The View From Here: Perspectives on Northern and Rural Psychology

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Message From the Chair

CPA Convention 2009—Montreal

Although the number of section presentations was lower than the previous year, the 2009 CPA Convention in Montreal still provided members with opportunities to attend relevant educational sessions and connect with other rural and northern psychologists. I am hopeful that these opportunities will be even greater when Winnipeg hosts the CPA Convention in 2010.

Consistent with previous years, we did not reach quorum at our Annual General Meeting (AGM). The seven section members who attended the AGM did, however, bring up some excellent points for discussion. Some of the issues discussed included: strategies for improving section members’ participation at CPA Conventions (e.g., travel bursaries specifically for individuals residing in rural/northern communities, using technology to share information from the convention with members residing in rural/northern/remote areas, using technology to allow members from rural/northern/remote communities to participate in some convention activities, etc.), strategies for improving attendance at the AGM (e.g., provide information about who can attend and what to expect, offer refreshments, highlight the networking opportunities, etc.) membership dues, and recruitment/retention strategies in rural and northern communities (e.g., financial incentives similar to those in the United States). Dr. Jennifer Frain, CPA Board Representative, was also present for a portion of our AGM and requested any feedback the section had to the CPA Board. Thanks to everyone who was able to attend and provide their input. Always nice to meet members in-person!

The 2nd Annual North Star Student Award was also presented at the Annual General Meeting in Montreal to Judi Malone from Athabasca University for her theory review entitled Defining Rural Canadian Psychology. A summary of Judi’s presentation can be found in the current newsletter.

Executive Committee Update

I am pleased to announce that Laura Armstrong has agreed to take on the role of the Student Representation position. As you may recall from previous communications, Ms. Armstrong is a Ph.D. student in Clinical Psychology at the University of Ottawa and is in her 5th year of the program. Laura’s dissertation research explored rural and urban differences in youth mental health indicators and suicidality. She has also conducted program evaluations in elementary schools in Northern Ontario. As our Student Representative Ms. Armstrong will have full voting privileges and assume the following responsibilities:

a) Represent the interests of psychology students as they relate to the ongoing initiatives of the section.

b) Be an active participant in the section’s decision making process, paying particular attention to voicing the needs of the student members.

c) Write the student column in the section newsletter, liaison with the Student Section, and be actively involved in the coordination of the North Star Student Award.

Unfortunately we did not have any eligible section members express an interest in the Executive Committee vacancies. As such, Cindy Hardy and I will continue in our roles as Secretary/Treasurer and Chair, respectively. Our terms will officially end in June 2010. We will, once again, seek nominations as our terms near completion in 2010.
Message from the Chair (Cont’d)

Implementation of Membership Fees
As you may recall from previous communications, the section has decided to begin charging membership fees ($10.00 for full members, no charge for student members). These fees will be shown on your upcoming CPA renewal form. This topic has been discussed over the past couple of years and the decision to implement fees at this point was based on membership feedback provided at the AGM and through email communications. We are hopeful that this new source of revenue will allow us to embark on some new activities and offer some additional benefits to our members. I want to personally thank all of the section members that forwarded emails of support and I do hope that this will not discourage individuals from renewing their membership to our section.

Karen Dyck, Ph.D., C. Psych.
Rural and Northern Psychology Section Chair

February is Psychology Month
Submitted by Karen Dyck, Ph.D., C. Psych., Section Chair

Psychology Month is quickly approaching. If you’re like many psychologists (myself included) you may have the best of intentions of putting some type of activity together for Psychology Month but, before you know it, February has come and gone and other priorities have occupied your schedule. In order to prevent that from happening this year I’m encouraging all of our members to start planning for Psychology Month now! As Dr. Shelley Rhyno stated in her article from our last newsletter (May 2009, 4(1), p. 2) “This is a spectacular opportunity to not only promote the discipline as a whole but also to bring light and life to psychology as it is practiced in rural and northern settings.” I echo Shelley’s sentiments that Psychology Month can be used as “…..a platform for visibility in areas where services are scarce” and encourage all of our members to start thinking about how they can become involved in Psychology Month 2010. I am aware of psychologists who have given presentations (to the general public, professional groups, self-help groups, schools, colleges, universities, etc), written articles in local newspapers, participated in career fairs, been interviewed for television or radio shows, set up book displays in local libraries, and hosted local game shows with a psychology focus as part of their Psychology Month activities. I would encourage members to use the section listserv as a forum for brainstorming about possible Psychology Month activities and look forward to showcasing members’ activities in our next newsletter.

