

THE CANADIAN CLINICAL PSYCHOLOGIST

NEWSLETTER OF THE CLINICAL SECTION OF THE CANADIAN PSYCHOLOGICAL ASSOCIATION

MESSAGE FROM THE CHAIR

Martin Drapeau, Ph.D.

Traditionally, the Chair's message in the Spring issue of the Canadian Clinical Psychologist is devoted to promoting the next CPA convention, which, as most of you know, will be held at the Hyatt Regency Hotel in Vancouver on June 5-7, 2014. Keep in mind that early registration ends on May 5, **so now might be a good time to take a look at what both the CPA and the Clinical Section have in store for you** (visit www.cpa.ca/convention).

This year, however, I will break with tradition and tell you a bit about what we've done over the last few months. While I still have your attention, it might be best to start by telling you about our most recent survey. **If you haven't fill it out yet, please do so by clicking this link, which should be an active hyperlink in the newsletter:**

https://mcgilluecp.qualtrics.com/SE/?SID=SV_6ta08UaT9c7Z 6GF

This survey is extremely important. It includes questions that may lead to changes in how the Section operates. For example, we would like to know how you feel about our current use of the listserv and if you would agree with changes to how it is used; what information our website should make available to Section members; what our priorities might be in the future; how the newsletter could be improved; if you would be willing to share research data with students; and if there is information that we could provide about different initiatives that may be of interest to you.

PLEASE TAKE A FEW MINUTES TO FILL OUT THE SECTION SURVEY BY <u>CLICKING ON THIS LINK</u>.

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Chair Martin Drapeau, Ph.D. martin.drapeau@mcgill.ca

Past-Chair Margo C. Watt, Ph.D., R. Psych <u>mwatt@stfx.ca</u>

Chair-Elect Dr. Jennifer Garinger jennifer.garinger@albertahealthservices.ca

Secretary-Treasurer Dr. Sheryl Green sgreen@stjoes.ca

Member-At-Large Dr. Al Noor Mawani al-noor.mawani@albertahealthservices.ca

Student Representative Skye Fitzpatrick <u>skyler.fitzpatrick@psych.ryerson.ca</u> I also wish to tell you about some changes we have already made to how we as a Section operate. In the last issue of the Newsletter, I listed a number of concerns I had with how we do things. Chief amongst these was that much time -too much time- was devoted to secretarial work, which simply did not seem to be a good way to put to use the tremendous expertise of the people on the Executive Committee.

Following discussions with Karen Cohen and Lisa Votta-Bleeker, the CPA Head Office kindly agreed to provide the Section with administrative support. A taskforce was also put into place by CPA to determine how the functioning of the different Sections can be facilitated and how the THE SECTION THANKS DRS. KAREN COHEN AND LISA VOTTA-BLEEKER FOR THEIR GENEROUS SUPPORT.

CPA could potentially assist Sections in their day-today operations.

Over the last few months, we have been working with Josée Paliquin to transfer some Section duties over to her and to standardize some of our tasks. I had also contacted all past Chairs of the Section asking them to send me any Section-related documents they still had on their hard drive. Many kindly sent me documents, which we have been going over to create templates that could be used by members of the Executive in the future. This also allowed us to find documents that we thought had gone missing, and to update the website accordingly. It is my hope that this work will free up time for future members of the Executive Committee, who could then put their expertise to use to tackle more important issues.

Over the next few weeks, we plan to update the Section Handbook, to update our website, and to continue working on documents that could be easily passed on, via DropBox, to future members of the Executive. Needless to say that your answers to the survey will also inform us about other issues that we should be addressing. If you take a few minutes to answer the survey, I can assure you that we will take all the time needed to meet your needs as a Section member.

See you in Vancouver!

Martin Drapeau, Ph.D.

3rd Annual Section Newsletter Award



The CPA membership Committee is pleased to announce that the Section on Clinical Psychology is the winner of the 3rd Annual Section Newsletter Award! Congratulations to everyone who participated in the Fall Section on Clinical Psychology Newsletter. Your hard work and contributions have allowed the Section to win this title while receiving the sum of \$250 in prize money for the winning contributions.

