



Analyze This!



The Official Newsletter of the San Gabriel Valley Psychological Association

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March/April 2022

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SGVPA Inaugural Diversity Conference

March 19, 2022

All members and non-member professionals
are invited to attend an all day, in-person event for **6 CE's**.

Diversity Series discussions on BLM,
White Allyship, LGBTQ+ issues,
Covid's Impact on the Asian American Community,
Latinx Mental Health, and Native American
and Indigenous Mental Health.

This will be an all day event, offering continental breakfast and lunch,
as well as networking opportunities!

March 19 2022

Live CE's

9:00 am-4:00 pm

<https://www.eventbrite.com/e/copy-of-diversity-conference-navigating-through-culture-and-difference-tickets-243279243767>.

Meet the President!

On-going

President Wayne Kao, PsyD
will continue to organize informal
coffee meet-and greets to meet or reconnect
with our wonderful membership.

All are welcome!

Watch the SGVPA Listserv posts for announcements of times and places.

SGVPA supports Black Lives Matter and systemic social justice reform. We are making efforts to increase diversity representation in our organization, in our profession, and nationwide.

PRESIDENT'S MESSAGE

*I'm gonna lay down my sword and shield,
down by the riverside.
Ain't gonna study war no more. "*
—African American Spiritual Song
Recently covered by band, Roots and Tings



I've recently been contemplating the comparison of competition and collaboration, and how they parallel war and peace. On one end, competition/war decides who gains access to resources for survival, and higher levels of achievement and wealth. At times, it brings out the most in us, and tests our resolve and will. However, it can also bring out the worst in us, as we may be pushing someone aside for our own gain.

On the other side, collaboration/peace decides that we can move forward together, that we can all share in the resources, achievement and wealth. When done well, we learn that we can achieve more than we thought when we work together, and when we acknowledge and appreciate those that helped us along the way. When exploited, it can make us complacent and dependent.

As a psychologist, someone who has been able to gain a high level of education, I struggle with determining how much competition or collaboration I engaged in to reach my own goals. Did my success ever mean someone else's failure? Was it necessary or even a natural order of things?

I commonly hear phrases like, "It's a dog eat dog world," or, "If you're not the best, then you lost," observing the competitive aspects of life. I've certainly found myself on both ends of these statements, where I was unable to achieve a goal because someone else got the opportunity above me, and vice versa. I've succeeded before wondering if someone else would have been more qualified, and looked over for an opportunity when I knew that I was more qualified. The difficult point in these oftentimes arbitrary situations is that we attach value to these successes and failures. If you succeeded, it means that you were the best. If you failed, it means that you weren't good enough.

On the flip side, for all I hear about the wonders and benefits of competition, I also hear about the strength of collaboration, that we are "stronger together," and "there is no 'I' in team." However, if we're always working together and collaborating, how do I know what my contribution was? How do I address when someone else isn't pulling their weight? These are such opposite view points, that I wonder if there can ever be a harmony between them. When is the time to compete, and when is the time to collaborate?

The truth is that we live in a highly arbitrary world, filled with good and bad intentions, blind spots, and people putting their best feet forward, and still falling short. This conundrum makes for a constant battle within myself. We live in such a world that we take arbitrary judgments and state them as fact. If a student is struggling in class or practicum, it is because they are "incompetent." If they are succeeding, it is because they are superior.

For me, this is more of a discussion of goodness of fit. For example, struggling students oftentimes are not in the environment to help them succeed, whereas those that are succeeding have found that right fit, only to find themselves struggling in another class or internship when they've changed settings or a supervisor. Conversely, the previously struggling student is able to thrive in another classes or internship settings when they have found a supervisory match.

With collaboration, everyone can be competitive.

As a psychologist, a professor and clinical supervisor, I land on the ideal that I'd like to know that I can stand on my own two feet, that I can take care of myself, and also succeed independently, if need be. However, I'd also like to know that I have the support of those around me, so that it is not a lonely venture, and that I can thrive on various perspectives, thereby strengthening my own.

