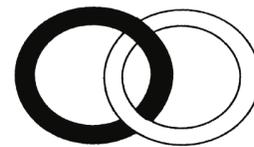


The
Redwood
Empire

Therapist

MAY 2010



REDWOOD EMPIRE CHAPTER CALIFORNIA ASSOCIATION OF MARRIAGE & FAMILY THERAPISTS

OUR MAY MEETING

PSYCHOLOGY OF TECHNOLOGY, INTERNET ADDICTION AND THE DIGITAL DIVIDE BETWEEN IMMIGRANTS (PARENTS) AND NATIVES (CHILDREN)

This timely and stimulating presentation by Dr. Ofer Zur will include a survey of the emerging fields of Psychology of the Internet, Internet Addiction, and Online Gaming. Dr. Zur will address the increased tension between parents and children regarding Internet use, overuse, and abuse. The fact that parents, by definition, are digital immigrants and children are digital natives creates multi-levels of misunderstanding, miscommunication, and inevitable conflict.

Also, Dr. Zur will address the true nature of multi-tasking, Internet use and abuse, and online gaming, and will explore the application of the addiction model to Internet Addiction and Online Gaming Addiction. Additionally, he will provide some ideas about assessment and interventions.

Ofer Zur, Ph.D. is a licensed psychologist, instructor, forensic and ethics consultant, and expert witness in private psychotherapy practice in Sonoma. He has been in practice for twenty years and is director of the Zur Institute, LLC (see

May 14th RECAMFT Meeting

10:30 - 11:00 social & sign in
11:00 - 1:00 meeting

Psychology of Technology, Internet Addiction, and the Digital Divide Between Digital Immigrants (parents) and Digital Natives (children)

Ofer Zur, Ph.D. www.zurinstitute.com/internetaddiction.html

ODD FELLOWS TEMPLE/MERCER HALL, 545 PACIFIC AVE., SANTA ROSA

IF THE PARKING LOT IS FULL, YOU CAN PARK AT THE J.C. GARAGE ACROSS MENDOCINO AVE. FOR \$3 OR ASK PERMISSION TO PARK AT THE EGGAN AND LANCE MORTUARY. IF YOU DO NOT ASK THE COST OF TOWING IS \$225.

June 11th, 2010

Focusing: A Somatic Approach to Psychotherapy
John Amodeo, Ph.D., MFT

October 2, 2010

A Split Day Workshop with Two Terrific Presenters
Barbara Griswold, MFT on Navigating the Insurance Maze
Larry Waldman, Ph.D. on The Graduate Course You Never Had

<http://www.zurinstitute.com>) , which offers over 100 innovative and challenging continuing education online courses for MFTs and other mental health practitioners. The program also includes an online Internet addiction Certification for 12 CE credits. (See <http://www.zurinstitute.com/internetwebcert12course.html>) Dr. Zur is a well known speaker and author of several books on the topics of HIPPA compliance, fee for service in private practice and boundaries in psychotherapy.

President's Message

Cynthia Halliday, MFT



*"The trees are coming into leaf
Like something almost being said;
The recent buds relax and spread,
Their greenness is a kind of grief.
Is it that they are born again
And we grow old? No, they die too,
Their yearly trick of looking new
Is written down in rings of grain.
Yet still the unresting castles thresh
In fullgrown thickness every May.
Last year is dead, they seem to say,
Begin afresh, afresh, afresh."*

- Philip Larkin, *The Trees*

As President of RECAMFT, I am honored to have an opportunity to write a message for our newsletter. I ponder what do I want to write?...I notice that I am struck this month by the wash of Springs' rain, the showers of icy hail, cold sharp winds, and the waves of warm sunshine stirred together, nurturing the Earth. These twists and turns of Spring days breathe lightness into the air and energize the lengthening days. My spirits lift.

Thinking of Spring reminds me of the powerful natural forces that move us as we experience this season of lengthening days. By the start of May, most trees are in full leaf and the Earth is brimming with both plants and animals. This surge of life from the earth inspired our ancestors into action; into celebration. Aboriginal and traditional rituals and festivals of early May began as a celebration of life and fertility, the time for planting of crops and vegetable gardens, and for the regeneration of life that comes with increased sunlight.