Details on the award can be found online at www.cpa.ca/aboutcpa/cpasections/award

The CPA recognizes the efforts that sections put into creating and maintaining a newsletter. The newsletter serves as an important communication tool to help keep members informed and involved in the section and the CPA. In recognition of this effort, the CPA membership Committee gave an award for the best newsletter to the Section Clinical Psychology. The following criteria were used to determine the winner:

- information content
- knowledge translation
- engagement/interest
- design/creativity
- contributions from multiple individuals
- student content

All of the contributions for the 2013 Fall Newsletter made this achievement possible. Thank you to all of those who contributed and brought attention to the Section on Clinical Psychology.

You can view a PDF copy of the award-winning newsletter here.

Let your government know that access to a psychologist is important to you. Visit <u>www.mymh.ca</u>!



From the Editor's Desk

Greetings fellow Clinical Section Members,

Happy spring! After a long and snowy winter, we are very much looking forward to warm weather.

We are excited to announce that the Clinical Section has won the 3rd Annual CPA Section Newsletter Award! This award was developed in 2012 to recognize the efforts involved in creating and maintaining section newsletters. The newsletter is an important tool for us to maintain communication with our fellow members, keeping you informed and involved in between annual conventions. You may recall that we also won this award in its inaugural year. The strong success of our newsletter would be impossible without your contributions. We would like to express a heartfelt *thank you* to all those who have submitted informative, educational, and enlightening accounts of new and exciting clinical research and practice. We always look forward to receiving your submissions and reading about what's been going on in your psychology community.

With that said, this is a friendly reminder that we welcome any and all articles, opinions and ideas related to this newsletter. One particular goal of ours, as we mentioned in previous newsletters, is to profile psychologists employed in various capacities across the country (e.g., universities, hospitals, rehabilitation programs, correctional facilities, armed forces, business and industry, social-welfare agencies). We want to provide our readers, particularly students, with insight into the role of the psychologist within these various capacities. We welcome suggestions of people to profile and, of course, written submissions. You can find our complete contact information on the Clinical Section Executive webpage and in the newsletter – feel free to contact us with any questions or comments.

Are you planning to attend the 75th annual CPA convention in Vancouver? The convention runs from June 5th to June 7th and the Clinical Section has a range of exciting presentations. We hope to see many of you there!

Enjoy your newsletter and best wishes for the season ahead,

Elizabeth & Andrea



Elizabeth Levin



Andrea Woznica



MANITOBA PSYCHOLOGICAL SOCIETY SOCIETE DES PSYCHOLOGUES DU MANITOBA

P.O. Box 151 RPO Corydon Winnipeg, Manitoba R3M 3S7

Phone: (204) 488-7398 Fax: (204) 478-4900 Website: www.mps.ca

The Manitoba Psychological Society (MPS) Brings Psychology to the Public during Psychology Month

During Psychology Month, the MPS Public Education Committee organized a variety of public events and media interviews in addition to promoting the Mind Your Mental Health Campaign. As we have come to expect from our dedicated MPS members and other psychology colleagues, there was an excellent showing of Psychology Month events this February. Here's how it all shaped up:

- 12 Talks open to the general public
- 9 Media interviews (CJOB radio, CBC Radio, City TV, Global TV, and CTV)
- 4 Talks for specific invited audiences
- 100 Psychology Month Posters distributed
- 500 Psychology Month Pamphlets distributed to a variety of locations
- 500+ "Mind Your Mental Health" Post-it Notes handed out to attendees at events
- 500+ people learned about the "Mind Your Mental Health" campaign and were encouraged to go to the MYMH website

Over 500 members of the public attended Psychology Month talks in Manitoba this February and countless others learned about psychologically relevant topics through interviews with psychologists on radio and television. Members of the public were treated to a wide array of topics ranging from how to improve your child's sleep habits to how to "psych up" your social life. Here is just a small sampling of titles from a variety of public talks and media interviews:

- Coping with Valentine's Day Pressures . . . Whether You're Single or Part of a Couple
- How Your Mind Affects Your Heart and What You can Do About it
- Divorce: More than Surviving it . . . Thriving!
- Kids and Money: Raising Financially Competent Children
- Baby Talk: How, When, and What Your Baby Learns about Language
- Memory and Aging: What's Normal? What's Not?

