

# Progress Notes.



Spring/Summer 2017

Newsletter of the Lesbian and Gay Psychotherapy Association, Southern CA, Inc.    LAGPA@sbcglobal.net

## CALENDAR OF EVENTS

(Workshops in Red) (Socials in Green)

- |           |   |
|-----------|---|
| June 4    | <i>Law and Ethics for Clinicians with LGBT Focus Workshop</i> by Dr. Larry Hedges — Free event for members with free meals. 6 CE credits available for small fee. |
| June 25   | Cousin Kate music concert at the co-president, Mary Guillermin's SunMoon Retreat Center, as a fund raiser for LAGPA. By donation.                                 |
| July 6-16 | Outfest (watch for details)   |
| July 16   | <i>Insurance Friendly Therapy Workshop</i> — Free event with free lunch. 2 CE credits available for small fee.  |
| Aug 13    | Annual Summer Pool Party — Largest social event of the year co-hosted with SCLMA and LGBT Bar with almost 200 people in attendance.                               |
| Sept 17   | <i>Psychotherapy and Supervision with LGBT Focus Workshop</i> by Dr. Larry Hedges — Free event for members with free meals. 6 CE credits available for small fee. |
| Oct 14    | 25 <sup>th</sup> Anniversary Reception at Liliane's   |
| Oct 21    | LACPA Conference booth (all are welcome to staff our booth)   |
| Oct 29    | Models of Pride Booth (all are welcome to staff our booth)  |
| Nov. 12   | 22nd Annual LGBTQI Conference co-hosted by Mount Saint Mary's University  |
| Dec (TBD) | Winter Social (watch for details)   |

**LAGPA 1992 — 2017**



**Commitment to the  
LGBTQ+ Community**

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# Busy Year Ahead

Two-Thousand Seventeen is an important milestone for LAGPA. It was in 1992 a group of visionaries got together and formed LAGPA. Twenty-five years and still going strong. Hooray!

One of the major activities LAGPA conducts is its annual LGBTQI psychotherapy conference. This year represents the twenty-second time we have mounted the event. And last year was the largest ever with almost 150 people

in attendance. Almost a decade ago it was decided to move the conference around to the different schools of psychology. By doing so the existence of LAGPA is better known to students and faculty at each of the schools. Also, by hosting the event often the school then considers creating their own LGBT specialization. It becomes a win-win situation for the school and for LAGPA. We used to hold the event at hotels but now we have held the event multiple times at Antioch University, Phillips Graduate University, and at USC and the Center. This year, for the first time, we are collaborating with Mount Saint Mary's University at the campus located across from USC. We are very excited to be at the new location. It is a very park-like setting with forests of trees. Watch for details. The "Call for Papers" is contained in this newsletter.

Please review our calendar. We have one or more events scheduled for most months. The social events include free movie nights where some relevant film is shown at my apartment on my 8'x6' video screen. We just watched "Moonlight." About nine people attended which is almost full capacity in my apartment. Our next movie night will be lesbian-themed with "Raising the Moon" and the comedy "But I'm a Cheerleader." Hope to see you there. Of course, our summer social is a big hit with about 200 people in for a pool party at the lovely house of Liliane in Beverly Hills. I've been successful at getting all the alcohol donated for the event saving us over \$4,000 for top-shelf brands.

We are planning on hosting a reception sometime in October to celebrate 25-years of LAGPA. Details have not been worked out but we hope many of our past board members can attend.

Of course, one of our major functions has been to conduct educational workshops that offer continuing education credits. We have already conducted a workshop on PrEP/PEP with a distinguished board of presenters and about 25 people in attendance. Gilead sponsored the free lunch and Twin Town Treatment provided the venue. Upcoming will be two workshops conducted by the renowned lecturer Dr. Lawrence Hedges that provide important information tailored to LGBT concerns. This is a first and LAGPA is the first to make the offer to our members. Later will be a workshop on the issue of accepting insurance in your practice. We are concerned that LAGPA members need to accept insurance if they intend to make a living as a therapist. There are many more events coming up.

To change the subject, as many of you are aware I also work for ABC-CLIO, Praeger, Greenwood, and SAGE publishers as an editor and writer. I recently completed the manuscript on "LGBT Americans at Risk" for Praeger. It is a 333,000 three-volume reference with about 45 essays. I wrote an essay on the terrible massacre at Pulse gay nightclub in Orlando last June (gads, it's been a year already) and how the

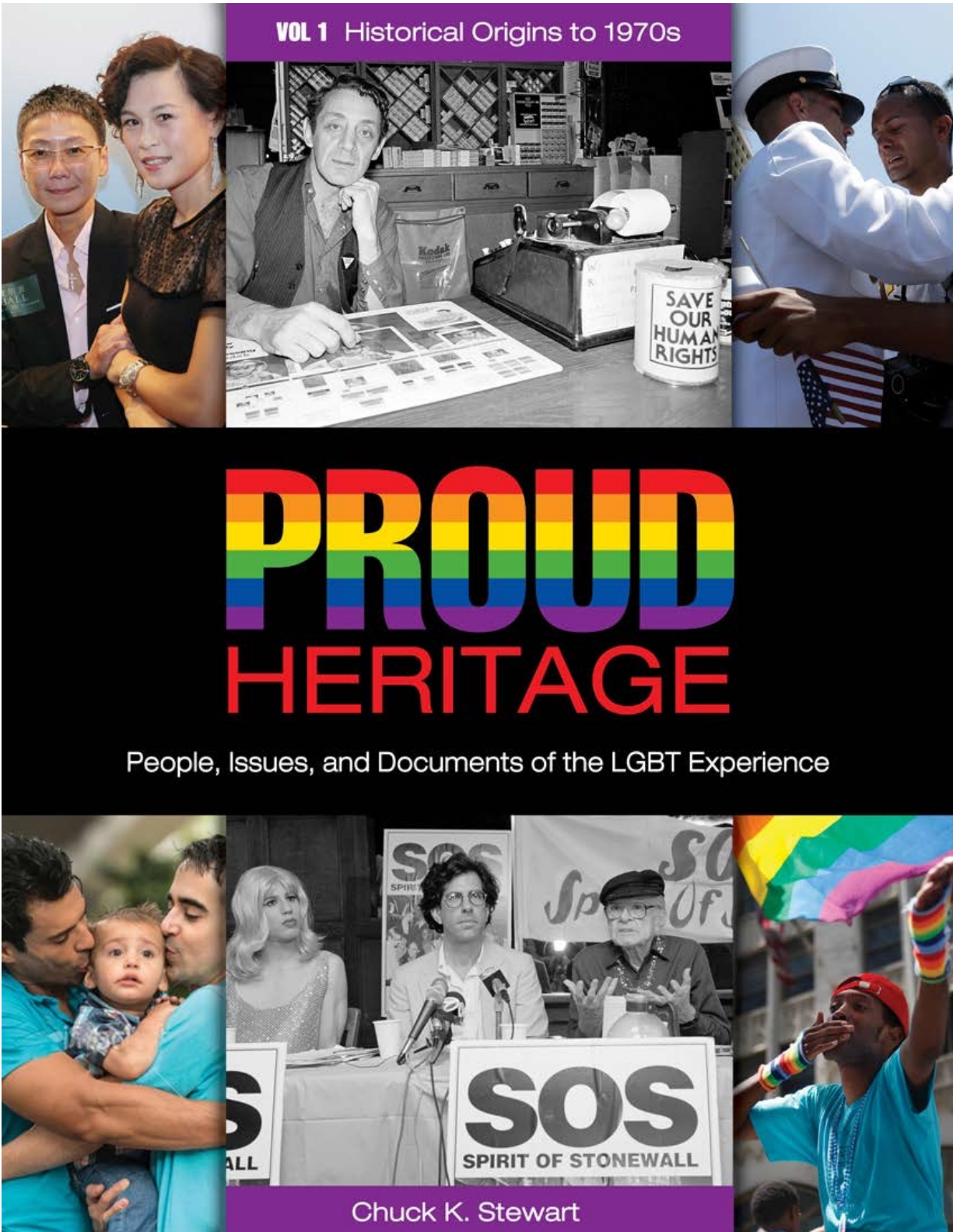
**LAGPA 1992 — 2017**



**Commitment to the  
LGBTQ+ Community**

LGBT community could be leaders on gun control. By the time you read this newsletter, other essays written by me on this topic will have appeared in *The Advocate* and many other publications. I feel it is an important topic and you can read the shorter essays and full academic essay at my website: <http://chuckstewartphd.net/index.php/pulse>. I would love to hear your comments. I have to write another book in the next few months—"Documents of the LGBT Rights Movement" for ABC-CLIO. I would love to talk to you about these issues at the summer pool party in August. See you then.