As you experience the lengthening days of sunlight and the earth's fullness this season, what action are you called to? What do you want to celebrate? What wants

to, as in the words of poet, Phillip Larkin, "Begin afresh, afresh, afresh"?

Cynthia Halliday has an Art Therapy and Marriage and Family Therapy practice in Santa Rosa. She can be reached at (707) 578-1064

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A Condition You May Have Missed

by Michael Krikorian, M.A.

You get a new referral - a teen that the parents complain is very resistant, hard to motivate, stubborn. The boy struggles in school, has some RSP classes as learning is hard. He has only a couple of friends. You meet him and he seems shy but rather surely. What is your initial assessment? Oppositional Defiant Disorder? Learning disabilities? ADD?

Another child comes to your attention, also a boy, who is very outgoing. In fact, he likes to talk a lot, particularly about cars which he knows a whole lot about. Parents report that he has only one friend because he tends to drive other kids nuts with his professor-like way of talking and they tease him mercilessly. He sometimes melts down into an explosive state. What is going on here - ADHD? Bipolar?

Actually, the first boy has High Functioning Autism. The second boy has Asperger's Syndrome. Some of you may have suspected that but I'm afraid many of us may not have considered the syndromes on the autistic spectrum because we don't know enough about them. I was the same way until the issue touched my own family and I became motivated to learn more. I subsequently realized that earlier in my career I may have misdiagnosed several clients and not truly understood them.

So what are the Autism Spectrum Disorders (ASD)? There are 5 developmental disorders included in ASD. They are Autistic Disorder, Asperger's Disorder, Childhood Disintegrative Disorder, Rett's Disorder and Pervasive Developmental Disorder NOS. I will focus in this article on Autism and Asperger's, the most prevalent of the 5. These disorders are considered developmental, that is, they are disturbances in normal physical and/or psychological development that show up in early childhood and last a lifetime. Modern research suggests these are brain disorders that have little or nothing to do with family dynamics in terms of their origin. They occur more often than not in boys. They can affect a child's (and adult's) ability to connect with other people, socialize, experience sensory stimulation "normally", communicate, adjust to change. ASD's can range from mild where a child can be in a regular classroom and with appropriate support take

part in most activities, to severe, where a child needs constant supervision and help with basic needs.

A child with Autism may have trouble communicating what they are thinking and feeling and display a rigid adherence to certain routines. A change in these routines may bring on "meltdowns" that can include aggression and self injury. Children with Autism may have short attention spans, hyperactivity and IQ's that range from average to below average. They can be hypersensitive to stimuli like loud noises or the texture of certain foods or clothing or even light touch. Most ASD kids have trouble developing friendships as they have difficulty understanding how to include another person in sharing and reciprocal conversations and play. By teen years, they can be quite oppositional, isolated and anxious.

Asperger's Syndrome differs from autism in that intelligence tends to range from mid to higher IQ's. Their language skills can be highly developed thus sounding like a "little professor" when they talk. Conversations tend to be one sided, though, primarily focused on the interests of the person with Asperger's (which can be quite narrow). Kids with Asperger's generally have more age-appropriate self help skills although they, too, can have idiosyncrases in behavior due to sensory sensitivities (e.g. won't comb their hair due to it being "painful"). Many kids both with Asperger's and Autism may have some motor skill/coordination problems making things like handwriting and sports difficult.

Do these kids benefit from counseling? Yes, although "insight" may be less useful for those with Autism and more useful for those with Asperger's, both need emotional support and understanding. They also need a specific type of social skills training done by organizations that work with this population (in Sonoma County, this includes Anova School; Speech, Language and Learning Services of Marin/Sonoma; Lifeworks of Sonoma).

Parents definitely need help understanding that much of the difficult behavior in these kids is not deliberate but a function of their brain wiring. Parents need help with behavior plans to motivate their ASD kids to new behaviors and extinguish problematic behaviors. The above mentioned organizations can help with such behavior plans. Also, the book [The Tough Kid Parent Book](#) can be useful. Parents also need help not letting the stresses of raising these kids lead to marital breakdown.