Let’s make this the year when Rural and Northern Psychology shines!

Update on the Professional Affairs Committee
Submitted by Judi Malone, Section Representative on the Professional Affairs Committee

Primary focus at this time is the proposal for CPA to develop a Professional Directorate. This initiative is currently at the council stage and is being explored to consider investing ongoing CPA staff and time to focus on:

- Advocacy
- Access

A Professional Directorate may mean more balanced representation of practitioners, researchers/academics, and clients within CPA. From a section perspective, many of our key concerns could be addressed by a potential Professional Directorate. If you are interested in this initiative, please contact Lorne Sexton, Chair of the Professional Affairs Committee, or Jennifer Frain who is leading the initiative to review the Practice Directorate. The other major considerations of the Professional Affairs Committee at this time is assessing the needs and concerns of all sections of CPA and reviewing the preliminary report of the CPA Prescriptive Authority taskforce.
Prescription Privilege Task Force Update

Submitted by Dr. JoAnn Elizabeth Leavey, R.N., Reg. Psychologist (limited register), Rural & Northern Psychology Section Representative, on behalf of the Task Force.

Report to CPA Board of Directors by Dr L Sexton (Chair)
November 2009:

Progress Report Circulated
In May of 2009 a RxP Task Force Progress Report was circulated to all constituent bodies: CPA Board of Directors, ACPRO, CPAP, CRHSSP, CPA Clinical Section, CPA Health Psychology Section, CPA Psychopharmacology Section, CPA Northern & Rural Section, CPA Student Section. It was also circulated to the Professional Affairs Committee. Not all bodies have formally responded, but all comments received to date were positive and consistent with the concepts discussed in the progress report.

Teleconference Meetings
The Task force has had 2 subsequent meetings:
September 2009: Interview with Dr LeVine, a prescribing psychologist and Director of the New Mexico State University RxP M.A. degree program (post-doctoral).
October 2009: Discussion of next steps.

Time Lines
The Task Force members are in agreement that the principles discussed in the Progress Report appears to be acceptable to most psychologists and that the Task Force is in a position to draft a final report. This should be available for preliminary circulation prior to the June 2010 Convention. It was agreed that the Chair of Professional Affairs (also Task Force Chair) use the Winter 2010 Psynopsis Column to introduce for all CPA members the general RxP evolutionary approach that the Task Force has agreed to.

Guest Speaker

Dr. Michael Kral was the Rural and Northern Section’s first invited speaker. His talk was titled "From a community's point of view: Indigenizing suicide prevention".
Ethics In The Rural Context

In this standing feature, Ethics in the Rural Context, we collectively share the story of professional ethics in rural practice through our own experiences. These demonstrate our challenges, rewards, & ethical dilemmas. The first piece began an exploration of boundaries. This second piece goes further to look at privacy and confidentiality in embedded environments.

Life & Practice in a Fishbowl
Submitted by Cindy Hardy and Judi Malone.

Have you ever owned a fish tank? A wondrous world held in a glass bowl on continual display. The fish have few places to hide and sometimes that world can get a little murky. Consider the following vignette as you reflect on your own lifestyle and rural practice.

You are a psychologist in a small town. While at the dentist office getting some work done, you overheard a conversation between two people. As the conversation goes on, you realize they are talking about a young therapy client of yours. They reveal very personal information regarding the young client's health; the information is new to you. You realize that if what is being said is true, your client has not been totally forthcoming with you regarding important details of her illness. The two people having the conversation also reveal private health information regarding themselves. When you get out of the dentist’s chair you realize that one of the people having the conversation is a client at your counseling office and also works with you at another location.