Chuck





# Acceptance. NO EXCEPTION.

## Antioch University Los Angeles celebrates LGBT history and culture during Pride month!

- Antioch University Los Angeles offers a pioneering graduate level program training the next generation of LGBT-Affirmative psychotherapists and activists.
- The LGBT Specialization in Clinical Psychology founded two clinics:
  - Colors Youth Counseling program at the Antioch University Counseling Center serving LGBTQ youth under 25 and their families.
  - Antioch Alive in partnership with Being Alive serving HIV-impacted communities.

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LOS ANGELES

The LGBT Specialization  
in Clinical Psychology

[www.antiochla.edu/lgbt](http://www.antiochla.edu/lgbt)



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# THE THERAPIST'S NOTEBOOK

FOR SEXUAL AND GENDER  
IDENTITY DIVERSE CLIENTS

Homework, Handouts and  
Activities for Use in Counseling,  
Training, and Psychotherapy

**JOY S. WHITMAN**

**CYNDY J. BOYD**

## Outlook from the Editor: Notes on Community and Activism

By Mary Guillermin, LMFT & Co-President of LAGPA



How is your mental health after a few months of surviving the Trump administration? Mine is doing better, thanks for asking. I made up my mind in the early hours and days of shock, disbelief and horror that I was going to work hard not to be isolated, and to create community. For me personally, this was not necessarily in a political context, but to work hard to be connected to groups and causes I believe in, where solidarity and support for each other are paramount, including, of course, the LGBTQ community.

For several months, as a psychotherapist that has a lot of experience of my own and others' internal "voices", I could feel that though my coping methods – among them not having watched any news since November 9, 2016 – were gradually helping me, there was a "voice" in the background of my mind that was spinning and feeling crazy. It was so very hard dealing with the pain of more and more ordinary people being hurt and the unpredictable behavior and incompetence of the new president.

One of the more significant ways I found support and decreased isolation was through an organization for therapists called Citizen Therapists founded by Bill Doherty with the intention of creating connections and community for therapists and reaching out to polarized groups of voters to foster a real dialogue. The first Friday of every month there is a web-based meeting where members discuss issues such as choosing what to share about our own political views with clients suffering from increased depression and anxiety.

One therapist described a coping mechanism he had observed in several of his clients. He had noticed people seemed to be developing a rough kind of code phrase – quite independently from each other – that meant, "Okay, I am going to vent for a little now" and that they had a corresponding 'code' phrase, meaning, "Okay, that's enough of that. It's time to get on with my own life now." I was fascinated. I recognized immediately that I had been doing just that. This is compartmentalization of something over which we have no direct control as a healthy coping mechanism. To this day, I see this happening around me. For example, a group of friends around a lunch table, opening up a discussion on all things Trump, and then going back to other subjects.

I was honored to receive quite a few articles from LAGPA members for this issue. And the theme of adjusting to Trump's administration and our own emotional reactions are reflected some of these submissions. The articles range from understanding the President's character – see Eric Pfeiffer's article on "Is Donald Trump an Untreated Al-Anon" (p. ) – and how and why he was supported in the way he was – Terry Oleson on Dr Greg's Cason's keynote address at the last LAGPA Conference (p. ) – to how we can support ourselves as therapists – William Doherty on "Why the World needs Citizen Therapists" (p.), and help our community understand their history while raising an activist issue – Don Hilfiger on "Weho takes Gay Pride Hostage". As well as our own CEO's take on a potential activist issue for our community – Chuck Stewart on the reason our community could lead the fight for gun control (p.).

Oh, and I can't 'hear' an internal crazy voice any more. A sense of solidarity and community really works to defuse trauma.



\* \* \* \*

Please support LAGPA by attending our events, among them a Concert and Fundraiser at my center, the SunMoon Retreat Center, 20845 Cheney Dr in Topanga. Come and enjoy connecting with Topanga locals and the gay community as we listen to the “melodic alternative pop” music of Cousin Kate outside under the oak trees of the Sun Temple. Love donations shared with LAGPA and Cousin Kate. The afternoon includes three sets of music, including a solo by Brian Florian, the opportunity to purchase original art or prints by the twin sister vocalists, Isabelle and Corinne Cott and SunMoon SoulCollage® Card Readings by Mary Guillermin (by donation).

# SAVE THE DATE!

LACPA's 29th Annual Convention featured speaker will be

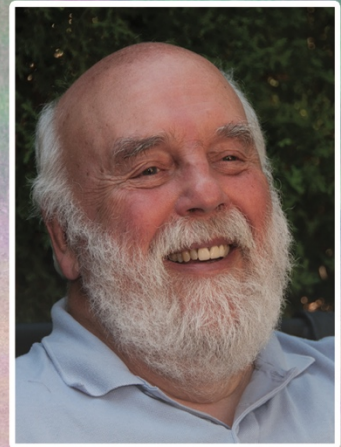
**LESLIE GREENBERG, PH.D.**

Dr. Greenberg's topic:

***“The Transformative Use of Emotions in Practice”***

Saturday, October 21, 2017

DoubleTree by Hilton Hotel – Culver City



For Advertising, Exhibiting, and Sponsorship Opportunities, Contact the LACPA Office

**Save \$35 – Pre-register by October 11, 2017**

Pre-registration is available online at [www.lapsych.org](http://www.lapsych.org)

818-905-0410 [lacpa1@gmail.com](mailto:lacpa1@gmail.com)

*Watch your mail in July for the complete schedule of convention session and events.*

## ***Section I: Issues for Empathy & Action.***

Our first article is a submission from Terry Oleson, a founder member of LAGPA and currently on the Board.

### **Insights into Post-Trump Election Era from LAGPA Keynote Speech**

By Terry Oleson  
May, 17, 2017

In living with the continually disturbing news since the election of Donald Trump, the impressive keynote speech by Dr. Greg Cason at the 2016 LAGPA Conference provided a meaningful perspective of how this country got to this point. Many in the gay community may know Dr. Cason by his regular column in *Frontiers* magazine, which is called "Off the Couch". Greg has appeared in several documentary films, such as "The Butch Factor" and "The Adonis Factor;" he was also one of three featured psychotherapists on the Bravo TV show, "L.A. Shrinks". I have had many opportunities to hear Dr. Cason lecture on cognitive behavioral therapy while he was on the faculty of the California Graduate Institute when I was the Chair of the Psychology Department there. Nonetheless, this 2016 keynote speech seemed more emotionally impactful and more psychologically inspired than I had ever heard him before. Not all of the following expose is exactly how Greg delivered his keynote speech; it represents the thoughts that went through my mind while listening to Greg's impassioned soliloquy.

Greg's original topic was on the relationships between middle aged gay men and their younger, male partners. He subsequently broadened that topic into a far wider perspective of the difficulties faced by middle age, gay and straight males in present day America. The initial title that Dr. Cason had developed for this keynote speech focused upon "The Daddy Complex: The Unexpected Journey into Middle Life." Analyzing the scientific research data in this field, his keynote speech may have originally seemed oriented just towards gay men. However, there was also an insightful inclusion of statistical data of both lesbian women and heterosexual males.

As defined in the journal literature, the current generation of all middle-aged men were born between 1951 and 1976 and they are now in the age range from 40 to 65 years old. Mid-life gay men face specific life challenges coping with our homophobic society, but their heterosexual male counterparts are facing different types of difficulties that have diminished their way of life. These middle age, straight and gay men, came of age during the Cold War and the Vietnamese War, where many lost close, high school friends. Gay men suffered further distressing, personal losses during the AIDS epidemic that peaked between 1981 and 1995. In a different direction, openly gay characters began appearing on television, the sodomy laws were eliminated, protease inhibitors reduced mortality rates from HIV disease, and most recently, gay marriage has become legalized. Across all age and ethnic groups, the expansion of the use of computers, the internet, mobile phones, chat rooms, and apps has impacted the way people meet and socially interact, at least for more educated, prosperous America.

Greg Cason's lecture then focused on the story of one middle-aged gay man, Bob Bergeron, LCSW. Born in 1963, Baby Boomer Bob was a successful psychotherapist in New York City, appeared on several TV and radio shows in New York, was an upbeat motivational speaker, and had written a book titled "The Right Side of Forty." In this book, Bob highlighted his seemingly successful life as a middle aged gay man with a younger male partner, who shared Bob's condo in New York City. However, in 2012, at the age of 48, Bob Bergeron committed suicide. In his suicide note he stated that "It's a lie based on bad information," referring to his own book. What had happened to this successful professional, who suddenly changed his perspective that his supposedly wonderful life had become too dark and depressing to continue onward?

