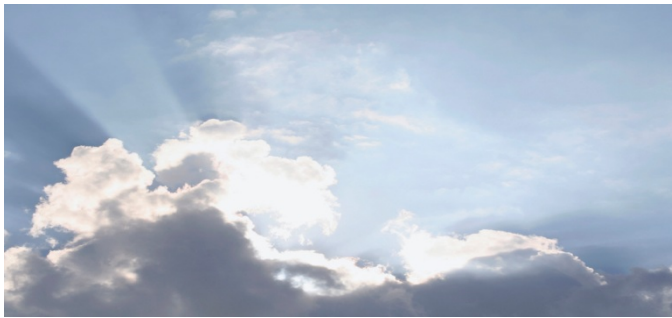


2015 Winter Newsletter

The President's Message

By Alissa Scanlin, Psy.D.



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Happy New Year CCPA! Welcome to 2015! It is my hope that CCPA is, and will continue to be, a valuable asset to your professional development. I hope it offers you opportunities to learn and connect with other local psychologists. During the coming year there will be several continuing education events and your board is looking for topic suggestions. If you have ideas for presentations that are of interest to you, please feel free to contact me (drscanlin@gmail.com)

Our Annual Meeting and first CE event for 2015 is coming very soon. We tried a new sign-up method (123signup) and, like any new endeavor, there have been a few rough spots. Our meeting will be at the Renaissance Club Sport Hotel in Walnut Creek, 2805 Jones Road (easy walking distance from the Pleasant Hill BART station) January 23 from noon to 5pm, and lunch will be provided during our annual meeting, from 12-1. There is still time to plan to attend. **Due to the registration challenges, you can register for the regular price of \$100 (without the late fee), but we would appreciate knowing that you will attend as soon as possible. Feel free to email me or call to confirm (925) 283-3902.**

This 4 CE event is a timely look at changes that will affect us all: "ICD 10 Diagnosis and DSM Changes: A New Horizon". Our presenter is Dr. Carol Goodheart, president of APA in 2010, and author of [A Primer for ICD-10-CM Users: Psychological and Behavioral Conditions](#). Dr. Goodheart wrote this book for APA and during her presentation she will take us through exercises designed to help make the ICD-10 more user friendly. She would like participants to have access to the codes, and they are in her book. We will have a limited number of copies of that for sale at the meeting.

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There are many pages of codes for the ICD-10, so printing them is probably not the best way to go. I will send her link to members in a separate email prior to the event, but the spacing makes the document very long (40p, double sided). If you have access to the codes, and plan to attend the presentation, please be sure to bring them.

There have been some changes in our relationship with CPA, our state organization. Details about the changes are still developing, so we will let you know more about them as they develop. Ellin Sadur, PsyD, had been our CPA representative when that position was part of CPA, and she did an excellent job of keeping our association informed about activities at the state level. She will still be informing us of changes as they develop. There will be a meeting either later in January or the early part of February that should provide more clarity about how the new system will work. Please be on the lookout for that information update in the next newsletter.

One other very big change is in the area of self-care among psychologists. This area used to be called CLASP—the Colleague Assistance and Support Program. It is now called CARE – Colleague Awareness Resources and Education Program and it is under the leadership of Beth Ferree, PhD. Please read the article in this newsletter as this group is doing some exciting things.

Dr. Marc Kamori-Stager is our new membership chair and his letter to new and renewing members provided an excellent summary many of the of membership in CCPA. Hengameh Maroufi, PhD, our Diversity chair, is helping CCPA be mindful of sensitivity to issues of diversity in our local communities. I also want to take this opportunity to acknowledge the other members of your 2015 CCPA Board: Howard Friedman, PhD, the new programs chair, Susan O’Grady, PhD, our website and ethics chair, Marley Middlebrook, PsyD, our treasurer, Barbara Peterson, PhD, our secretary, Andy Pojman, EdD, our historian, and Sarah Wood, PhD, our wonderful newsletter editor, without whose hard work this letter wouldn’t even exist! Happy 2015 CCPA! ♦

Your Therapist’s Professional Will: If Not Now, When?

By Ann Steiner, Ph.D., LMFT

Summary: Most psychologists don’t realize that when they sign the renewal form for membership and check the boxes saying they are complying with the ethics code, they are expected to have the equivalent of a therapist’s professional will. This article presents an overview, suggestions for getting started and the benefits of this ethics requirement.