In the coming months this year, as we continue to struggle with the pandemic, we will continue our work towards increasing diversity in SGVPA, with our Diversity Conference on March 19. This will be an *in-person conference*, where we will be able to reconnect in person, catch up, and work towards better understanding diverse viewpoints.

Also, please be on the lookout for our continued rollout of upcoming SGVPA CE events, (either in-person and virtually). We'll be delving into psychopharmacology, substance abuse, intimate partner violence, and more.

Finally, although we sadly had to postpone our January Jubilee a bit, we are firmly committed to finding another date to celebrate it *in-person*, when the pandemic is decisively in our past!

Respectfully,

Wayne Kao, PsyD

Diversity Committee Meetings

If you are interested in being involved
in our Diversity Committee where you
can stay informed on the activities and events that are being planned in SGVPA
as well as stay up to date on resources available to our larger community, please contact
Diversity Chair Amee Velasco at ameevelasco@gmail.com for more information.

Disclaimer: The opinions and views expressed in this publication do not necessarily reflect those of the San Gabriel Valley Psychological Association.

Black History is Now

By Janiel I. Henry, PsyD



February marks the time in the US and around the world where the works, achievements, and history of Black Americans and the Black community are celebrated. Since 1976, each president has designated February as Black History month, giving us an annual opportunity to celebrate all around the country through events, activities, and programs. The origin of Black History month, though, goes back even further to 1915. That's when an organization called the Association for the Study of African American Life and History (ASALH), led by historian Carter G. Woodson, was formed. This organization dedicated themselves to the research of the achievements of black Americans and others of African descent.

This year's timely and highly relevant theme was *Black Health and Wellness* which celebrates and brings our attention to not only traditional ways of healing and wellness but other ways of healing—medicine that has contributed to the health, resilience, strength, power, and connections of Black Americans and the African Diaspora for centuries.

I remember sharing my decision to be a psychologist with family members—a field where only 3-4% of psychologists are Black. Initially, this wasn't received positively—and understandably so. In this country, psychology has historically had roles in oppressing people of color (as was poignantly summarized and shared in the Historical Chronology Project for the American Psychological Association). While we have come far from our psychology origins, we still have further to go in supporting the mental health and wellness of the Black population. While the need for more Black psychologists is apparent, research has shown us that matching clients by race and gender does not necessarily improve outcomes. This means that we, as psychologists, no matter our background or identity, are gifted with the opportunity to support positive outcomes for Black and African-American clients. We can do this by advocating for change and elevating the wellness of our clients, not only by increasing our personal awareness, knowledge, and skills, but by also supporting our Black and African-American clients on both a macro and micro level. While the Black and African-American identities are not a monolith, below are a few suggestions for you to consider.

1. *Improve your understanding of Black Diversity.* The history of the Black Diaspora spans far and wide. In the US, varied cultural and ethnic identities such as Black, African, African-American, Afro-Latino, Afro-Caribbean coupled with regional differences and identities, as well as socioeconomic differences, bring a complex, layered, and rich cultural context and history to the therapy room, and the diverse practice settings you may work in. Educate yourself. Learn the history. Expand your awareness.
2. *Validate experiences of racism, discrimination, and systemic oppression.* Encourage spaces that affirm,

and actively work towards change as an anti-racist and change agent. Within recent years, social justice issues have been on the forefront and yielded increased shifts in conversations and actions in response to the personal and collective experiences of Black people in this country. What's in your personal and collective power to support efforts of Diversity, Equity, and Inclusion (DEI)? Reflect. Identify your Role. Challenge yourself. Take Action.