A 2012 survey in San Francisco showed that 12% of urban gay men attempt suicide, three times higher than all adult men. Possible Gay factors include internalized homophobia, ageism in the gay male community, importance of sexual attractiveness amongst gay men. Gay males in San Francisco were found to have significantly more negative views of growing older than did their lesbian counterparts. In a different research study, pairs of identical and fraternal twins, middle aged men who reported having had sex with another male (MSM) were six times more likely to have made a suicide attempt than were men who only reported having had sex with females.

Dr. Cason's talk then pursued the issue of suicide rates amongst all ethnic groups in the United States, not just suicide rates in LGBT communities. In 2016, suicide rates in the U.S. jumped 43% in men and 63% in women, but men were 3.5 times more successful in ending their life. Of all age groups measured between 1999 and 2015, the suicide rates for men who were 45 to 64 years old rose the highest. From 1990 to 2010, mortality rates from all causes rose highest for white U.S. males, the "privileged," white, male, middle class. Importantly, the mortality rates for black and Hispanic males did not show a noticeable change over the same time period. In one sub-analysis, the highest increase in mortality rates was shown by white males who had not attended college, as compared to white males who had taken some college courses. A probable reason that has been suggested for this finding is that following the economic downturn that occurred with the 2008 Great Recession, devastating job losses and chronic unemployment experienced by heterosexual, white males was seen as a far greater decrease in social status and economic security than was felt by men in minority groups.

When Dr. Cason showed a Power Point slide of the regions of the USA where the highest increase in suicide rates was reported, these geographic areas were predominantly in the South, the Far West, and parts of the Mid-West. Upon further examination of this chart, Greg noted how this map of suicide rates tended to overlap a different map of Red states that voted for Donald Trump compared to the Blue states that voted for Hillary Clinton. The similarities between the Red State Map and the Suicide Region Map were unmistakable. It almost seemed that because the white males in the Red states had become so depressed by their reduced financial circumstances, voting for the fantasy promises by Trump seemed like a better option than the more pragmatic plan that was outlined by Hillary. Trump won white males and females in rural areas who felt that they were worse off today than four years ago. Since white America comprises 70% of the U.S. electorate, and 63% of that electorate believed that the national economy was doing poorly, they seemed to view Trump as "the Great White Hope." In contrast, only 5% of Americans report as being LGBT. While 78% of the LGBT community voted for Clinton, their contribution to the ultimate outcome was not sufficient. It might be that since these middle American, white males had such a pessimistic perspective of their own future, they were willing to take a political risk that brought the rest of the country down with them.

While Trump made many, many campaign stops in the Mid-West to outlandishly sell how he “would bring jobs back,” without ever presenting a specific plan indicating how he would accomplish that goal, Hillary Clinton encouraged people to access internet connections to her campaign website. This online site explained a very detailed proposal to retrain many of the workers who were in jobs that would never come back from less costly foreign countries. Better educated Americans might well have read this plan, but it was far too difficult to access by less educated individuals compared to Trump’s tirades against “crooked Hillary” and her “illegal emails.” The voters in these Red states apparently preferred to vote for an ill-defined, economic fantasy rather than a realistic, long term outline for truly bringing “Prosperity Back to America.”

Trump was most definitely the more exciting, interesting, political candidate than Hillary, but it took a willing public to accept Trump’s obvious lies. If one’s choice is suicide or taking a fantasy leap into the unknown world of a billionaire P.T. Barnum, belief in Trump’s preposterous tweets might seem like a sensible option. Of course, non-white and LGBT America did not fall for Trump’s lies, but our concentration in urban America did not compensate for the more financially desperate, rural America that combined to have greater electoral college consequence. Intriguingly, once Greg Cason had fully developed his thesis on the relationship between white, middle America, suicide rates and the 2016 election, there was a kind of relief experienced throughout the room. The unbelievable outcome of crass Donald Trump becoming President of the United States somehow made a little more sense. There was at least one explanation for the most unexpected presidential vote in U.S history that has left most of the LGBT community so despondent.

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## **Is Donald Trump An Untreated Al-Anon?**

Warning: You may feel empathy for the president after reading this

*by Eric Pfeiffer*

Share 1227 February 24, 2017

<https://www.good.is/features/donald-trump-mental-illness-al-anon>

Donald Trump has never touched alcohol, puffed a joint, or even smoked a cigarette. Surprised? I was too when I first found out.

Yet the origins of that straight-edge lifestyle may explain every infuriating, bizarre, and unhealthy manifestation of his oversized personality—much more so than the stream of armchair diagnoses trickling down your news feed.

To some, he’s an unrepentant narcissist. To others, he’s an antisocial sociopath. Some have even gone so far as to suggest he’s living with the late stage degenerative effects of syphilis or early onset dementia. Despite the 1974 instatement of the Goldwater Rule making it “unethical for psychiatrists to give a professional opinion about public figures they have not examined in person,” there are more than a few mental health professionals who’ve publicly entertained what’s so deeply wrong with the leader of the free world.



But there's one explanation I haven't seen yet: One that helps us truly grasp how his mind works, and (stay with me here) maybe even helps us find some empathy. If you really want to understand Trump's contradictions—from his combative, yet people-pleasing manner to a superhero complex with a weakness for constant affirmation—"The Donald" narrative has to be flipped from one focused on lavish greed to one of desperately unfulfilled need.

Trump's older brother Fred Jr. died tragically of complications from alcoholism at the age of 43 in 1981 when Donald was just 35. Trump has said that Freddy's lifelong habit of drinking and subsequent years of decline had a "profound impact" on his personality. I'd argue it shaped the inner turmoil feeding his worldview: deep insecurities, brutal, codependent relationships, and an insatiable need for approval; simply put, Donald Trump is an untreated Al-Anon.

Back in 1951, Lois Wilson was at a crossroads. Her husband Bill had found a solution for his crippling drinking problem and also risen to national acclaim as the co-founder of Alcoholics Anonymous. While "Bill W"'s success with AA was (and still is) a life-saving achievement, the reality for Lois and others like her was more complicated. While her husband flourished, she still carried the trauma from his years of emotionally abusive behavior. Lois herself was not an alcoholic, so making another appearance at her husband's AA meetings wasn't helping her pain. What's more, she said being forced to listen to a room full of heavy drinkers tell war stories risked triggering even more resentment.

Wanting to "strive for her own personal growth" Lois soon founded Al-Anon, an organization dedicated to offering, "a program of recovery for the families and friends of alcoholics." Al-Anon meetings are independent, but they lean heavily on the AA model, including an emphasis on sharing personal stories as a primary form of support and following the The Twelve Steps as outlined in Bill W's Big Book.

No individuals are alike, of course, but there are some defining traits of an untreated Al-Anon:

- Masking low self-esteem ("I've never had problems with self-esteem.")
- Overestimating agency and control ("Only I can fix it.")
- Denying healthy feelings for fear of being vulnerable ("I haven't cried since I was a baby.")
- Outsized displays of unprovoked anger ("I could say, 'Oh I'm not angry.' I'm very angry.")

As a longtime member of a Twelve-Step group. I've spent hundreds, if not thousands, of hours in the shared company of people recovering from substance abuse and addictive behaviors, many of whom attend Al-Anon meetings. When I first saw Trump talk about his brother's death, I'd never heard him speak with such obvious sincerity and vulnerability in his voice — before quickly veering into another rage-filled talking point. It hit me instantly: This man belongs in Al-Anon.

At Twelve-Step meetings, members are asked to avoid discussing "outside issues" (politics, religion, etc.) and instead are asked to focus on their recovery. But, in the aftermath of the election, every meeting I attended began and ended with someone compulsively venting about how the election had affected them personally. It was clear the president-elect had invaded the psyche of us all, maybe none more so than those who share his hidden pain. Privately, I began pointing out to a few friends in recovery that they actually have something specific in common with our new president: He doesn't drink or do drugs, and he watched a beloved family member slowly kill himself through addiction. The unfolding displays of horrific disbelief followed by reluctant empathy was something I'll never forget.

“When I heard he was a teetotaler I thought ‘Of course,’” says Dr. Greg Cason, a behavioral psychologist in Los Angeles.

Cason says research has shown that both alcoholics and defiant straight edges often exhibit the same personality disorders stemming from trauma. “They typically had abusive, authoritarian parents,” Cason says. “Whether or not they attempted to treat that with substance, the root symptoms remain the same.” While one brother turned to drinking and the other abstained in response, they were both taking extreme measures to avoid dealing with underlying issues like narcissistic tendencies and impulse control.

Cason shocked his colleagues in late 2016 when he gave the keynote address to the Lesbian and Gay Psychotherapy Association. It was just days after the 2016 election and Cason focused his remarks on how and why his colleagues must empathize with Trump voters. His argument was built around what he calls deep psychological wounds that have hit middle-aged, lower-income, white men without college degrees in recent years, creating a connective tissue between them and the billionaire real estate mogul. “I looked at a map showing where the most severe trends of addiction and suicide rates were spiking across the country,” Cason said. “They were all Trump states.”