In rural practice non-professional contacts are commonplace because of the many roles people play in rural areas (Helbok et al., 2006; Schank & Skovholt, 2006). Enhanced social connectedness in rural areas may foster a “goldfish bowl phenomenon”. There is increased visibility coupled with expectations that community members will know more about each other (Barbopoulos & Clark, 2003; Harowski et al., 2006). In rural communities personal information is more readily available (and is often offered to psychologists) through common informal-sharing networks or gossip (Helbok, 2003). These networks are often part of the protective community fabric (APS, 2004; Schank & Skovholt, 2006).

In the CPA Code, confidentiality and privacy are central ethical standards (CPA, 2000). These can be difficult when the psychologist has less ability to control disclosure of personal information. Increased visibility in rural practice means that the rural psychologist may unintentionally have more information about a client than that client consented to release. Similarly, the psychologist may be less able to control confidential client information (such as attendance at a therapy session) because of visibility.

Charlebois (2006) found that distinctions needed to be made between confidentiality, anonymity, and privacy for rural clients. She suggests that only confidentiality can justifiably be offered to the client in a rural area.

Think about the earlier vignette. How would you handle the situation? Do you ever feel that you (or your clients) are living in a fishbowl – a beautiful protected world without as much privacy as you might like?

Current Dilemma – What Issues Arise for You?

I am looking for your ideas, stories, humour, & wisdom on ethics in professional psychological practice in rural Canada for this column. What ethical dilemmas do you experience? I will be editing Ethics in the Rural Context but we will be writing this column together. Give me your ideas or write a column! Judi Malone, R. Psych., judi@athabascau.ca, 780-645-8214

References

The First Time I Met My In-Laws Or:
Trying to Have a Private Life in Rural Community

Submitted by Doreen Coady Shadbolt, R. Psych

In 1984, as part of a “hen “ party as a friend got married, we all went to a “psychic” and had our palms read for fun. My reading made her hem and haw and she started talking about Orthodox churches and cold weather. I, in my fanciful imagination, started thinking about Zhivago-esque adventure in Moscow and little did I imagine that five years later I started my career as a Child Psychologist working for a government department in a northern rural prairie community. Kingdom of the perogy and combine, and the onion dome church, it was my first foray in what was to become my cross Canada cultural journey. As a girl from Nova Scotia, this flat landscape and -40 temperature might as well have been Siberia, and my ignorance was radiantly apparent as I imagined that every one in the community had electric cars only to be told by the tremendously amused mechanic that it was a device called a block heater…(What? Says the bluenoser? You have to plug in your car?) Those of you laughing now can imagine my chagrin. I grew to love the late nights in summer and the thunderstorms that you can see miles before it hits. We are all aware in graduate school of boundaries and appropriate professional distance from the client. Challenges like dual relationships are discussed in an academic and ethical manner. The reality of this can be different, humorous and part of what makes us learn and grow.

I eventually grew to love a person as well and it is with him that this tale commences. When it was time to “meet the parents”, we met at the most neutral and casual place in the community... we went to play cribbage at the Royal Canadian Legion on a Friday night. As I was on my best, “impress “ mode, I was exorbitantly polite (refrained from skunking) generously lady like (I’ll have a white wine please) and decidedly non competitive . It seemed the night was going smoothly and I was a hit. I began to relax.

Then SHE showed up. She being the incredibly intoxicated and rough around the edges mother of a client who spots me across the room and barges over like a tank. She plunks down in the chair at the next chair and starts with, “Let me tell you what that rotten little F**cker did today”. She is furious. I grew to love the late nights in summer and the thunderstorms that you can see miles before it hits. We are all aware in graduate school of boundaries and appropriate professional distance from the client. Challenges like dual relationships are discussed in an academic and ethical manner. The reality of this can be different, humorous and part of what makes us learn and grow.