3. *Familiarize yourself with wellness resources available in the community* that are specific to the needs of the Black community and add them to your resource list so that you can share with your clients. For example:
 - a. Black Mental Wellness, Corp.: blackmentalwellness.com.
 - b. Therapy for Black Girls: therapyforblackgirls.com.
 - c. Therapy for Black Men: therapyforblackmen.org.
 - d. Muslim Wellness Foundation: muslimwellness.com.
 - e. Black Emotional and Mental Health Collective (BEAM): beam.community/tool-kits-education.
 - f. Glaad Communities of African Descent Resource Kit: glaad.org/publications/coadkit.
4. *Celebrate the now*—Are you aware of the current research and contributions of Black psychologists, healers, and wellness providers in your professional community? The legacy of Black history continues to blossom into the present. For example, Dr. Erlanger “Earl” Turner, Dr. Joy Harden Bradford, Dr. Thema Bryant-Davis, Dr. Patrice N. Douglas, Dr. Allen Lipscomb, and Dr. Sayida Peprah to name a few-- most of whom are local to Southern California, and have contributed significantly to the field and community.
5. *Be open to collaborating*--with faith communities, community leaders, and alternative healers and wellness providers. The history of the importance of the faith community for some Black people runs deep and continues today. Additionally, in some Black communities, alternative wellness practitioners are sought for healing mind, body, and soul—which aligns with beliefs and practices of an appreciation for nature, and a holistic and integrative self. Collaborating with these providers can provide a powerful opportunity to assist your clients in meeting identified goals.

Wherever you are on your journey of diversity awareness and cultural sensitivity, I invite you to reflect on this quote by Dr. Martin Luther King, Jr. “If you can't fly, then run. If you can't run, then walk, if you can't walk, then crawl. But by all means, keep moving. May we keep moving forward towards change, justice, wellness, healing.”

Dr. Janiel L. Henry can be reached at jhenery@womenrisepsychandwellness.com.

Poetry to Ponder

Inauguration Poet Amanda Gorman published this poem late last year. She has said, "One of the preparations that I do always, whenever I perform, is I say a mantra to myself, which is— I'm the daughter of black writers. We're descended from freedom fighters who broke through chains and changed the world. They call me." And that is the way in which I prepare myself for the duty that needs to get done." Perhaps it's a little late in the year for an auld lang syne poem, but it is always the right moment to think about a new beginning, and the struggle that must be faced.

New Day's Lyric

By Amanda Gorman
(1998 -)

May this be the day
We come together.
Mourning, we come to mend,
Withered, we come to weather,
Torn, we come to tend,
Battered, we come to better.
Tethered by this year of yearning,
We are learning
That though we weren't ready for this,
We have been readied by it.
We steadily vow that no matter
How we are weighed down,
We must always pave a way forward.

This hope is our door, our portal.
Even if we never get back to normal,
Someday we can venture beyond it,
To leave the known and take the first steps.
So let us not return to what was normal,
But reach toward what is next.

What was cursed, we will cure.
What was plagued, we will prove pure.
Where we tend to argue, we will try to agree,
Those fortunes we forswore, now the future we
foresee,
Where we weren't aware, we're now awake;

Those moments we missed
Are now these moments we make,
The moments we meet,
And our hearts, once altogether beaten,
Now all together beat.

Come, look up with kindness yet,
For even solace can be sourced from sorrow.
We remember, not just for the sake of yesterday,
But to take on tomorrow.

We heed this old spirit,
In a new day's lyric,
In our hearts, we hear it:
For auld lang syne, my dear,
For auld lang syne.
Be bold, sang Time this year,
Be bold, sang Time,
For when you honor yesterday,
Tomorrow ye will find.
Know what we've fought
Need not be forgot nor for none.
It defines us, binds us as one,
Come over, join this day just begun.
For wherever we come together,
We will forever overcome.

---Submitted by Catherine Fuller, PhD

Practicing with Personality

A Male-Friendly Approach to Couples Therapy

By Enrico Gnaulati, PhD



A beguiling finding in the heterosexual marriage counseling literature is that—whether the therapist is male or female—a *successful outcome relies heavily on the therapist and husband cementing a connection.*

That's because wives are about twice as likely as husbands to be dissatisfied with the relationship, I suspect. When the therapist and husband click, hope is revived for the wife that therapy might actually make a difference. Still, it may feel like pulling teeth to get male partners to agree to therapy in the first place. After all, as noted by one counseling psychologist: "the requirements of the male role appear antithetical to the requirements of a 'good client'"—e.g., keep your feelings inside; appear invulnerable; fix problems, don't just talk about them; get to the point and stay on point; resist getting too dependent. Yet, in most cases, if therapy is to get off the ground and stay in the air, engaging men is crucial.