However, when it comes to Trump himself, Cason doesn’t hesitate to speak more critically, saying Trump exhibits many of the common traits of a narcissist. Though he doesn’t attempt to formally diagnose Trump, he says new research argues that people like Trump exhibiting those traits weren’t necessarily born that way. Instead, it’s possible their emotional development was stunted after a traumatic, life-changing event. “If you see him as an 8-year-old boy, it’s very clear,” says Cason. “He thinks the world revolves around him, and he hasn’t learned to master his basic emotions. These behaviors (narcissism, codependent traits and maybe even psychopathy) were passed along from his domineering father, escalated by his brother’s drinking, and aided by his family’s abundant financial resources.”

Donald Trump was—and always will be—his father’s second son. Fred Trump Sr. was a domineering bully who never acknowledged the success of his attention-seeking son. By the time Donald became “The Donald” and plastered the family name all over Manhattan high-rises and Atlantic City casinos, Fred was suffering from dementia and unable to convey the affirmation Trump so desperately craved.

Fred Jr., Trump’s older brother, was supposed to be the true heir to the family dynasty. Tall, handsome, stylish, and funny, Fred Jr. carried himself with the natural grace that Donald has spent decades poorly trying to emulate. “He was a great guy, a handsome person. He was the life of the party. He was a fantastic guy, but he got stuck on alcohol,” Trump said in an interview during the campaign. He was so seemingly smooth that when he walked away from the family business, it was to become an airline pilot, something Trump would later bitterly dismiss as being “like a bus driver in the sky.” But Fred Jr. also carried the disease of addiction. When he rejected taking his place by his father’s side, his relationship with Donald became strained. As Michael D’Antonio, author of *Never Enough: Donald Trump and the Pursuit of Success*, said in a recent interview: “Instead of becoming nicer because he observed his brother’s fine qualities, Donald became tougher. Instead of becoming more trusting, I think Donald became more paranoid.”

## **What happens to untreated Al-Anons like Trump**

There’s a saying in Twelve-Step fellowships like Al-Anon that your disease isn’t cured, it’s in the other room doing push ups. The implication being that someone who doesn’t address their behavioral challenges will not only fail to get better, but will actually get worse over time.

The early days of Trump's presidency show not someone at the height of narcissistic control, but someone on the perilous verge of collapse.

Comparing nearly 40 years of Trump television interviews is like watching a melting sulfurous candle. In 1980 a 33-year-old Trump uses many of the same rhetorical techniques he does today but his conversational tone is steady, measured and often thoughtful. Eight years later, Trump talks to Oprah Winfrey about trade policy and world powers like China. It's closer to his bombastic style of today, but he's still offering more nuanced takes and even praising Democrats like Jesse Jackson. By the time we get to 2005's leaked *Access Hollywood* audio we're in the company of the unhinged Trump. Even if you don't believe Trump committed actual acts of sexual assault, it's clear he's willing to boast about such acts in order to desperately seek the approval of someone else, anyone else. Even Billy Bush.

We can't know if Trump has ever considered getting help after his brother's death, but it's statistically unlikely. Al-Anon doesn't keep hard numbers, but its membership is reportedly 85 percent female. That doesn't mean men like Trump wouldn't be welcomed there. In fact, if he was serious about changing his behavior, it might just be the perfect place for him to drastically change his relationships with others, especially women.

"All of the worst parts of his personality would actually become assets if he worked on them," Jess A., an Al-Anon member, told me, explaining that in the Twelve-Step philosophy all "defects of character" are actually positive traits when brought down to the right size. "He'd fit right in."

Calling Donald Trump an untreated Al-Anon isn't a joke meant to ridicule him. It's a way to finally understand his behaviors and how other people, sometimes for good, but more often not, continue to manipulate him.

It's a way to move beyond the cries of racism, sexism, or undiagnosed mental illness that makes us feel better in the moment, but does nothing to change our reality.

I'm not writing this to get Trump into treatment. A cry for help for a man unwilling and incapable of asking for help himself accomplishes nothing. I wrote it because it helped me understand where I believe he's coming from, and maybe it will help you, too. This isn't for him, it's for us.

If his presidency doesn't end with impeachment or resignation, it should start with an intervention.





## Why the World Needs Citizen Therapists

William J. Doherty, Ph.D.

University of Minnesota and Citizen Therapists for Democracy

The boundary between the personal and public has ruptured in the age of Trumpism. A fixed, hard boundary was of course a fiction—we are always influenced by what's going on in society, and our personal actions affect the whole. But therapists who felt comfortable in the mainstream of a democratic society could assume that our therapist "hat" and our citizen "hat" were separate. In our therapist role, we told ourselves, we are professional healers; as citizens, we follow public issues, support candidates, and cast votes. The main crossover was our advocacy for better mental health policies and reimbursement.

Feminist, ethnic minority, and LGBT therapists have argued for decades against this personal/political split in the therapy world—witness the big literature on therapy and social justice. But that perspective was relegated to the sidelines of the therapy world, confined to situations when the clients were part of an oppressed minority. For the most part, psychotherapy marched along with its traditional focus on the intrapsychic and interpersonal realms—in part, I think, because many of us assumed that we and our clients had personal lives adequately buffered from public turmoil and stress. Yes, occasionally an event like 9/11 burst that bubble, but it soon re-formed.

But after the election of Donald Trump in November 2016, the bubble did not return. Many of our clients across social class and race are distressed by what's happening to the country and are living with current



anxiety, worries for the future, and the reactivation of past fears. This is occurring both for people immediately at risk, such as immigrants, and those less personally vulnerable who are watching the rise of hate, the disregard for the truth, and the flaunting of core democratic values such as a free press and respect for the rule of law.

In the face of these challenges, all the professions are facing a paradigm crisis: how do they go forward with business as usual when the democratic foundations of their work are being threatened? As an example, consider the soul searching among journalists now: they are having to call out systematic lying, not just reporting the shading of the truth or one take on the facts versus another.

For psychotherapists, the challenge is to integrate our roles as therapists and citizens so that we can help our clients do the same. We must take on the mantle of the citizen therapist in the office and community. Here's a short definition of a citizen therapist: **In addition to the traditional work of personal healing, a citizen therapist works with people in the office and the community on how to productively cope with public stress and become active agents of their personal and civic lives.**

The citizen therapist sees the close connection between the personal agency focus of psychotherapy and the work of democracy understood not just as an electoral system but as collective agency for building a shared life in community (we-the-responsible-people). Therefore, the citizen therapist actively works to protect and strengthen democracy, and calls out threats to its integrity. Democracy and therapy need each other.

The era of Trump calls us beyond the personal/public split, a blind spot that has kept us from engaging in comprehensive care for people who bring to us their whole selves, private and public, intimate and civic.

*William J. Doherty is a therapist, academic, and community organizer. He is a professor in the [Department of Family Social Science](#) in the College of Education and Human Development at the University of Minnesota, where he directs the [Citizen Professional Center](#) and the [Minnesota Couples on the Brink Project](#). With his daughter Elizabeth, he founded The [Doherty Relationship Institute](#). He has practiced as a therapist for 40 years. In June 2016 he wrote a Citizen Therapist [Manifesto Against Trumpism](#), which attracted over 3,800 signatories and widespread media attention. Then he decided to launch Citizen Therapists for Democracy.*

## Origin of Citizen Therapists for Democracy:

Bill Doherty

In one obvious way, Citizen Therapists for Democracy is a response to the election of Donald Trump and the immediate threat to public mental health and American democracy. But in another way it was an idea waiting to be born. What's different now is the sense of urgency among therapists to go beyond business as usual. Here is the origin story of Citizen Therapists for Democracy, in the words of founder Bill Doherty, with parts adapted from his January 2017 Psychotherapy Networker article "Psychotherapy's Pilgrimage: Shaping the Consciousness of Our Time."

Like many therapists, I (Bill) experienced Trump's election as a kick in the stomach for the field of psychotherapy. In his public persona, he's the antithesis of what we promote in our work. At a cultural level, he's the embodiment of the empty Consumer Self. The election laid bare the dysfunction of so many of

our institutions and the frayed status of our social fabric. But in a perversely ironic way, the movement that Trump set in motion is forcing the therapy community to examine our own cultural role and our underlying vision of the healthy connection between self and society.

Trump's ascendancy revealed that a large group of people feel that their society is moving on without them, that they're not valued anymore, that there's nothing left for them. They're deeply alienated, and some feel temporarily more powerful by expressing or excusing expressions of racism and xenophobia and sexism. But Trump---with his rock-star persona (whatever you may think of his "music"), his ability to connect emotionally with people, his achievement of wealth in the consumer culture, his projection of at least the appearance of raw power---has brought them *together* into a movement, given them a common purpose, forming them into a focused community, with---in their eyes---a real moral and ethical point, which is to "Make America Great Again," or at least, "Make America The Way It Used To Be Again," when they themselves counted for something.

