Therapy

TBA; Scott Stuart, M.D.

*For more information about our workshops, please check out
www.psychologists.bc.ca or call us at 604-730-0501.*

*It is with sadness that the BCPA
offices bids farewell to our
Administrative Assistant Wincy Li.
After serving with us for the last year,
Wincy is moving to the Prairies at the
end of August to pursue further career
and educational goals.*

*While working with us here at the
Association offices, Wincy has made
an indelible impression with not
only her incredible work ethic and
dedication, but also with her good
humour and personality. She has been
an integral part of our efforts to build
a stronger Association and to provide
timely and effective services to our
members and the public. I am sure
that you will join with me in wishing
her all the success in her career
endeavours and the best of luck in the
future.*

We will truly miss you Wincy!

*Rebecca Smith,
Director of Administration*

*Nicole Strauss
Assistant to the Director*

BCPA Members of the Board



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