Special thanks to the members of the Psychology Month planning committee and all MPS members who helped make Psychology Month 2014 such a success.

Pamela Holens, Ph.D., C. Psych. pholens@deerlodge.mb.ca MPS Public Education Director



The 75th annual CPA convention runs from June 5th to June 7th and the Clinical Section has a range of exciting presentations with special guest speakers. Visit the <u>website</u> for more information. We hope to see many of you there!

Enhancing Psychological Resiliency in Older Men Facing Retirement with Meaning-Centered Men's Groups

By Dr. Marnin J. Heisel and the Meaning-Centered Men's Group project team*

There is a clear and pressing need for suicide prevention initiatives targeting older men. Older adults have high suicide rates, engage in violent means of self-injury with a high intent to die, and are more likely than younger adults to succumb to those injuries (Canadian Coalition for Seniors' Mental Health, 2006). Men account for over 80% of the nearly 9,400 North Americans over 60 who die by suicide every year (Statistics Canada, 2014; WISQARS database; Centers for Disease Control and Prevention [CDC]). Few intervention studies have investigated suicide risk reduction among older adults to date (Links, Heisel, & Quastel, 2005), and nearly none has aimed explicitly to reduce risk among older men (Lapierre et al., 2011). This issue poses a substantial challenge to existing healthcare resources given older adults' high healthcare utilization (Canadian Institute for Health Information, 2011), the aging of the baby-boomers, a vast birth cohort with a high suicide rate (Mościcki, 1996), and the projected population growth of older North Americans (Statistics Canada, 2010; United States Census Bureau, 2003). Inefficiencies in mental healthcare systems, a reticence among many men to seek mental healthcare, a dearth of provider expertise in suicide prevention, and a paucity of outreach initiatives and proven interventions to reduce suicide risk further contribute to this problem, necessitating effective, feasible, and sustainable interventions (Heisel & Duberstein, 2005).

The "gender paradox of suicide" acknowledges that women more frequently engage in suicidal behavior and yet men more frequently die by suicide, suggesting a need to enhance men's capacities for coping with loss, adaptiveness, help-seeking, and nurturing of supportive relationships (Canetto & Lester, 1998). Men's suicide rates increase at retirement age and escalate throughout their later years (CDC; Statistics Canada, 2014); retirement may thus be both a key life transition that can trigger increasing suicide risk and a critical period for effective intervention. The association between retirement and health is complex. Many men who look forward to retirement enjoy health, leisure, and satisfaction in their post-employment years; yet, retirement can also unearth or exacerbate health and mental health problems (Butterworth et al., 2006; Gill et al., 2006; Karpansalo et al., 2005; Pinquart & Schindler, 2007; Westerlund et al., 2009). Men tend to have greater difficulty than women in cultivating interests and relationships outside of work, potentially increasing their vulnerability to the psychosocial ramifications of retirement, including marital conflict, loneliness, depression, and substance misuse (Perreira & Sloan, 2002; Weingarten, 1988). Those who define themselves primarily by their work roles or successes may struggle with retirement, especially if it is too early for them, involuntary, or if they have not planned realistically for meaningful post-retirement pursuits, social relations, or longterm financial needs (Nordenmark & Stattin, 2009; Schellenberg & Silver, 2004). Early retirement may be reciprocally associated with an increased likelihood of physical and mental health problems. Being laid off, unemployed, or feeling pushed into retirement can also increase men's risk for depression and suicide ideation (Brand, Levy, & Gallo, 2008; Yen et al., 2005). Empirical findings indicate risk for post-retirement morbidity and mortality, including by suicide, and suggest potential benefit in preventive interventions for vulnerable men facing retirement (Bamia, Trichopoulou, & Trichopoulos, 2008; Brockman, Müller, & Helmert, 2009; Qin, Agerbo, & Mortensen, 2003; Schneider et al., 2011). Yet, the intervention literature is nearly silent on this issue.