It's clear that multiculturalism in the therapy field has missed this white, working-class group, who are particularly vulnerable because their fall from grace has been so precipitous. Unlike truly poor people and people of color (who've always been outliers in American society), the Trump people *did* count: they were part of respectable, respected, hard-working communities, which saw themselves as America's backbone. So Trump tells them they still count, that they've been betrayed, that they're part of a great all-American community, dedicated to a great cause, and should rise again. While it's hard to tolerate a lot of what they say and do when they're angry and activated by Trump, there's real pain there, with a belief in a higher purpose. Nostalgia is homesickness, grief for what's been lost---or, as many seem to believe, stolen, in a world of globalization, immigration, and affirmative action for every group but their own, with the federal government the chief perpetrator and punisher. The kindling was ready for Trump to strike the match, and similar movements are occurring in many of the world's democracies.

So you could argue that, inadvertently, Trump has issued a challenge to the therapy field, pointed to a new direction therapists need to take. His ascendancy is a bugle call that therapists must begin to take seriously, so as to move beyond focusing narrowly on individual mental health problems when the larger social glue is weakening.

At this time of fragmentation and division, we need to recognize that we're in the glue business. We know something about helping people connect, about how to form a healthy "we" out of self and other. We also know something about how to depolarize conflict. But first we need to find our conviction and passionate intensity as a profession, our belief that we have something to offer to our culture, something that embodies wisdom about what it means to be a citizen of a larger world than our friends and families---a purposeful life that both personal and civic. We need an image of the relational and community self to counteract today's hyper-individualism, which, because the individual alone is impotent in a mass society, easily falls prey to the tribal loyalties seen in the Trump movement and its siblings in other countries.

I've been on a citizen therapist journey since the mid-1990s through my work in the Citizen Professional Center at the University of Minnesota. I've been mentored by democratic theorist and activist Harry Boyte, who helped steep me in a tradition goes back to Jane Addams, John Dewey, and Martin Luther King. (King asked Harry to organized low-income Whites during the civil rights era.) Feminist therapists and other social-justice therapists like Ken Hardy have been pushing the public envelope of psychotherapy for decades, so it's not really new. Maybe what is new is the democracy theme, which assumes that *everyone* has a stake in the public domain, can be affected the public stress (Trump supporters included), and can be

part of the solution through personal action (such as talking about issues in their social network) and collective action (by joining with others to work on change).

The realm of public concerns of clients in today's world is likely to be far ranging if we invite them to share what's on their minds and in their hearts. These concerns could include local public schools, community safety, the lack of insurance support for mental health treatment, local police practices, threats to the planet, or the influence of the internet and social media on children. Note that these can cut across traditional liberal and conservative lines, but I predict that one of the main public stresses that therapists will be dealing with now is the Trump presidency: how will we deal with the Trump effect on our clients, and how will we address the larger threat to the public mental health and our democracy? Clearly, we have work to do.

That's the bigger background story. The immediate context began when Trump became a likely Republican candidate for President. I couldn't sit still, especially after touring Europe and discovering how therapists remained silent during the rise of Fascism during the 1930s. So I wrote a *Citizen Therapist Manifesto Against Trumpism*, which attracted over 3,800 signatories, many of whom joined an active Facebook group. We got a lot of media attention where we tried to influence the public dialogue. I saw how distressed and passionate so many of my fellow therapists were.

Then came the election. After being prodded and challenged by my therapist daughter not to aim low or think small (as therapists, including me, have often done), I decided to launch something big and call it Citizen Therapists for Democracy, which I envision as an international association of therapists developing and spreading transformative ways to practice therapy with a public dimension, rebuilding democratic capacity in communities, and resisting antidemocratic ideologies and practices wherever they arise. It's for therapists who want to find ways to bridge the divide between the personal and the public dimensions of life in the therapy room and the community.

I am confident that we will build something important for our field, our clients, and the larger world. In my 40 plus years in the field, I've never seen therapists so fired up and ready to try something new to make a bigger difference. Our world needs what therapists have to offer. We're connectors, glue makers. We understand the complexity of the human spirit. We know that embracing differences is difficult but life enhancing. If we raise our sights and devote ourselves to learning new "public skills" for the office and community, our profession can contribute to a flourishing democracy, where people can be agents of their own lives and builders of the commonwealth.

## Section II: Gay Activism, Past & Present.



Women's March in LA: Over 500,000 gather in downtown LA.

Stuart Palley/L.A. Times

### WeHo Takes Gay Pride Hostage

By Don Kilhefner  
May 18, 2017

A seismic shift is occurring in Los Angeles' gay and lesbian communities. On June 11 the anachronistic Gay Pride *Parade* in West Hollywood will be replaced by a Gay Resist *March*, reconnecting the gay community to its Gay Liberation roots. Its target, however, is not systemic heterosexual supremacy but The Donald.

But there is a large and pressing problem confronting the gay community in Los Angeles in this regard. West Hollywood, the site of the annual Gay Pride event, promotes itself as "The World's Most Incredible



& Magical Gay City,” by extension symbolizing the L.A. gay community. Nothing could be further from the truth. It’s time to rescue the Gay Pride celebration from West Hollywood where it has been taken hostage-for-profit by the City and its business interests.

Incorporated as a city in 1984, Weho is 1.9 square miles in size, a fishbowl compared to L.A., with a small population of 34,399, 40% of whom are LGBTQ. Now comes the disturbing news. WeHo’s population is 84% white while in the City of Los Angeles that surrounds it, only 29% are of that bland skin color. In WeHo, Latinos are 10%; in L.A. 47%. Asian-Americans 5%; in L.A. 10%. African-Americans are 3%; in L.A. 10%. Weho does not resemble L.A. or its gay and lesbian people. It exists as an island of white privilege and perks surrounded by a city composed overwhelmingly of people of color.

While non-Caucasians make up about 70% of Los Angeles, they represent only 18% of West Hollywood. This was, and is, largely due to a *de facto* pattern of white supremacy and blatant discrimination against non-whites, particularly in apartment rentals and certain hospitality businesses. In the 1970s and 1980s, the most infamous and blatant example of Jim Crow in West Hollywood involved Studio One, a hugely-popular gay megadisco with attached supper club frequented by celebrities. Studio One had a known policy of white-men-only, with gay blacks and women routinely turned away. There were anti-racism demonstrations frequently, however the Weho power structure then did nothing to stop the bigotry. Still today many gays and lesbians of color and others avoid West Hollywood, labeling it “white boys town.”

Adding to the problem are socioeconomic inequities. West Hollywood is a financially high-end city with more in common with a Hollywood Hills-Brentwood-Santa Monica lifestyle than middle-or working-class East Hollywood and South and East Los Angeles or even downtown Los Angeles. It supports a luxury-based economy consisting largely of expensive restaurants and bars, high-priced fashion houses, home furnishings emporiums for the rich, elegant offices for the entertainment industry elite, large new high class hotels with sweeping views of the L.A. basin stretching to the Pacific, and real estate development deals running into the hundreds of million dollars.

All of this West Hollywood extravagance is beyond the reach of ordinary gay and lesbian people. It creates a false image of the gay community as being an affluent community. A better indicator of the real state of affairs appeared in 2016 in an important research study by the Williams Institute at the UCLA Law School. It revealed that one in four LGBTQ adults (27%) experienced a time in the last year when they didn’t have enough money to purchase food for their survival as compared to 17% of non-LGBTQ adults. West Hollywood is an economic anomaly, out of touch and out of reach of most gay people.

West Hollywood is just the wrong place to be the iconic representation of Los Angeles’ LGBTQ community and the site of its annual Gay Pride celebration. Its Gay Establishment hypocritically says it does not pretend to represent all of L.A., but its behavior tells a different story.

By 2019, the 50th anniversary of the Stonewall Rebellion, which launched the national and international Gay Liberation revolution, Gay Pride should be relocated to down-town Los Angeles, to the center of the city. Recently the AIDS Walk announced it was leaving WeHo and relocating to Grand Park downtown. In January the Women’s March showed us what a powerful tool the streets of downtown can be in bringing together and uniting disparate communities – East, West, South, North – of the city. A similar downtown LGBTQ March, hand-in-hand with our allies, has the similar potential of annually uniting the city’s gay communities and transforming gay and lesbian consciousness in Los Angeles. West Hollywood divides, downtown contains the potential of uniting.