Were you taught about office policies, the limits of confidentiality, professional wills, and other business/practice related topics in graduate school or your placements?

Clinicians usually discover that APA requires that they have the equivalent of a professional will years after they are already in practice. The time to deal with this is now. Not only is it easier to write out a thoughtful plan when you are not in crisis, it will clarify your treatment values and help you see aspects of your professional life that you may not have considered.

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It is never too early to plan for the unexpected. We all occasionally get sick or have family emergencies, and eventually we will no longer be able, or wish to continue practicing. The ethical and clinical importance of planning for our temporary and permanent absences is often neglected. Plus, most clinicians aren't aware that their Ethics Codes require that they have a plan in place for the disposition of their practices in the event of an unplanned absence.

What is the Therapist's Professional Will?

The professional will is a document detailing your wishes for the continued care of your patients in your absence, whether planned or unplanned, from losing your voice to serious illness, relocation, retirement, or death. It is designed to reduce the trauma and impact on your patients, colleagues and yourself when you are unavailable. For example, when you have unplanned absences, your professional will addresses the following questions:

- What will happen to your practice?
- Who has access to your office keys, client contact information and other details needed in an emergency?
- Who has essential diagnostic and risk-related client information?
- Who has your voice mail access code and appointment schedule?
- Who will cancel, follow up with, and/or make referrals for your patients?
- How do you want your patients and their records handled in your absence?

These are not simple questions; there are clinical and ethical implications.

For example, do you really want your life-partner to be the main contact person if you are in Intensive Care. While the concept of creating a professional will resonates with most helping professionals, the prospect of putting one into place can seem daunting. By making the commitment to work on this important clinical and ethical project, creating a system to handle your practice in your absence, you will gain peace of mind knowing that you have done everything possible to assure continuity of care for your patients.

Did you know that you are REQUIRED to have a Professional Will?

Most clinicians aren't aware that their Ethics Codes require them to have a plan in place for the disposition of their practices in the event of an unplanned absence. Like every other guild and professional organization for mental health professionals, APA's Code of Ethics requires members to have at least the equivalent of a professional will. Specifically: The American Psychological Association's Ethical Principles state that:

"Unless otherwise covered by contract, psychologists make reasonable efforts to plan for facilitating services in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability, relocation, or retirement or by the client's/patient's relocation or financial limitations in the event of psychologists' withdrawal from positions or practice." (Section 3.12)

Section 6.02 (c) also addresses the issue: "Psychologists make plans in advance to facilitate the appropriate transfer and to protect the confidentiality of records and data in the event of psychologists' withdrawal from positions or practice." (Section 10.09)

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Being Proactive about Unexpected Absences

The process of creating your own therapist's professional will builds community and eases the stress and burden on your family members, colleagues, and others during a difficult time of crisis or perhaps loss and grief. Putting together your own professional will removes the guesswork, confusion and headaches that often accompany any unexpected event in our lives that would make us unavailable to our patients. It also helps you begin or continue with your long-range retirement planning. Plus, it is important that your attorney make sure your wishes are consistent with your estate plan.

Writing a professional will is much more than just creating a simple legal document. A comprehensive will that truly protects yourself, your patients, colleagues and family, requires that you make some challenging personal, clinical and ethical decisions.

The first step is to put together your own Emergency Response Team, a group of trusted colleagues who will follow your wishes and help you and your patients cope with your unexpected absence. This phase is often where clinicians get stuck – they wonder whether they really trust the people they might list to not “poach” their patients in their temporary absence. Most of us have someone who covers for us when we go on vacation, so you may already have colleagues who can form the core of your team. One effective strategy is for colleagues to be each other's Emergency Response Team members and agree to meet to help each other work on and complete their individualized professional wills.

A professional will **minimizes** the risk of your patients feeling and being abandoned when you are gone. Often when a therapist dies, patients feel traumatized, which can get in the way of developing a trusting relationship with another therapist.

How about starting now? Take 10 minutes to list 3 colleagues with whom you would be comfortable discussing these ideas, and commit to meeting to talk about how you can get started. This will move you one big step closer to creating one of the best gifts you can give your patients, loved ones, and yourself.