We recently received project funding from Movember Canada, an organization dedicated to raising awareness of men's health problems and raising funds to support men's health research, to evaluate Meaning-Centered Men's Groups for men facing retirement. Eligible participants for this community-outreach intervention study will include soon-to-be- or newly-retired men over 60 who may be vulnerable to the onset of depression and suicide risk by virtue of low perceived Meaning in Life (MIL), a psychological resiliency factor we have shown to be protective against the presence, intensity, onset, and exacerbation of suicide ideation (Heisel, 2009; Heisel & Flett, 2006, 2008, in press).

Middle-age and older men do not typically seek mental healthcare when depressed or suicidal, creating barriers to life-sustaining care (DeLeo, 2002). Creative outreach approaches are needed to engage vulnerable men in interventions that are empowering, respectful, and delivered in a format that they find acceptable. Existential interventions may be especially relevant for older

adults facing important life transitions such as retirement, due to the increasing tendency for self-reflection, increasing capacity for spirituality, and greater perception of MIL with age (Guttmann, 2008; Hicks, Trent, Davis, & King, 2012). Research findings have indicated positive associations between MIL and adaptive health-related variables among older adults, and negative associations between MIL and depression, hopelessness, and suicide ideation (Braam, Bramsen, van Tilburg, van der Ploeg, & Deeg, 2006; Heisel, 2009; Heisel & Flett, 2006, 2008, in press; Krause, 2009; Krause & Shaw, 2003).

Our group intervention is consistent with Frankl's meaning-centered psychotherapy (Frankl, 1971, 1985, 1988), an approach ideally suited to helping enhance resiliency to suicide risk in the context of loss, transition, and suffering. Breitbart and colleagues (2010) found that their Meaning-Centered Group Psychotherapy significantly enhanced MIL and reduced the wish to hasten death in terminally ill older adults, and proved more efficacious than supportive group therapy. Encouraging men facing retirement to seek and enhance MIL in their activities, relationships, attitudes, and beliefs may similarly enhance well-being and reduce risk for negative health outcomes, including depression, hopelessness, and suicide ideation.

This iterative, three-year, multi-stage preventive intervention study will initially involve the implementation, refinement, and evaluation of Meaning-Centered Men's Groups in London, Ontario, Canada, and will be followed by the delivery of one group each in Alberta and British Columbia. Knowledge translation will involve training group facilitators to deliver Meaning-Centered Men's Groups in sites outside Ontario, delivering training workshops to providers working with men facing retirement, and dissemination of study updates.

This project responds to a critical need to translate research findings on healthy aging into innovative interventions for potentially vulnerable groups. Our objective is to evaluate whether Meaning-Centered Men's Groups are cost-effective, tolerable, acceptable, and effective at enhancing MIL, mental health and well-being, and mitigating the onset or exacerbation of depression and suicide ideation. Findings are expected to have relevance for program and policy development regarding outreach interventions for community-residing older adults, and may have commercial applications in terms of enhancing health and well-being among older workers and forming the basis for interventions to enhance employee post-retirement health and well-being. Future applications of this intervention could include adaptations for men with chronic health conditions, heightened risk for suicide, web-based groups for socially- or geographically-isolated men, and may include groups for women struggling in the face of retirement or other transitions.

This article has been edited for length by the Clinical Section newsletter editors. References are available from the author upon request.