Medication may be helpful for ASD kids to reduce the high anxiety or explosive anger they may experience.

The population of people with ASD seems to be growing rapidly although controversy still exists whether this is due to a broader view of diagnosis or if the disorder is actually increasing due to some as of yet unidentified causal agent. No matter what the source, there is a large population of youth, parents and adults who may benefit from our services, but only if we become truly informed on the needs and capabilities of these people.

Michael Krikorian has been licensed for over 30 years working with teens, adults and couples. You can get more information by visiting mkrikorian-therapist.com or calling him at (707) 579-0838.

Bridging the Couple's Chasm Gottman Level 1 Training

A Workshop for Clinicians

**A NEW
Research-based Approach
(12 CE's)**

presented by

**Lisa Lund, CRC, MFT
Marcia Gomez, LCSW**

Santa Rosa ~ May 7th - 8th, 2010

acouplesplace.com

*What You Missed
By Debbie Oliver, MFT*

Tim Stein, MFT, was our guest speaker at the April RECAMFT meeting. Tim spoke to us about the assessment and treatment of sexual addiction, providing us with a wealth of information and resources in a well organized and engaging manner.

Tim told us that sex addiction is a pathological relationship to a mood altering sexual experience. Like an alcoholic has an unhealthy relationship to alcohol, a sex addict has an unhealthy relationship to sexual behaviors. Since sex addicts have relationships with an event or process, their real relationships are not with other people; in other words, it's lonely to be a sex addict or the partner of a sex addict. Sex addiction isn't about sex; it's about masking core feelings of loneliness and unworthiness. A sex addict's belief system includes I am basically a bad and unworthy person, no one would love me as I am, my needs are never going to be met if I have to depend on others, sex is my most important need, and I am bad because sex is my most important need.

Tim uses TRAP DOORS, nine questions that can help identify the presence of sex addiction, as an initial assessment tool.

Therapy – Have you ever sought treatment for problematic sexual behaviors?

Relationship disturbance – Have any of your relationships been damaged or disturbed as a result of your sexual behaviors?

Abuse – Were you sexually abused as a child or adolescent?

Preoccupation – Are you preoccupied with thoughts about sex?

Depression – Do you experience any symptoms of depression because of your sexual behaviors?

Out of control – Do you feel like your sexual behaviors are out of control?

Out of sight – Have you ever felt the need to keep your sexual behavior out of sight?

Risky behaviors – Have you engaged in dangerous, illegal, or otherwise risky sexual behaviors?

Shame – Have you experienced shame because of your sexual behavior?

Additionally, the Sexual Addiction Screening Test – Revised (SAST-R) is an online assessment that is available to clients at www.SexHelp.com. Comprised of 45 yes or no questions, it provides a profile of responses which help to discriminate between addictive and non-addictive behaviors.

Tim's treatment goal is not simply to decrease addictive behaviors, but instead to bring about a profound shift of beliefs so the sexual obsession loses its power. Treatment includes a process of identifying, confronting, and releasing shame from prior abuse or trauma. Treatment includes a mix of individual therapy, group therapy, Twelve Step work (Sex Addicts

Anonymous, Sex and Love Addicts Anonymous, Sexaholics Anonymous) and working with the partner or family.

Tim has a private practice in downtown Santa Rosa. In addition to being a certified sex addiction therapist candidate, he also focuses on treatment of trauma, depression, and anxiety. Tim may be reached at 707-888-9098.

Debbie Oliver works with adults and teens with an emphasis on treating trauma and anxiety disorders. For more info please go to www.debbieolivermft.com.

helping her clients achieve new levels of success, healing and personal growth. For more information or to schedule a consultation, please contact Terrie at 707-477-9308 or on the web at www.ReikiWolfe.com.

The 5150 Raffle is held every month at the RECAMFT general meeting. All attendees are eligible to win. Winners please contact the person donating the service WITHIN 6 WEEKS. PLEASE PASS THE 5150 PRIZE TO SOMEONE ELSE IF YOU ARE NOT ABLE TO TAKE ADVANTAGE OF THE OFFERING. If anyone has ideas about people who might be interested in donating future 5150 prizes, please contact Jan Lowry-Cole at 542-Enjoy! (For winners of the raffle, please give Jan feedback about the service you receive.)