Completing your own professional will is often a challenging, rewarding and important process. If you are like most therapists, you agree that this is an important project, yet it keeps sliding to the back burner. Over the past few years the feedback I hear from workshop participants is that it is difficult to follow through on this project on your own.

As Groucho Marx said “We should learn from the mistakes of others. We don't have the time to make them all ourselves.” When can you start this very do-able project?

- Within the next week
- Within the next month
- Within the next two months
- Other _____

Borrowing Someone Else's Brain

In my writings about coping with illness, I refer to "Borrowing Someone Else's Brain," a process where, when one is ill, one needs to have someone else help think through difficult decisions. Borrowing someone else's brain is a temporary

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process that does not mean relinquishing control or admitting defeat. Having a few trusted colleagues with whom you can discuss the emotional topics of retirement, leaves of absence, and significant medical problems is a true gift.

It helps to have a “buddy plan” and a way to keep the motivation up so that you can be like Kyle Doyle, Ph.D., who wrote to say she was surprised at how relieved and delighted she was when she finally had her back up team in place and her professional will completed. Others talk about how difficult it is to be working in the isolation of their private practices on their professional will, and that it took attending a hands-on workshop to get their first draft in place.

Whatever your preferences, I hope you will prioritize getting your professional will in place before the end of 2014. You’ll be glad you did!

DISCLAIMER: This article is written for informational and planning purposes. The information included is not to be relied upon as a legal document, or viewed as legal advice. You are advised to consult an attorney to make sure that decisions you spell out in your professional will are compatible with your personal will and other estate planning documents.

About the Author

Dr. Ann Steiner is a psychotherapist in private practice in Lafayette who has worked with patients for 30 years. She pioneered creation of the professional will incorporating advice from senior estate planning attorneys, has published over 20 articles on the subject, consults to and presents workshops to clinicians throughout the US and in Europe. Dr. Steiner has presented at the California Psychological Association’s annual conference, annually at the American Group Psychotherapy Association’s conference and at the Virginia Satir-founded International Human Learning Resources Network, most recently in Prague. In addition, Dr. Steiner served as an Associate Clinical Professor, Dept. of Psychiatry, UCSF, for 14 years; is on the faculty of the Psychotherapy Institute; and is a Fellow and board member of the American Group Psychotherapy Association.

Further information about her downloadable Therapist’s Professional Will™: Guidelines for Managing Planned and Unplanned Absence, and upcoming speaking engagements are available at Dr. Steiner’s website: www.PsychotherapyTools.com To read more about the therapist’s professional will: http://www.psychotherapytools.com/profwill_what.html

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Colleague Resource and Continuing Education Group New Offering from CCPA

By Beth Ferree, Ph.D.

CCPA is offering a resource and education group open to all members.

When: First Fridays of the month from 11:30-1pm

Where: The office of Dr. Beth Ferree,
3468 Mt. Diablo Blvd. Ste B203, Lafayette, CA
925-284-3665 bethferree@comcast.net

As CCPA's Chair of Colleague Awareness Resources & Education Program (CARE), I invite you to join me for monthly meetings for networking, continuing education, and support. I will facilitate the first meeting where we will discuss articles published in an edition of *The California Psychologist* that qualify for 3 free CEs. Just look over the articles; I will read them beforehand and take the online test. At the meeting I will present the information, facilitate a discussion and we will discuss the answers to the test, so you can go home, take the on-line exam, and print the verification of your 3 CEs. It couldn't be easier! Two years of tests and magazines are available to choose from.

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At each meeting we will choose a member to select and present the next journal articles for discussion, and provide the exam questions and answers for the next month.

In addition to the CE focus, we can use this format as a salon of sorts, to discuss topics of interest—from starting a practice—to planning retirement. There are several benefits to this approach beyond the 3 free CE units. It is a way to get together, to network, and to share the rewards and the difficulties we experience in doing our work.

The focus can evolve to suit the needs of the group. By providing a monthly opportunity to get together, we will be developing relationships that we can turn to for mentoring and support. It is a pleasant way to keep up with current issues in our state psychological association. And, it provides a vehicle for psychologists at all stages of their professional development to share questions, concerns and interests. We will leave time at the end of each meeting to explore ideas for future meetings.