The L.A. Pride committee in Weho that organizes the annual celebration, is accused of being closed and secretive, its Board in disarray, with an entrepreneurial, entertainment consciousness (the legacy of the Reagan Revolution) replacing its grassroots, militant history (the legacy of the Stonewall Revolution). In 2016 it ran up a debt of about \$400,000, shocking and alienating the gay community, particularly those who knew where we came from. There will be strenuous push back from West Hollywood to maintain the status quo, primarily from the City government and business interests. Gay Pride has become a gold mine for them by turning WeHo into a 48-hour, Citywide dance party with packed hospitality businesses. A study done by Conventions, Sports, Leisure International reported it generated \$5 million in income for the City and bars, restaurants and hotels. Sadly, the Stonewall Rebellion, Gay Pride's *raison d'être*, is invisible. Gay people are not dance party deprived, but they are gay history ignorant.

This is my bottom line. During Gay Pride weekend a few years ago, I asked a bright, early-twenty-something gay man if he knew what it was all about. He was hazy. We dialogued about what it was like for our kind before Stonewall, what happened on June 28, 1969 in Greenwich Village, and the liberation prairie fire that came afterward, birthing, against terrible odds, a self-respecting, organized, and a politically and creatively alive gay community where none had ever existed before. The young man went silent for a moment, then angrily exclaimed, "Why hasn't anyone told me this story before? This is a history I can be proud of."

*Don Hilhefner, a Gay Liberation pioneer, is co-founder (with Morris Kight) of the LA LGBT Center and Van Ness Recovery House, and (with Harry Hay), the Radical Faeries. He has spent the past 50 years as a gay community organizer in Los Angeles, helping to organize the first Gay Liberation march on Hollywood Boulevard in 1970.*



# Learning Our History: The LGBT Community on TV & Film

By Mary Guillermin



Rory O'Neill

&



Panti Bliss

Recently I learnt a bit of Irish history, very significant to LGBT people. This history is celebrated in a film called, “The Queen of Ireland”, and was shown for the first time on the West Coast in April at the Topanga Film Institute. The film traces the personal and ultimately political story of Rory O’Neill, who became a star as a drag queen named Panti Bliss, and who spearheaded the campaign for a referendum on whether to allow gay marriage.

On March 22, 2015, Ireland became the first country to approve same sex marriage by popular vote – an amazing success in a country still heavily dominated by the Catholic Church. The Yes vote was 68% to 38% No with a 60% turnout. The documentary traces her personal story and her powerful and influential activism on the Yes campaign. If you get a chance to see it, it is well worth it.

Watch the trailer to the film: <https://www.youtube.com/watch?v=Db2857BR7GM>

And, in February 2017, ABC showed an eight hour mini-series on the history of the LGBT movement, seen through the focusing on LGBT history in San Francisco. Here is an edited version of a New York Times article.

## ‘When We Rise’: Stories Behind the Pain and Pride of Gay Rights

By Adam Nagourney

Feb. 16, 2017

A contemporary examination of gay life in America [was shown in February ] on network television. Written by a prominent gay filmmaker, Dustin Lance Black, “When We Rise” is a 50-year history of the

gay rights movement, told through four characters who suffer — and often triumph over — family rejection, landlord discrimination, gay-bashing, police harassment, legislative defeats and AIDS.

But the world is a different place than it was when ABC first commissioned the project four years ago. Barack Obama was in the White House, and gay leaders were celebrating a series of court and statehouse victories, which would soon include the Supreme Court's recognizing a constitutional right to marry by same-sex couples. After President Trump's election, questions that seemed largely settled about gays in American society — same-sex marriage, equal treatment in the workplace and in housing — suddenly seem in doubt.

Still, as celebration has given way to intense anxiety, Mr. Black argues that the election's outcome has made the mini-series even more urgent.

"We did not create this series for half a nation," Mr. Black said. "I believe that most Americans, including Americans who voted for Donald Trump, will fall in love with these real-life families and absolutely relate to their stories when they tune in."

"We've reached the stage in the L.G.B.T. movement when a network not only feels comfortable taking this on — but doing so in a big way," said Eric Marcus, a gay historian who produces the [Making Gay History podcast](#) and is preparing his own multipart documentary on the movement.

Torie Osborn, a longtime gay and lesbian rights leader who was active in San Francisco during struggles depicted in the movie, said, "I hope this is a moment for our allies to learn about our history and young gay men and lesbians to learn about their history."

Mr. Black said that if he had learned anything from this work, it is that the gay rights movement is a story of triumphs followed by setbacks. Mr. Trump's election, he said, is just another turn in this road.

"We are in a period of backlash right now," he said. "I would give anything for this to be less topical. But this series shows our history is a pendulum, not a straight line."

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Memorial to Victims of the Pulse Massacre

*June 12, 2016, forty-nine people were killed and another fifty-three people injured at the Pulse gay nightclub in Orlando Florida. This was the worst shooting in U.S. history by a single shooter. It was an antigay hate crime. ABC-CLIO has given me permission to distribute my academic article on this tragedy. The link below provides the 16,000 word academic article. A shorter personal impression is what is reprinted here. You are welcome to download and share it with others.*

[http://chuckstewartphd.net/templates/rt\\_callisto/pdf/2017-4-21-Massacre-at-Pulse-Permission-free.pdf](http://chuckstewartphd.net/templates/rt_callisto/pdf/2017-4-21-Massacre-at-Pulse-Permission-free.pdf)

This short essay relates to the 16,000 word academic article: Stewart, Chuck. "Massacre at Pulse Gay Nightclub and LGBT Gun Control Leadership." In Vol. 3, Lesbian, Gay, Bisexual, and Transgender Americans at Risk: Problems and Solutions. Santa Barbara, CA: Praeger, 2018.

Permission is granted to publish these articles as needed.

## **Massacre at Pulse Gay Nightclub and LGBT Gun Control Leadership**

by Chuck Stewart

April 21, 2017

I will never forget the morning of June 12, 2016. I was up early eager to drive to the Los Angeles Pride parade when I heard the terrible news of the shooting at Pulse gay nightclub in Orlando. The contrast between my exuberance for the parade and the shock of so many deaths in Florida seemed otherworldly. I was in a daze wanting to speak to friends but it was too early to call or text anyone. Not until I arrived at the festival and experienced the increased security did the reality of the situation set in. Cops were everywhere. Everyone was on edge. It was surreal.



Over the next few weeks I read endless articles and news reports about the massacre. When dancing with friends that week, I was aware how we all looked around our favorite bar with an eye for something being out of place. Anxiety set in. It was unnerving; looking over our shoulders anticipating a gun shot or worse. One of the articles I read suggested that the LGBT community could be leaders in the call for gun control. I had been indifferent about guns. I knew the U.S. had too many guns and tragedies at Sandy Hook and elsewhere occurred too often but progress was stymied. I personally never owned a gun nor ever shot one. I had no interest in guns.

The deaths of so many gay people and families and friends hit my consciousness. I educated myself about guns and the incident at Pulse. What an education! There was much speculation about the shooter—Omar Mateen. Was he a terrorist? Was he a self-loathing gay? The FBI investigation was ultimately inconclusive and motive was not established.

What is known is that he entered a gay nightclub with the intention to specifically kill the people in the bar. This was an antigay hate crime. Yet, much of the media, especially from conservative outlets, began to “straight-wash” the event and continued to claim that it was an

Islamic “terrorist” attack—regardless that there was no direct evidence to support that claim. Even the Republican National Committee used the term “terrorist” but failed to use the word gay in describing the nightclub in their press releases. Groups were cashing in the event to promote their own agenda. A couple of Christian pastors applauded the shooting and called for more gays to be killed. They even recorded their sermons on YouTube to spread their hate.

LGBT people are very aware how much antigay hate permeates our culture. Religious and political conservatives, the Republican Party, Fox News, NRA, televangelists, and others continue to spew their antigay hate. I made a quick online search and found direct quotes from fourteen “leaders” either denying our existence, keeping us as second-class citizens, or outright advocating of our deaths. There is nothing new here but it is disconcerting to see so many quotes wanting us dead in 2017.

Unfortunately, hate crimes are on a rise with crimes against transgender leading the way. Gay suicides are up. Guns play a major deadly part in this violence. It is common to hear about gun rights being expressed as “second amendment” rights. Even President Trump used the coded language to predict that Hillary Clinton could be killed by Second Amendment zealots to stop her from gutting the law.

But what does the Second Amendment say? — “A well regulated Militia, being necessary to the security of a free **state**, the right of the people to keep and bear Arms, shall not be infringed.” After reviewing many legal articles, court documents, and legal histories, this is what I learned: the Second Amendment has

nothing to say about personal ownership of guns but rather defines the relationship between the federal government and state militias.

For over 220 years the courts were very clear about this understanding with no dissention. The Second Amendment is a vestige of slavery. That may seem an odd statement but here's why. If runaway slaves made it to the North and joined a militia, they were often granted freedom. The newly constructed Constitution of 1789 gave federal control over state militias. The southern states feared that if that happened, the north would simply make the militias ineffective (in the south, militias were known as "slave patrols") and declare slaves to be free. By including the Second Amendment, states maintained control over their slave patrols.