Authors

Dr. Marnin J. Heisel, Ph.D., C.Psych. (Study Principal Investigator) is a Clinical Psychologist, Director of Research (Psychiatry) and Associate Professor in the Departments of Psychiatry and of Epidemiology & Biostatistics in the Schulich School of Medicine and Dentistry at The University of Western Ontario and a Scientist with the Lawson Health Research Institute in London, Ontario, Canada, and an adjunct faculty member with the Center for the Study and Prevention of Suicide at the University of Rochester Medical Center in Rochester, N.Y.

* The Meaning-Centered Men's Group Project Team additionally includes: Co-Investigators: Gordon L. Flett, Ph.D., Paul S. Links, M.D., FRCP(C), Ross M.G. Norman, Ph.D., C.Psych., Sisira Sarma, Ph.D., Sharon L. Moore, Ph.D., R.N., R.Psych., Norm O'Rourke, Ph.D., R.Psych., and Rahel Eynan, Ph.D.; Collaborators: Kim Wilson, M.S.W., Ph.D. Candidate (University of Guelph), and Paul Fairlie, Ph.D. (York University); Community Partners: Third Age Outreach-St. Joseph's Health Care, London (Beverly Farrell, R/TRO & Kristan Harris, OT Reg. (Ont.) MHSc CHE), Kiwanis and Hamilton Road Seniors and Community Centre City of London (Michelle Kerr), and the Canadian Coalition for Seniors' Mental Health (Bonnie Schroeder, M.S.W., R.S.W.).

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Psychology Month in Alberta

By Crystal Hare and Dr. Mawani Al-Noor

February was celebrated by psychologists across the country as Psychology month. This dedicated month serves as an opportunity to generate awareness for the role of psychology in our everyday lives and within our communities. During the month of February members within the profession of psychology are encouraged to reach out to their communities and show people the value and many applications of their work. Psychology month is also an opportunity for peers within the field of psychology to organize and participate in activities that promote the discipline. In honour of Psychology Month, Psychologists in Calgary within Alberta Health Services participated in a number of events to promote the important and integral role that psychology plays as a part of health and wellness within our community.

In an effort to reach out to the community, a booth displaying materials from the Psychologists' Association of Alberta (PAA) was displayed in the main atrium of the Sheldon Chumir Health Centre; the Alberta Children's Hospital; the Richmond Road Diagnostic and Treatment Centre; the South Health Campus; and the Foothills Medical Centre, over the course of the month of February.

The PAA display booth included pamphlets containing information on a variety of mental health concerns commonly experienced by people in the community, such as insomnia, depression, and anxiety, and where individuals can seek treatment. Psychologists and psychology volunteers (such as myself) contributed their time to distribute information to individuals, families, and other multidisciplinary staff, and to answer questions related to the profession of psychology and the services they provide. As just one example from the Foothills Medical Centre, which hosted the Psychology Month display over the first week of February, there was significant interest and positive feedback from patients, visitors and staff within the hospital. Many people approached the booth to share a story of how psychological services had positively impacted their own life, or that of a friend or family member. A number of individuals also used the booth as an opportunity to seek information on how to gain access to specific psychological services. The Psychology Month booth was a great way to bring information regarding psychology to the community and inform and respond to questions regarding ways in which psychologists can provide assistance.

Psychologists in conjunction with Alberta Health Services also organized a Case Presentation and Research Day on February 7th, at the Alberta Children's Hospital, for all mental health and allied health staff. The presentations focused on mental illness and cognitive disorders, and the psychological strategies used to treat them. These presentations allowed practitioners from many areas within the field of psychology to share their ideas and inspiration with their peers and colleagues, and to share new methods and strategies, as applied to mental health. Topics included presentations focusing on therapeutic strategies, including presentations on the basic principles of acceptance and commitment therapy, and the use of cognitive behavioural therapy (CBT) for depressive and anxiety disorders and comorbid substance use disorders. Another group of presentations focused on guidelines for diagnosis and treatment of rare and often misdiagnosed psychological disorders. The event provided an opportunity for discussions and collaborations between professionals from multiple areas within the mental health community. The event also allowed health care providers from all areas of mental health, from clinical psychologists, to Ph.D. students, to occupational therapists and nurses, as well as volunteers, an invaluable opportunity to share ideas and expertise across settings.