If you wish to participate, please email me. I will send out the CE topic prior to the first meeting. Please note that in order to get the CEs you must be a member of CPA. But, please join us, even if you are not a CPA member, for networking, support, and discussion.

Beth Ferree, Ph.D.

Chair, Colleague Awareness Resources & Education Program

bethferree@comcast.net ◊

Disaster Response Chair

By Susan O'Grady, Ph.D.

As a county chapter of The California Psychological Association, CCPA is required to have certain committee chairs represented on the board. If you have interest in Disaster Response, we invite you to join our board.

This month will be the changing of the guard, with Dr. Alissa Scanlin assuming the role of president, and Dr. Howard Friedman moving into past-president and also taking over Alissa's job as Program Chair. I will step be released from the six-year term as president-elect, president, and past-president, and remain on the board as Ethics Chair. Our board meetings take place on the second Tuesday of each month at 11:30-12:45. We meet monthly, except during the summer.

Disaster Response Chair Description and Duties

The California Psychological Association Disaster Response Network is a community-based organization and psychologists get involved through their local psychological association and usually their local American Red Cross Chapter. Each local psychological association has a disaster response chair and the chair sets up meetings and passes on information on disaster response opportunities and news. The local chair is involved with the CPA disaster response network.

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Duties:

1. Get trained by and network with local American Red Cross Chapter the Foundations of Disaster Mental Health course is required.
2. Attend annual meeting DRN Meeting. This is one of the most important duties and funding may be provided by the chapter for travel to the one-day meeting.
3. Recruit members for the chapter DRN Committee, hold meetings and keep chapter informed of activities of the committee.
4. Network with Medical Reserve Corps, County Mental Health, VA or other agencies depending upon interests, needs etc.
5. Provide information to state DRN Chair about local disasters
6. Consult with adjacent communities and associations during disasters
7. Take continuing education courses related to disaster response at DRN Annual meeting and other venues.

I realize this sounds like a lot of work but it is an important position, and for anyone interested in developing this area of expertise, it would be an excellent way to begin. I was recently asked by the Walnut Creek CERT (Emergency Response Team) to coordinate with them about teaching the mental health unit for one of their trainings. They have a PowerPoint presentation already developed, but needed a psychologist to present it, and be available for questions and discussion. This would be a great role for an early career psychologist.

If you did not attend the workshop last year *The Impact of Critical Incidents & Natural Disasters on First Responders, Families and the Community*, you may be interested in the summary from our spring newsletter in 2014, that describes some of the issues involved in working as a first responder: Responding to First Responders: <http://www.cocopsych.org/index.php?Target=Newsletters>

If you have further questions, please feel free to email me and if I can't answer your questions I will put you in touch with someone who will.

Susan O'Grady, Ph.D. ♦



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Letter from the Editor

The CCPA Newsletter is a forum for sharing information. I invite submission about 1) groups that you offer, 2) reviews of workshops you have attended or book that you have found useful or 3) a variety of other topics relevant to the community. Occasionally, I include an interview with a CCPA member, so if you would like to respond to a list of questions about yourself and your practice, please contact me. It is a great way to be better known within the organization. Please consider contributing to future newsletters. The following dates are deadlines by which I must have your submission. Thank you in advance!

April 15, 2015 – Spring edition

July 15, 2015 – Summer edition

October 15, 2015 – Fall edition

The following prices are in effect for advertisements:

¼ Page Ad \$30 ½ Page Ad \$60 ¾ Page Ad \$100

Note: Advertisements for office space are free to CCPA members.

All professional advertisements are free on the listserv for CPPA members.

Email submissions by the deadline to sarahewoodphd@hush.com ♦

Calendar of Events

Mark Your Calendars!

Annual CCPA Meeting What You Need to Know About the ICD (Required by October 1, 2015)

Date: January 24, 2015
Time: 12:00 – 1:00 pm Annual Business Meeting and Lunch
1:00 – 4:00 pm Presentation
Where: TBA
Presenter: Carol Goodheart, Ed.D.

RSVP to: Dr. Alissa Scanlin 3468 Mt Diablo Blvd, Ste. B203, Lafayette, CA 94549 PHONE: (925) 283-3902
EMAIL: <mailto:drscanlin@pacbell.net> Include your Name, Address, License#, Phone and Email
(All event locations are wheelchair accessible. Please let me know if you need any special accommodations.)