The initial façade of resisting therapy often fades fast for men, because they tend to rely more on marriage for companionship and life satisfaction than women do, priming them to seize upon therapy to help preserve a marriage they've grown dependent on. The task becomes making therapy a male-friendly space. The couples therapy field is rife with models that emphasize skills many women already possess and many men don't. Accessing vulnerable emotions, or "chasing the pain," and deepening intimate connections—twin home run goals of most models—are more female-friendly than male-friendly.

Many psychologically healthy men experience "normative male alexithymia," which literally means, "no words for emotions." It's estimated that almost 17 percent of men embody this emotional style, approximately twice the rate of women. Typically, alexithymic people come across as aloof, drawing a blank when asked what they're feeling, are non-elaborative in their emotional responses (i.e., "How are you feeling? Fine."), somewhat out of touch with what others are feeling, overvalue logic, and appear disconnected from their own needs and desires. As noted, these challenges tend to be more emblematic of men than women.

The takeaway for therapists is this: when interacting with alexithymic-leaning male partners, patience and perseverance are necessary to draw them out emotionally. Also, more directiveness applies, offering emotion word choices, and suggesting expanded verbalizations (e.g., "I hear you say you're feeling blank, but I'm wondering if you're frustrated since you told me Clarissa forgot to pay the internet bill, and when

your service was cut off you had no way of conducting Zoom sessions with work colleagues?). Over the years, I've learned to settle into ambling disclosures on topics tangential to marital problems—e.g., the abundance of cobalt in the Democratic Republic of the Congo, how inflation drives up wages, China's maritime justification for building the Spratly Islands—as a prerequisite to gaining trust with many men, and allowing them ample space and time to communicatively unfold, to edge their way into their emotions.

Watchfulness over privileging feminine preferences in couples work is also important to keep men engaged. One area where this pertains relates to how men and women handle stress differently. When stressed, males are more likely than females to experience a fight-or-flight response. Their sympathetic nervous system and adrenal glands light up. In therapy discussions of unequal household chore arrangements, lack of sex, or who hogs the channel changer more, can result in men exploding or shrinking into themselves.

Emerging scholarship shows that when stressed, women are more likely to "tend-and-befriend," call their sister, or hang out with friends to discuss what ails them. In couples therapy, heated issues tend to elicit a need in most women to exhaust every discursive avenue to resolve issues. Women are more inclined to "talk then walk." When men are stressed, on the other hand, they are more inclined to "walk then talk." Insofar as therapists adopt the naturalness of a "tend-and-befriend" attitude, they may underestimate a male client's need to emotionally withdraw to get his bearings. To temporarily have some immediate silence, change the topic, have it be okay for the therapist and the wife to dialogue alone for a while, hit the bathroom for a toilet break to calm his nerves, or any other number of steps that allow for temporary face-saving, respectful withdrawal.

In ending, we need to remember that failing to treat a cisgender man (or transgender man, for that matter) who is comfortable with many of the social expectations associated with what it means to be traditionally masculine, veers away from practicing with multicultural competence. That entails a gender-sensitive approach where men are *treated from within* their masculine predispositions, guarding against biased attempts to superimpose onto them norms that come more naturally to the average cisgender woman (or transgendered woman). It involves meeting men where they're at, not shaming them, for displaying what seems to come most naturally as regards masculine identifications.

Dr. Enrico Gnaulati can be reached at egnaulatiphd@gmail.com.

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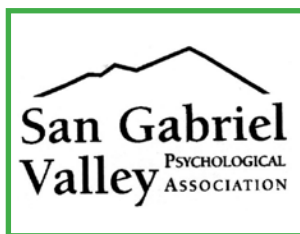
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