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Then SHE showed up. She being the incredibly intoxicated and rough around the edges mother of a client who spots me across the room and barges over like a tank. She plunks down in the chair at the next chair and starts with, “Let me tell you what that rotten little F**cker did today”. She is furious. She is apoplectic. She is loud. She is full of profanity. She is hammered. She is determined and she is undeterable. I give my best “please call me on Monday at the office” several times to no avail and she progresses to tell all around that not only am I not helping, the whole thing and profession is useless. I am horrified, looking at this lovely church going older couple with whom I seek to align my future, and cannot think for the life of me of an escape. I try to think ethically, to identify the proper problem solving mechanism. The CPA ethics companion does not include being accosted by an intoxicated parent at the Legion when you’ve got fifteen two fifteen four and three are seven in your hand.

Thankfully, having exhausted the pyroclastic flow of her ire, she exits, leaving the ashes and scalded ego behind. The future in-laws were understanding and good will restored. But I was left by the experience somewhat overwhelmed as to proper procedure. The theoretical knowledge of boundaries and avoiding dual relationships is much different than is presented in graduate school, and how to manage is the key to professional success and indeed even survival while practicing in a rural community. How to extricate oneself from a difficult situation without damaging therapeutic rapport, or professional reputation, that is the question, with all due respect to Shakespeare.

So, to those of you who are just beginning your career in a rural community, I offer the following tips to cope with these “dual relationships” if your community has 10,000 people or fewer:

Do not go to any drinking establishment, especially one that has a dance floor and had “ladies night” with drinks or shots for 2$ or less. If you must have human interaction and contact, you must exit the facility prior to last call or the lights come on. This will avoid being propositioned by the parents of clients or depending on the drinking age of the province, your clients themselves. (E.g., If the drinking age of the province is 18, then your 16 year old clients may be at the same event). This includes, as it turns out, the Royal Canadian Legion.

Try to find other fish in the fishbowl… teachers, doctors, health professional, children’s Aid workers, for example. Amongst these you may find a kindred spirit with whom you may drink kindred spirits.

Dress well (but not too well) when leaving the house (always). Grocery shopping, hair appointments, taking the recycling to the depot. Being Canadian, be cautious however of dressing too well as we may be taken for “stuck up”.

When all else has failed, the following statements are suggested (tongue firmly planted in cheek):

“Excuse me, but this conversation’s inappropriate, I must insist that it terminate immediately.” (This must be accompanied by physical movement and may be followed by stalking or fisticuffs)

“Back off or I’m calling the f**ken Mounties” (This may be accompanied by frantic and frenetic appendage “waving”)
The First Time I Met My In-Laws Or: Trying to Have a Private Life in Rural Community (Cont’d)

“I’m sorry but your belligerent and blathering nonsense is upsetting my equilibrium, I must medicate and rest my chakras”

“Bartender, ease-play et gay id ray of the unk dray”

“I’m sorry but ethical considerations make this conversation extremely challenging and confidentiality nonexistent. Please feel free to call me at my office on >>>>>” (please note intoxication levels may render this statement impotent.)

Finally, the only option sometimes is to smile and nod until the conversation ends of its own accord and then repeat the invitation to call during office time. Some proponents of Dialectical Behaviour Therapy may say that being available at this time may be therapeutically beneficial. Others may say that this is an appropriate life skill teaching moment. Others advise to leave immediately. It is not often that easy however, to get the emotional octopi to release its grip, and the reality is that it can take a psychological toll, the ‘fish bowl existence.’ Privacy can be a precious gift and one needs to take into account the occasional joy of anonymity. Find a place and people with whom you can be yourself.

Incidentally, she never called on Monday.

North Star Student Award

The Rural and Northern Section awarded the North Star Award for outstanding contributions to the CPA conference program by student members of the section. We are pleased to present a summary of the award-winning paper in this issue of The View From Here. Normally there will be one award for a poster presentation and one award for an oral presentation. This year only the award for an oral presentation was awarded as no student members put their names forward for the poster presentation award.