A full list of topics presented is below:

Psychological aspects of weight Management (Jo Telfer, Ph.D.)

Mad, bad, and/or dangerous? Mental health and the criminal courts (Nancy Remington, Ph.D.)

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Empirically-supported treatments and their complicated, really not all that straightforward relationship to "best practices": A guide for clinicians and administrators (Terence Singh, Ph.D.)

CBT Basics: A Group Treatment for Depressive and Anxiety Disorders (Barb Backs-Dermott, Ph.D., Kerry Mothersill, Ph.D., & Sophie Macrodimitris, Ph.D.)

Seeing the forest for the trees: Principles of testing interpretation to reduce the misdiagnosis of cognitive deficits (Brian Brooks, Ph.D.)

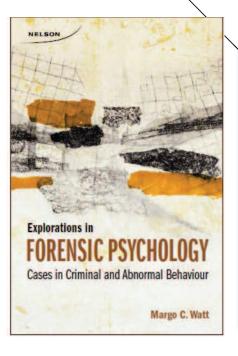
Factitious disorder in adolescents: How do we better identify and work with these patients? (Kathleen Schwartzenberger Ph.D., Tyson Sawchuk, M.Sc., & Brae Anne McArthur, M.A.)

Acceptance and commitment therapy: An introduction to basic principles (Al-Noor Mawani, Ph.D.)

CBT for Patients with Concurrent Substance Use Disorders (SUDs) and Depressive/Anxiety Disorders (Dr. Kasia Galperyn)

In addition to the in-person activities, psychology month made good use of web-based information sharing, with Dr. Stewart Longman presenting, "Concussion and the Clinician: Expertise for the Generalist" on Practice Wise, via an AHS Webinar, on February 6, 2014.

Since Psychology Month was first launched in February of 2005, psychologists across Canada have successfully increased awareness of psychology within the surrounding communities, creating greater support for research, education and training, as well as access to psychological services for all people. Thanks to everyone who helped to make Psychology Month a success.



Explorations In Forensic Psychology by Margo C. Watt

Nelson College Indigenous | February 14, 2014 | Trade Paperback

In creating this collection of cases at the intersection of psychology and law, author Margo C. Watt looked for diverse cases that had a particularly unusual element; cases that truly begged the question: What kind of a person does such a thing? The result is a casebook that offers intriguing and tantalizing answers to this question supported by evidence-based analysis. It is a welcome and informative addition to the library of anyone interested in the abnormal and criminal actions that may leave us scratching our heads about the nature of human behaviour. At the very least, readers will gain a better sense of how clinical forensic psychologists try to figure out why people do the things they do.

Informed Choices About Treatments For Depression

John R. Walker, Ph.D., C. Psych., on behalf of the Mobilizing Minds Research group.

See www.depression.informedchoices.ca for more information

Major depression is one of the most common mental health problems in the community. About one in six Canadians will have an episode of depression during their lifetime. The first episode of depression is often seen in the late teen or early adult years and the highest prevalence of depression is seen during the young adult years. Many people with depression do not seek help or delay the decision to seek help. One factor here is a lack of information about effective treatments.

A key challenge is that we have not had good information about what people want to know about treatment choices. The Mobilizing Minds Research Group has gathered information from young adults about their information needs and preferences – using individual interviews, focus groups, and surveys. We found that young adults had many questions about treatments for depression and some misconceptions about treatment choices that could serve as barriers to seeking help. Recently our surveys have found that adults across the age range have similar information needs and preferences.

Our team also studied information for the public available on the Web to see how well the public's questions are addressed. We found that while existing websites provide good descriptive information about depression and about some of the treatments available they did not answer many questions about depression. In response to this problem, we developed evidence-based information in plain, easy-to-understand language to answer the questions the public identified as being most important. The content was developed by specialists in mental health and vetted by a wide range of health professionals. It has been evaluated by young adults in the community, including young adults with personal experience in dealing with depression. Content is available in both English and French.