Alice Miller

child abuse and mistreatment

http://www.alice-miller.com/readersmail_en.php?lang=en&nid=3002&grp=0410

Information. Monday April 05, 2010

AM: Unfortunately i am unable to continue my passionate work on this site. My strong lost of mussels that caused a big witness in my boody that doesn't allow me to continue longer. I thank you for all the letters you have sent to this box that shaw how children are treated still in our time and in our society. These letters will stay as an important witness also after my death under my copyright.

Thank you.

a great healer & woman of wisdom
is very ill and may be close to passing on
may her journey be blessed & graced
by the merit of her passionate dedication
to the healing of adults and children
who have known childhood trauma

A remembrance by Robert Leverant, LMFT 823-0818

May 5150

This month's 5150 prize is a one hour guided relaxation with Terrie Wolfe-Lee, CHT. Using relaxation as a powerful tool for healing, the goal of this session is to enter a deeply restful and revitalizing state. In this state, you release stress, tension, and resistance and allow a state of vital health and well being to be restored. Terrie is a Certified Hypnotherapist and Master level Reiki practitioner. She has a thriving practice in Santa Rosa offering private Hypnotherapy and Reiki sessions as well as classes and workshops. She is committed to

Therapeutic Case Management

By Jennifer Westcott MA, MFTI
& Drew Ross MA, MFT

Traditional case management typically involves creating a system of care for the benefit of the individual and/or family unit, providing insight and guidance around issues of safety, transition, health and wellness. Therapeutic case management maintains this creation of a solid care system while working with clients and families from a psychological systems approach. This involves paying particular attention to individual and family dynamics, long-standing patterns of behavior, and environmental and psychological factors. It is this attention and awareness of these components that differentiates therapeutic case management from traditional case management. These components become particularly important when anxiety, depression, and other mental health issues are compounding positive progress and forward movement. This is especially true when working with the elderly population who face the inherent difficulties of aging.

Life experiences, from childhood abuse to adult grief, affect the way individuals operate and certainly how they deal with the myriad of issues around aging. Understanding an individual's life events and family dynamics allows for a therapeutic case manager to understand how that individual and/or family might manage life transitions or may explain why they are currently experiencing dysfunction. So much of the work as a therapeutic case manager is gaining this understanding as a knowledge base. This base can then provide a foundation from which to effect positive outcomes and forward movement.

FREE WORKSHOP SPONSORED BY POST ADOPTION SERVICES and



**Understanding and Repairing Attachment Trauma
a relating and containing approach**

with

VIVIENNE ROSEBY, PhD

Friday, June 4, 2010

9 am to 4 pm (check-in from 8:30-9)

We will apply a developmental/neurobiological lens to understand attachment trauma, and a developmental/behavioral approach to repair the effects. Vivienne Roseby is a Clinical Consultant for Families First and a therapist in private practice in Davis, CA. She has published many books and journal articles and has appeared in training videos for Cavalcade Productions.

**at the Volunteer Center 153 Stony Circle, Santa Rosa
6 CEUs for \$25.00 for MFTs and LCSWs (PCE # 3977)**

Therapeutic case managers seek to understand the psychological aspects of individual and/or family systems, as this understanding is imperative to creating a functional system of care. Creating a functional system of care involves goal setting, decision-making, resource location, and future planning, all of which necessitates clear communication skills. When families are dealing with these issues and needing to work as a unit to support a loved one or to reduce dysfunction in a current system, it is common that age-old family tensions, roles, and defenses become the backdrop as they maneuver new conversations. This is where therapeutic case management becomes essential. In order to help a family or individual communicate and establish a new functional structure, a therapeutic case manager can mediate, encourage, help to confront, and highlight important aspects in conversations thus creating movement toward new insights and awareness that might better serve the system as a whole. Case management is typically employed when a family system or an individual has come to a place of dysfunction. This may be due to safety, physical or mental health, financial, and/or isolation issues. No matter what the issues, the bottom line is that the current system isn't working and change is necessary. Understanding the loss, powerlessness, anxiety, fear and resistance that come with change is another area in