A policy decision made by the NRA in the 1970s targeted changing the understanding of the Second Amendment to advocate for unfettered access to all kinds of weapons. By 2008, a conservative majority on the U.S. Supreme Court expanded the Second Amendment to include personal ownership of guns; but within limits. This confusion spawned thousands of lawsuits across the country. If pro-gun people were honest, they would have crafted their own Constitutional amendment and processed it through the steps necessary to ratify the amendment. Instead, they maligned the Second Amendment to meet their goals. Unfortunately, that is now the common understanding of the law and utterly confusing. There has always been gun control in the U.S. at local, state, and federal levels.

It is important to have a rational discussion about gun ownership that dispels all the myths and misinformation. And this is where the LGBT community can have an impact. Coming out gay gives us strength to stand up to bullies. Also, the LGBT community has shown great ability at organizing. As gay people, we need to stand up against all the falsehoods perpetrated by the pro-gun lobby. For example, gun violence is a real problem; a "good guy" with a gun is not an effective way to stop a "bad guy" with a gun; dictators have not used the confiscation of weapons as an effective means to consolidate power; and more. Don't let the gun bullies push us around. Our LGBT support organizations need to encourage academic research into gun violence and enact comprehensive gun control legislation that reflect programs that are effective at reducing gun violence. LGBT people have the temperament and organizational skill to lead the way for ending gun violence.

*Chuck Stewart, Ph.D. is an editor and writer for ABC-CLIO and other publishers. **To read the entire academic essay, visit: [www.ChuckStewartPhD.net](http://www.ChuckStewartPhD.net).** Stewart, Chuck. "Massacre at Pulse Gay Nightclub and LGBT Gun Control Leadership." In Vol. 3, *Lesbian, Gay, Bisexual, and Transgender Americans at Risk: Problems and Solutions*. Santa Barbara, CA: Praeger, 2018.*

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## ***Section III: Legal Matters in Limbo.***

### **CONFIDENTIALTY, CHILD PORNOGRAPHY AND THE INTERNET**

By Thomas Wall, licensed California attorney

*This article does not purport to provide to the reader legal advice or establish any type of legal relationship between the reader and the author.*

*Therapists are encouraged to seek outside legal advice regarding any issues involving CANRA compliance issues.*

N.B. The California State Supreme Court recently decided to hear the case referenced in this article, therefore Mr Wall suggests the following:

*The effect of the California Supreme Court in granting review of the Mathews decision is that the lower court decision is **not** binding on any other cases except it may be used in other cases for "persuasive value". (California Rules of Court, Rule 8.115(e).*

*To be on the safe side and without giving your readers legal advice, I would recommend **prior** to reporting the conduct of their client, they consult legal counsel to determine the status of the Mathews decision.*

As therapists are aware and presumably have informed their patients, therapists and 43 other categories of persons, are identified as "mandated reporters" under the Child Abuse and Neglect Reporting Act (CANRA). As a mandated reporter, therapists are required to report to governmental agencies known or suspected instances of child abuse or neglect. Child abuse includes "sexual abuse" or "sexual exploitation". As will be shown, the term "sexual exploitation" covers more than one may think. Since failure to disclose such information subjects the therapists to criminal penalties and license suspension or revocation, compliance with the reporting requirements is more than just a request by the State of California.

The focus of this article is to inform therapists of their new obligation to also report when they have a reasonable belief or suspicion that a patient has "knowingly downloaded, streamed or access through any electronic or digital media a child engaged in an act of obscene sexual conduct" and how the State Legislature and the courts have come to the conclusion that such a requirement is required and is proper. Prior to 2014, under CANRA, the term "sexual exploitation", included producing, developing or exchanging child pornographic materials. However, the statute did **not** specifically require the therapist to report their patients who downloaded, view or possessed such material on the internet.

Yet, California Penal Code Section 311.11, provided that possession by itself of child pornography was a felony. In 2001 the California Court of Appeals handed down the decision of People v Luera. In a relatively brief opinion, the court did not have much difficulty in upholding the constitutionality of Section 311.11 against claims that possession of child pornography was in violation of a person's right of privacy. The State court found support for its decision in a 1990 United States Supreme Court decision that the First

Amendment to the Constitution did not restrict a state from outlawing the possession and viewing of child pornography.

After the Luera decision, while child pornography had generally become difficult to purchase or trade on the open market, it proliferated on the internet if one knew where to go. Many victims of child sexual abuse had informed the authorities that their abusers had forced them to watch childhood pornography to show that other children enjoyed it. There was also a belief that adults watching childhood pornography would lead them to act out on their fantasies even though academic studies had shown this was not the case in most instances. Also in some countries there grew a very profitable industry for the production of childhood pornography which found itself on the internet.

In California, there was an outcry for the State Legislature to do what it could to stop child pornography. In 2014 the State Legislature amended CANRA. The amendments provided that the term “sexual exploitation” “also includes a person who knowingly downloads, streams, or accesses through any electronic or digital media, a film, photograph, videotape, video recording, negative, or slide in which a child is engaged in an act of obscene sexual conduct”. The reason given by the State Legislature for the amendments was “to reflect modern technology” by making “additional, purely technical revisions”.

The issue soon arose whether the State Legislature had gone too far when it required the therapist to report a patient who had disclosed that he or she had downloaded child pornography from the internet even though the patient had not expressed any intent to the therapist to actually engage in sexual conduct with the minor. Penalizing a person for just watching a movie was viewed by some as much more than just a “technical revision”. Also some therapists believed that the new reporting requirement would discourage a patient who was seeing the therapist based on an “abnormal” sexual attraction of children from being open with the therapist.

A recent court decision, Don L. Mathew, et al v. Kamala D. Harris (B265990) (“Mathews”) arising from the Second Appellate District of the California Court of Appeals has firmly answered that the CANRA amendments are valid. Unless the California Supreme Court elects to hear the case, which this writer does not expect, the 2014 amendments to CANRA must be followed by therapists.

In its thirty- six page unanimous opinion, the Mathews court rejected every argument presented by the therapists. The overall basis of the opinion was the finding by the State Legislature that child pornography was evil and had no place in a civilized society. Therefore, the State Legislature had a legal basis to do what it could to decrease or eliminate internet childhood pornography.

However, the Mathews court also felt it was important to explain why the therapists’ arguments were in error. As to the issue whether the privacy rights of the patient would be violated by the amendment, the court reaffirmed that the constitutional right to privacy “had never been absolute” and that the right of privacy “must be balanced against other important interests”. In this case the protection of minors against child pornography outweighed any rights of confidentiality that the patient would have. Child pornography, the court stated, was illegal to make and illegal to possess under California law. As the State court noted, even the United States Supreme Court had held that States could outlaw the possession and viewing of the child pornography.

The Appellate Court gave short attention to the issue that viewing child pornography without any thought of the patient actually having sex with a minor, made the offense acceptable. While the Court stated the therapist community could not state that such an outcome could never happen, the court seemed more

concerned with the rights of the minors being shown in the films. Child pornography, the court stated, was not a victimless crime.

The court also rejected the argument that imposing the requirement would impair the patient from fully disclosing his actions to the therapist and therefore decreasing the amount of trust necessary for the therapist to help the patient. The court viewed this argument as the patient seeking a “particular form of medical treatment as a cure for one’s illness”, which prior court decisions had held was not a “fundamental right in California”. One wonders if after several years post Mathews if there is empirical evidence that the amount of trust between the patient and the therapist has substantially decreased, whether the courts will reexamine the issue.

In the meantime, therapists are reminded, there is no requirement under the statute for the therapist to conduct any investigation of the actions of their patients or even to confirm their suspicions. Under the statute their only obligation is to *make* reports if the reporter, in his or her professional capacity or within the scope of his or her employment, knows or reasonably suspects child abuse or neglect. The duty to determine whether the patient actually violated the law is vested in outside agencies.

While Mathews did not address the issue, this writer would encourage therapists to inform their patients who are seeking treatment especially regarding sexual issues, at the beginning of the relationship, that if they disclose to you they view or have downloaded child pornography or any other prohibited conduct as stated in CANRA, that the confidentiality umbrella does not apply and that you, the therapist, is required under the law to report them to governmental agencies. One’s revocation of license and the imposition of criminal penalties is too high of a penalty for the therapist to pay for silence.