This information is now freely available to the public through our website and Factsheets (PDFs) about all topics. These Factsheets may be downloaded, printed and distributed by professionals, or posted on organization/program websites free of charge.

The website also includes the Mind Pack, an interactive tool that provides self-help, a self-assessment questionnaire, and text and videos about the process and benefits of speaking with a counsellor – all in the voices of Canadian young adults who've been there.

The information answers questions including:

- What happens to depression with no treatment?

- What are the treatment options and how effective are they including psychological (counselling) or medication treatments, exercise, self-help programs, herbal medicines, light therapy, diet supplements, meditation.

- Who provides treatment? What is the cost?

- How long does treatment continue?
- What happens when treatment stops?
- How to manage the cost of treatment?
- How to find help for yourself, a family member, or a friend?

Clients look to psychologists for information concerning treatment choices. This information may also help you to provide high quality resources to patients when they are considering changes in treatment such as stopping medication or trying an alternative treatment.

For more information, please visit the website (downloadable Fact Sheets are in the resources section). For information about hosting the factsheets on your website contact: Emma Firsten Kaufman, MPH, Project Coordinator, Mobilizing Minds: Pathways to Young Adult Mental Health, <u>efirsten@yorku.ca</u> or John Walker, Ph.D at john.walker@umanitoba.ca.

Section on Clinical Psychology La Section de la psychologie clinique

For the summary of the 2014 March Executive Meeting Minutes, see the webpage below:

http://www.cpa.ca/aboutcpa/cpasections/clinicalpsychology/clinicalsectionbusiness/

http://www.cpa.ca/docs/file/Sections/Clinical%20section/2014/exec decisions mar2014.pdf

Student Section

Message from the Student Representative

Skye Fitzpatrick

Greetings Clinical Section members!

I hope that your transition from winter to spring has been pleasant and productive! Wherever you are in the country, what better way to anticipate the increasingly warmer weather than planning a trip to lovely Vancouver, BC!

The 75th Annual CPA convention in lovely Vancouver, BC is coming fast, and the clinical section has a number of interesting workshops, symposia, and poster sessions planned! We look forward to a high turnout at these exciting events.

For the fifth year in a row, we will be holding our annual Clinical Section student symposium at the convention. This year, the symposium is entitled "New Technologies in Psychological Treatments: A Focus on Graduate Student Contributions to the Literature". Dr. Heather Hadjistravropoulos of the University of Regina will be acting as the discussant. We received a particularly high number of exceptional submissions this year and selecting four presentations was no easy feat. However, I am confident that this year's symposium will be one to remember, as it will focus on technological tools and interventions for a variety of populations such as parents in addition to individuals with anxiety disorders, postpartum depression, and borderline personality disorder. I am looking forward to a strong turnout at this symposium, and invite you to come and learn about new technologies in mental health!

As per usual, the competition for the Clinical Section Educational Activity Student Grant was very high. As with the symposium, selecting winners among such an impressive pool of applications was a challenging task. We are excited to announce that we had two winners this year: Lyndsay Crump from the University of New Brunswick was awarded for her submission titled "Evidence-Based Assessment", and Amy Burns from the University of British Columbia was awarded her submission titled "Psychological Treatment of Addiction and Concurrent Disorders". Both Ms. Crump and Ms. Burns plan to put on one-day workshops led by experts in evidence-based assessment and psychological treatment of addiction and concurrent disorders, respectively. Look out for summaries of these workshops in the next edition of the newsletter!

Don't forget to apply for our Ken Bowers and Best Student Conference Presentation Awards, due May 1st and 15th, respectively. Please feel free to contact me with any questions, comments, or concerns regarding the Clinical Section.

See you in Vancouver!

Skye Fitzpatrick, M.A.