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List of Groups

“Women’s Group” for Women in their 20’s and 30’s with emphasis on Mental Health Challenges, Intimacy, Profession Identity and Moving Forward in their Lives

Meeting Day: Alternate Tuesday’s
Meeting Time: 5:40 – 7:15 pm
Meeting Location: Rockridge, Oakland
Group Leader: Fran Krieger-Lowitz, Ph.D.
Contact Number: (510) 841-2007

Breakthrough Weight Loss and Maintenance Group

Meeting Day: Thursday’s
Meeting Time: 6:00 - 7:30 pm
Group Leader: Candia Smith, DMH
Contact Number: (925) 254-7823
Email: candia.smith@comcast.net

Introduction to Meditation for Stress Reduction Group

Meeting Day: 1st and 3rd Tuesday of each month
Meeting Time: 6:00 -7:00 pm
Cost: Free, small donation asked for rent
Group Leader: Candia Smith, DMH
Contact Number: (925) 254-7823
Email: candia.smith@comcast.net

Men’s Group

Meeting Day: Monday’s
Meeting Time: 7:30 -9:00 pm
Group Leader: Bruce H. Feingold, Ph.D.
Contact Number: (925) 945-1315

Men’s Group

Meeting Day: Wednesday’s
Meeting Time: 6:00-7:30 pm
Group Leader: Bruce H. Feingold, Ph.D.
Contact Number: (925) 945-1315

Mindfulness-Based Stress Reduction Class

Group Leader: Susan O’Grady, Ph.D.
Group meets for 8 weeks, 5:00 – 7:00 pm
Contact Number: 925-938-6786
Website: www.ogradywellbeing.com
Email: susanogradyphd@gmail.com

Dialectical Behavior Therapy Group (ages 19 +)

Meeting Day & Time: Tuesday’s 5:30 – 7:00 pm
And
Meeting Day & Time: Wednesday’s 9:30 – 11 am
Group Leaders: Elizabeth Rauch Leftik, Psy.D.
(925) 314-6354
Sarah E. Wood, Ph.D.
(925) 680-1844

Website: www.mt diablopsychologicalservices.com

Interpersonal Psychotherapy Group: Co-ed

Meeting Day: Wednesday’s
Meeting Time: 5:00-6:30 pm
Leader: Ann Steiner, Ph.D., MFT, CGP
Contact Number: 925-962-0060
Website: www.DrSteiner.com

Chronic Medical Illness Group

Meeting Day: Wednesday’s
Meeting Time: 12:30 - 2:00 pm
Group Leader: Ann Steiner, Ph.D., MFT, CGP
Contact Number: 925-962-0060
Website: www.DrSteiner.com

Psychotherapy Group for Psychotherapists

Meeting Day: Thursday’s
Meeting Time: 12:30 - 2:00 pm
Leader: Ann Steiner, Ph.D., MFT, CGP
Contact Number: 925-962-0060
Website: www.DrSteiner.com

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List of Groups (cont'd)

Psychotherapy Group for Pre-Licensed and Early Career Therapists

Meeting Day: Thursday's
Meeting Time: 9:00 - 10:30 am
Leader: Ann Steiner, Ph.D., MFT, CGP
Contact Number: 925-962-0060
Website: www.DrSteiner.com
Website: www.PsychotherapyTools.com

DBT Skills Group for Adults in Orinda

Meeting Day: Friday's
Meeting Time: 3:00 – 4:30 pm
Location: Orinda
Group Leader: Amanda Gale, Ph.D. and
Katherine Schulz, LCSW
Contact Number: Dr. Gale at (415) 295-1549 or
Katherine at (925) 465-7474
Email: AmandaGaleSF@gmail.com or
therapy@katherineschulz.com

DBT Group for Adolescents and Parents

Meeting Day: Saturday's
Meeting Time: 10:30 am – 12:00 pm
Contact Number: 925-956-4636
Website: www.eastbaybehaviortherapycenter.com

DBT Group for Adults

Meeting Day: Monday's
Meeting Time: 6:30 - 8:00 pm
Contact Number: 925-956-4636
Website: www.eastbaybehaviortherapycenter.com

Mother's Group with Emphasis on Parenting, Relationships, and Balancing Work and Family Life