Judi Malone accepts her North Star award from Karen Dyck, Section Chair, and Cindy Hardy, Section Secretary/Treasurer.
Defining Rural Canadian Psychology—Theory Review
Submitted by Judi Malone, R. Psych

Rural professional practice in psychology in Canada has distinct characteristics and occurs without an articulated definition. A proposed description of rural professional practice in psychology for Canada was constructed from the results of my doctoral research that considered the demographics of the participants, their reactions to defining rural, and what they considered to be common features of rural practice. To conceptualise this in an accessible way, I used a model similar to the one used by the Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV). This structure implies that key features or criteria co-occur and manifest in various ways. This allows for variation of criteria to meet the conditions of the definition (APA, 1994). The proposed definition, in the following table, was grounded primarily in participant information.

Proposed Definition of Rural Canadian Professional Practice in Psychology

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<th>Rural Canadian Professional Practice in Psychology</th>
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<tr>
<td>(professional practice of psychology in northern,</td>
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<td>rural, or remote locations of Canada)</td>
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<td>Conditions in (a), (b), and (c) must be present</td>
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<td>a) Professional practice of psychology in a community where at least two of the following are present:</td>
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<td>1. Size – The population of the community is less than 15,000 people. Communities of 15,000 to 40,000 people may be considered if they also meet the remoteness and resources criteria.</td>
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<td>2. Remoteness – the community is outside the commuting zone of an urban centre by at least 150 kilometres. Alternatively, community residents are required to access an urban centre for health services but there is no public transportation to that centre or travel can be hazardous during inclement weather.</td>
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<tr>
<td>3. Resources – The government of Canada considers the community to have insufficient access to health care, mental health services, or amenities for the service demand. Alternatively, Statistics Canada lists the community as one currently experiencing socioeconomic distress.</td>
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<tr>
<td>b) Professional practice is general and provided for a wide range of presenting problems as community needs do not support specialisation. This can be due to insufficient health care services, a small population base, or lack of suitable alternate community resources.</td>
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<tr>
<td>c) Adaptation of professional practice norms is often required to accommodate geographical barriers and resource limitations. These may include: telephone services, travel to provide services, or specific assessment and treatment modifications.</td>
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The first two criteria in the required subset (a) that define the
community size and remoteness were based on the analysis of the participant demographics. The third criteria in subset (a), resources, represents a common feature of rurality in the literature (Muula, 2007; Stamm et al., 2007; Vella-Brodrick et al., 2006; Zapf, 2001). Statistics Canada provides regional socioeconomic context ratings in publications such as their Rural and Small Town Canada Analysis Bulletin. An example is the article, “Mapping the Socioeconomic Diversity of Rural Canada” available in that publication (Alasia, 2004). The second requirement, (b), reflects the findings of this study and the assertion from the literature that generalist practice is considered to be the most unique requirement of rural practice (APS, 2004b; Harowski et al., 2006; Helbok, 2003; Sawyer et al., 2006). The final requirement, (c), reflects some of the adaptations that arose specifically from this study.

I am grateful that I received the North Star Award. My most heartfelt appreciation belongs to the rural psychologists who shared their time and private experiences. For more information, please contact me. Judi Malone, R. Psych., judim@athabascau.ca, 780-645-8214

References

Hello to all students!

Welcome to the new student column in the Rural and Northern Section Newsletter. The purpose of this column will be twofold. Firstly, it will address issues important to all students concerning self-care in graduate school. Secondly, it will provide a network for knowledge exchange among students and other researchers in the area of Rural and Northern Psychology.