KEN BOWERS STUDENT RESEARCH AWARD

The Ken Bowers Student Research Award was established to honour the enormous contributions of Dr. Ken Bowers (1937-1996) to the field of clinical psychology. Dr. Bowers is widely considered to have been one of the world's preeminent hypnosis researchers. In addition, he is renowned for his contributions to our understanding of personality, revolutionizing the trait-situation debate through his assertion of a situation-by-person interactional model. One of Dr. Bowers' last works was a highly influential paper on memory and repression that appeared in a 1996 volume of *Psychological Bulletin*. Dr. Bowers saw the philosophical foundations of inquiry as the common basis for both research and clinical practice. He was a consummate scientist-practitioner who devoted his career to the Department of Psychology at the University of Waterloo. The memory of his intellectual rigor and scholarship continues to shape UW's clinical training program.

The Ken Bowers Student Research Award is given by the Clinical Section to the student with the most meritorious submission to the Clinical Section of the CPA annual convention. All students whose presentations have been accepted within the Clinical Section program are invited to apply. The winning submission is recognized with a certificate and \$1000, and the student is invited to describe her/his work in the fall edition of the Clinical Section newsletter, *The Canadian Clinical Psychologist*.

To be eligible you must:

1. be a student who is first author of a presentation that has been accepted in the Clinical Section at the CPA annual convention in Vancouver, June 2014.

2. submit an APA-formatted manuscript describing your research*

3. be prepared to attend the Clinical Section business meeting at the Montreal convention, where the award will be presented

*The manuscript must include a title page and abstract page, and must be no more than 10 pages, double-spaced with 2cm margins and 12-point font. Figures, tables and references are not included in the page count. Manuscripts that do not conform to these criteria will not be reviewed. The deadline for submission of applications is **May 1, 2014**. Submissions in either English or French should be sent by e-mail to Dr. Jennifer Garinger (Jennifer.Garinger@albertahealthservices.ca). If you have any questions about the submission process, please contact Dr. Garinger by e-mail.

**If you are a CPA member but not a Clinical Section member contact <u>membership@cpa.ca</u> or 1-888-472-0657; if you are not a CPA member go to <u>http://www.cpa.ca/clinical/membership/index.html</u> and be sure to indicate Clinical Section membership on your invoice.

Students can apply for both the Ken Bowers and the Student Travel Award, but can only win one of these awards per year.

Best Student Conference Presentation Award

The **Best Student Conference Presentation Awards** are designed to recognize and support high quality student research. These awards are also designed to encourage communication between Clinical Section students and to promote the development of reviewing skills.

There are three awards: First prize, worth \$200, is given to the highest-ranking submission overall. There are two runnersup, awarded to the next two highest-ranking submissions, each worth \$100.

These awards are adjudicated through a peer-review process. Students who apply will be expected to evaluate 2-3 posters/presentations over the course of the convention. Students will receive a list of posters/presentations to evaluate and the reviewing form at least 1 week before the conference. Students will be required to submit their evaluations within 1 week after the conference.

To be eligible, students must be:

- First author on a poster or oral presentation accepted by the Clinical Section for the annual convention of CPA. The poster or oral presentation must present the results of an empirical study. Presentation of literature reviews and conversation sessions are not eligible.
- A student member of the Clinical Section at the time of submission, and must, therefore, also be a student member of CPA.
- A Canadian citizen or attending a Canadian university.

To apply, please submit the application form

(http://www.cpa.ca/aboutcpa/cpasections/clinicalpsychology/clinicalsectionnewsandevents/) and a copy of your accepted abstract via e-mail to the student representative of the Clinical Section, Skye Fitzpatrick (skyler.fitzpatrick@psych.ryerson.ca) before **May 15th, 201**4.

Please note: Any students that fail to either complete and/or submit all of their assigned evaluations will **NOT** be eligible for the award.

Readers, what would you like to see in the clinical Section Newsletter?

We'd love to hear from you!

Email Dr. Levin at elevin@laurentian.ca or

Andrea Woznica at awoznica@psych.ryerson.ca