Meeting Day: Alternate Thursday's
Meeting Time: 12:10 - 1:40 pm
Location: Walnut Creek
Group Leader: Fran Krieger-Lowitz, Ph.D.
Contact Number: 510-841-2007



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2015 Board of Directors & Committee Chairs

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Past President:

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President Elect:

OPEN

Secretary:

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Paradigm Shift and Psychologists’ Social Responsibility

Rut Gubkin, PhD



Rut Gubkin, PhD

(rgubkinphd@aol.com) is a trilingual/tricultural practitioner focusing on the impact of traumatizing experiences, multiculturalism, posttrauma growth, spirituality, health psychology and disaster mental health. She has been an expert commentator of mental health for Univision, the Spanish speaking broadcast network for the last 15 years, is the Chair of CPA Division VII, and serves as the ACPA Disaster Response Network Chair.

As of 2012, 16.9% of the American population is of Hispanic and Latino origin, making this the largest ethnic minority group in the US (US Census Bureau, 2012a). California has the largest Hispanic/Latino population (14.5 million) and this number is predicted to grow making it a minority-majority state. By 2060, 31% of the total U.S. population will be of Hispanic/Latino origin (US Census Bureau, 2012b). The terms Hispanic and Latino are frequently used interchangeably when referring to Spanish speaking people. However, Hispanic excludes people from Brazil and Latino/a includes people from Mexico, Central, South America and the Caribbean while excluding Spain.

Acculturative stress (Berry, 1997) can negatively affect the psychological well being of marginalized groups living in the US (Hovey & Magaña, 2000). Latino/a adults and adolescents have higher rates of depression and anxiety than non-Hispanics Whites (Torres Stone, Rivera & Berdahl, 2004). American born Latino/as have higher rates of depression than Latino/as immigrants (Alegria, Shrout, Woo, Guarnaccia, Sribney, Vila, et al., 2007) and higher rates of anxiety are associated with increased number of years living in the US (Cook, Alegria, Lin & Guo, 2009). Mexican American college students also experience depression and anxiety resulting from acculturative stress, even though they are regarded as more acculturated (Crockett, Iturbide, Torres Stone & Raffaelli, 2007).

The traumatizing impact of the experiences of migration and acculturation can place this population at high risk for ongoing psychological deterioration. Pre-immigration experiences of political violence and/or poverty, and traumatizing border

crossing experiences tend to leave enduring wounds in this population (Ornelas & Perreira, 2011). The experience of separation from family members given their family-oriented culture and the uncertainty of reunification due to visa refusal and/or lack of finances may also deepen these wounds.

Migration stress from culture shock, the struggle for daily survival, minority status and the constant fear of deportation are among the many obstacles that can exacerbate pre-existing vulnerabilities. Cultural differences in values, roles and gender expectations lead to intergenerational conflicts within the family. The complex shifting between two cultures without socially established environmental support challenges Latino/as’ cultural identity. What was once considered as safe and grounding family and social systems are now volatile and fragile.

Findings show that being subjected to racial discrimination and the pressure to learn English are linked to high levels of lasting depression among Latino/as (Torres, 2010). In addition to the emphasis on conformity to the English language and stigmatization of Spanish, Leuck and Wilson (2011) state that existing social ecosystems in the U.S. inherently increase the acculturative stress and poor well-being of this group. Linguistically appropriate psychological services to this diverse population are few, limited and often insensitive to their psychological, social and cultural needs (Russell & Doucette, 2012). Recognizing the magnitude of this condition and addressing it accordingly will have a positive human, social and economic effect on this population.

Cultural integration requires substantial negotiation and reciprocal accommodation from all groups involved (Berry, 2005). Globalization has already changed the face and voice of psychology but the discipline, as a whole, has not yet embraced this paradigm shift. Multiculturalism requires a new way of relating to each other professionally and personally. With increasing globalization, we are becoming children of the world rather than a single country. As psychologists we must break through our own prejudices and create affordable conditions to allow our services to be accessible to everyone in need. Psychologists can either exacerbate the suffering or be part of a compassionate solution that will ultimately benefit us all. Which path will you choose? ■

Complete references for this article can be found at www.cpapsych.org – select *The California Psychologist* from the **Professional Resources** menu.