which therapeutic skills are essential. Change is challenging even in its best moments. When we change we give up something, maybe something that has been a comfort, even if it was a dysfunctional comfort. There is great loss in change. Sometimes change leaves a feeling of powerlessness over a moving dynamic. This is typical in a family system dealing with an aging loved one where inherent physical, mental, and psychological issues can become a slippery slope. It is important to acknowledge these feelings throughout case management and as a therapeutic case manager the acknowledgement can be simply holding that feeling empathetically. There may be no solution for this feeling, nor does there need to be, but the greatest tool is often acknowledging the presence of that feeling in order to move beyond it and into the change.

The overriding goal of therapeutic case management is effecting forward movement and positive change to a system that has reached a point of dysfunction. Therapists bring imperative understanding in facilitating this change by having an appropriate knowledge base and clear understanding of communication, systems, and family dynamics, as well as expertise in concepts of psychological and mental health issues. As agents of change, therapeutic case managers support clients and families as they maneuver through the emotional and logistical barriers

experienced in loss, grief, aging and transitions, while working collaboratively with clients, families, and other professionals to meet these goals and to meet the needs of individuals and families as a whole.



411 East St. Healdsburg, CA 95448
(707) 239-2310
www.creativecounseling.org

Ads and Announcements

2009 Directory Corrections

Catherine Capitani's MFT phone numbers are:
707 522-0488 or 529-5529

Office Space

Office available Santa Rosa: Newly renovated office building near downtown. Large waiting rooms, wheelchair accessible, break room. 200 sq. ft. plus patio. Great for individuals, couples, children and groups. Available Fridays and weekends. \$125 per month per day. Call Mervin at 707 570 3940 x2

SHARE PSYCHOTHERAPY OFFICE IN DOWNTOWN NOVATO: QUIET, PLEASANT, WITH WAITING AREA, HANDICAP ACCESS, NEAR AMMENITIES AND BUS LINE. FLEXIBLE HOURS. \$200/MO. CALL DONNA AT 892-2059

One office available in 5-office suite with other therapists. Suitable for psychotherapy, bodywork, other professionals. Good parking, shared waiting room, kitchenette, close to restaurants and parks. Reasonable rent includes utilities and expenses. Also sublet of **another office** in same suite offered several days/week. Call Susan @ 538-2011.

Beautiful Office overlooking garden \$450 or \$100 per day/per mo. 3 other therapy offices. Plenty of parking. Call Clearheart 568-6095

Bulletin Board

Office space desired. I am looking for office space on Tuesday and Thursday preferably, or Monday and Wednesday second option, in the SRHS/SRJC or north Santa Rosa areas. Please contact Dino at dandruffoni@comcast.net or 522-8725

Marin CAMFT CEU Event

SUPERVISION – featuring Mary Riemersma
May 15, 2010 Saturday 9a – 4 p location (tba)
Registration open soon, at marincamft.org \$45
*boxed lunch available upon request

LAW and ETHICS: What Does the Law Expect of Me?
Featuring David Jensen, JD
September 25, 2010 Saturday 9a – 4p \$45
At Corte Madera Town Center room #201
6 CEUs each!
www.marincamft.org or
Veronika Noble 415 300 6138 fvnoble@msn.com or
Pat Saunders counseling@familyworks.org

WELCOME NEW MEMBERS

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**A VERY WARM THANKS
TO OUR CONTRIBUTORS
THIS MONTH.**

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May Issue

NEWSLETTER COSTS & DEADLINES

Line ads and announcements:

Members - \$5 per line
Non-members - \$12 per line

Flyers inserted in newsletter - \$100

Mailing labels - Members - \$65
Non-members - \$125

Display ads:

Full page - 9.75" x 7.5" = \$200
Half page - 4.75" x 7.5" = \$110
Quarter page - 4.5" x 3.5" = \$60
Eighth page - 2" x 3.5" = \$35

10% discount for 5 month ad commitment
20% discount for 10 month ad commitment

Deadlines:

Articles (500 words max) - 15th of the month
Advertisements - 15th of the month

For more information call, fax, or email the office at:
707 575-0596 or therapy@recamft.org

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