**Self-Care**

Have you ever noticed a great stigma among students when it comes to talking about how to deal with stressors in our graduate programs? There seems to be a pervasive attitude, particularly among clinical psychology students, that we help other people, therefore we should be able to help ourselves. Graduate students also feel like we’re the only ones going through certain stressors and are ashamed to talk about these things amongst peers. These attitudes breed a code of silence and turn us into islands in our social circles. Finally, though, after a long time of hiding ourselves, someone breaks that silence and a group of students start to talk. Our feelings pour out and we learn that we’re not alone in our anxieties, our stressors, and in our ways of coping. Through sharing, it’s clear that some students have developed strategies which have helped them navigate successfully through challenges inherent in graduate school. Other students are still in the “I can fix this myself” camp, even though situations have become somewhat overwhelming for their personal resources. Another group of students have sought mental health services or help from others when they develop the insight to see that certain situations are too challenging to handle on one’s own. Regardless of which camp students fall into when it comes to managing stressors in graduate school, it helps to talk amongst peers.

The goal of this section of the student column is to be an anonymous forum for discussing positive coping strategies and asking questions from other students. It will be written “Dear Abby” style but you will be the advice-givers for other students. To give some initial topic suggestions, you could write in about: Challenges specific to rural and northern research, difficulties with performance anxiety in supervision, how to find a work/life balance, becoming parents while graduate students, being a different age than other students in the program, living away from home, applying for clinical psychology internship programs, finishing the thesis, financial difficulties, etc. You can either write about a situation and the strategies that you used to cope successfully or ask advice from other students for situations that are challenging for you. Again, all newsletter column postings related to self-care will remain anonymous. It’s time to break the silence and talk to one another. Please write me at: selfcare@starchart.ca.

**Student Research in Rural and Northern Psychology**

Have you ever been stuck when it comes to research issues such as how to measure “rurality”? What about reflecting on how similar research findings might differ across Canadian rural communities? Have you wondered how to connect with other rural and northern researchers carrying out studies in your area of interest?

The goal of this section of the student column is to connect students to other rural and northern researchers with similar interests. Please send a one-line “elevator version” of your research, area of research interest, or rural/northern research question, plus include your name and preferred email contact information to larms086@uottawa.ca.

Your information will be posted similar to the examples below so that other researchers may contact you:

Laura Armstrong, University of Ottawa, rural/urban youth suicide prevention and youth engagement research – larms086@uottawa.ca

Laura Armstrong, University of Ottawa, program evaluation of Lions Quest in Northern Ontario communities – larms086@uottawa.ca.

Have a good year. I look forward to hearing from you.
The Newsletter is produced by the Rural and Northern Section of the Canadian Psychological Association (CPA) and is distributed to members of the Section. The purpose of the Rural and Northern Section is to support and enhance the practice of rural and northern psychology. The goals of the section are: 1) Establish a network of professionals interested in the areas of rural and northern psychology (this may include individuals currently practicing in rural/northern areas of those with an interest in this area), 2) Enhance professional connectedness by facilitating linkages between rural and northern practitioners, 3) Distribute information relevant to the practice of rural and northern psychology, 4) Provide a forum to discuss practice issues unique to this specialty, and 5) Introduce students and new or interested psychologists to rural and northern practice. An application for membership in the Rural and Northern Section can be obtained from Dr. Karen Dyck, Section Chair, 200-237 Manitoba Ave., Selkirk MB, R1A 0Y4, dyckkg@ms.umanitoba.ca.

This issue of the Newsletter was edited by Karen Dyck and Cindy Hardy. Many thanks are extended to Crystal Rollings for her invaluable contributions to design and layout.

The opinions expressed in this newsletter are strictly those of the authors and do not necessarily reflect the opinions of the Canadian Psychological Association, its officers, directors, or employees.

All submissions are reproduced as submitted by the author(s).

Publications and Useful Links

Publications:


Web link: www.ccmhi.ca - Toolkit for Establishing Collaborative Initiatives Between Mental Health and Primacy Care Services for Rural and Isolated Populations

Call for Submissions

The Newsletter Editors invite submission of articles and items of general interest to rural and northern psychologists. Faculty and students are encouraged to send submissions for the next newsletter to Karen Dyck, dyckkg@ms.umanitoba.ca. We also welcome submissions of photos of rural life and settings.