*Thomas Edward Wall is a licensed California attorney emphasizing representing victims of sexual abuse in civil cases for money damages. He has been recognized expert by the Los Angeles County Superior Court in the field of legal ethics.*

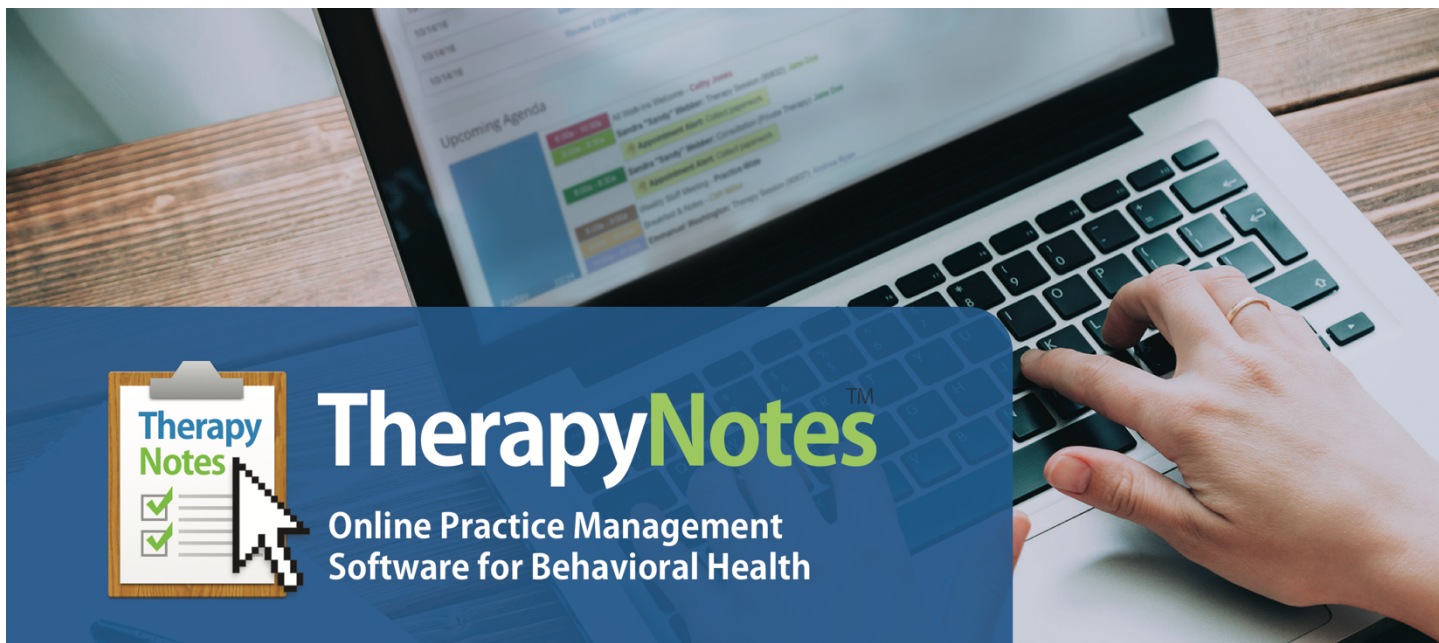
*Mr. Wall is also a published writer having been published in several legal publications including the Los Angeles Daily Journal legal newspaper, the Beverly Hills Bar Journal (where he served as editor) and the American Bar Association Student Lawyer.*

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Treatment Goals: F41.8 Other Specified Anxiety Disorder

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<http://cristinamagalhaesphd.blogspot.com/p/about.html>

**SHANI HABIBI, PhD**

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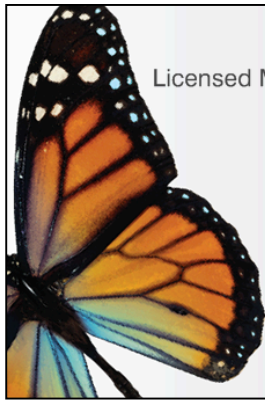
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## Silver Lake Psychotherapy

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[www.silverlakepsych.com](http://www.silverlakepsych.com)

A little bit about some of our LGBT affirmative staff members:

**Justin Shubert, Psy.D., Founder.**

Justin is a Clinical Associate at the New Center for Psychoanalysis and founder of Silver Lake Psychotherapy. He completed his doctoral project on "Affirmative Psychotherapy with Gay and Lesbian Clients" and has been both a trainee and a supervisor at The LA LGBT Center. Justin sees a variety of clients at his private practice in Silver Lake.

**Tom Suberman, MD, Psychiatrist.**

Tom completed his Medical Training at UPenn and is currently in fellowship at UCLA. He offers compassionate psychiatric care to those in the community and is especially sensitive to issues LGBTQ patients face.

**Anais Plasketes, MFT-Intern.**

Anais Plasketes graduated from Antioch's LGBT-Specialization program in 2014. She trained at the COLORS LGBTQ Youth Counseling Center and at the Lifeworks program at the LA LGBT Center. Anais is building her private practice and enjoys working with LGBTQ youth.

## FINDING FREEDOM CONFERENCE BOOTH

For the second year in a row, LAGPA hosted a booth at the Finding Freedom Conference in Palm Springs conducted by Michael's House recovery. The four-day event attracts many from all over the U.S. This year, board member Orlando Alvarez and Travis Stobbe worked the booth and spoke with many attendees about the mission and services of LAGPA. It is a great event that we expect to continue supporting for years to come. Perhaps you would like to volunteer to help next year? LAGPA paid for travel and hotel expenses.



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## SACRAMENTO “RISE” CONFERENCE BOOTH

LAGPA sponsored a booth at the May 25-28 “RISE” LGBTQI Addiction Symposium held in Sacramento. Travis made the trip to staff the booth. Large turn out and Travis made many important connections.





## GAY MALE-THEMED MOVIE NIGHT – “Moonlight”

In April, Chuck opened his home to host another movie. About nine people showed up and shared their favorite dishes for the pot-luck. We watched “Moonlight” on Chuck’s 8’x6’ video screen. Lots of fun and good conversation.











## LESBIAN-THEMED MOVIE NIGHT – “Reaching for the Moon”

In May, Chuck opened his home to host another movie. About eight people showed up and shared their favorite dishes for the pot-luck. We watched “Reaching for the Moon” on Chuck’s 8’x6’ video screen. Lots of fun and good conversation. Hope to see you at the Summer Social on August 12.



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Join us for stimulating monthly public meetings of the Uranian Psychoanalytic Club at Plummer Park in West Hollywood to learn more about the affirmative practice of gay-centered inner work and the Institute's Uranian Psychoanalytic Self-Development Training Program.

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in support of the **Lesbian & Gay Psychotherapy Association** as we celebrate **25 years** of working with the **LGBTQ+** community. For details of the work of LAGPA, see [www.lagpa.org](http://www.lagpa.org)

*Love donations are requested for the music, the original art and prints created by Isabelle and Corinna plus Soul Collage ® Card readings by Mary Guillermín. Please give generously to support the work of LAGPA as our clients and our own lives are under attack from the new administration. Now is the time to support Lesbian & Gay organizations!*

**\*\*Donations split 50/50 w. LAGPA & Cousin Kate\*\***

**Cousin Kate** is MAP – melodic alternative pop music with positive lyrics. Based in Los Angeles, the band consists of twin sisters and vocalists, Corinna and Isabelle Cott and guitarist Brian Florian. The band began when Corinna met Brian in Seattle and the two of them were inspired to write music together. When Isabelle joined the duo, their name became Cousin Kate.

The band is currently recording their second album, “Can You Imagine”. The title song, as well as their first album, “Life Without Fear” is available on iTunes and Amazon. They have a catalog of over 100 songs – you can find some of their songs on [Youtube](https://www.youtube.com/channel/UCv8v8v8v8v8v8v8v8v8v8v8).

Cousin Kate believes in the connection of everything, and their intent is to bring greater happiness and love to this world with their music, their lyrics and their presence.

**Bonus Events: A Silent Auction of the Twin’s Art & Prints plus [SoulCollage](#) ® Card Readings by Mary Guillermín**



The Sun Temple is set under a canopy of oak trees that remains cool in hot sun. Within its walls, Isabelle & Corinna will display their beautiful art in a Silent Auction. Wicker seating, folding chairs and cushions are available for seating.

**General Inquiries to: [Mary Guillermín ph \(310\) 422 7915](tel:(310)4227915) or email: [sunmoonretreatcenter.com](mailto:sunmoonretreatcenter.com)**

**Band inquiries to Isabelle @ [is4happiness@gmail.com](mailto:is4happiness@gmail.com)**

Press Release June 2017  
For Immediate Release

22<sup>nd</sup> Annual LGBTQI Psychotherapy Conference

The Lesbian and Gay Psychotherapy Association of Southern California, Inc. (LAGPA) announces its Twenty-Second Annual LGBTQI Psychotherapy Conference. The conference is a one-day event co-hosted and co-sponsored by Mount Saint Mary's University. The conference is being held Sunday November 12, 2017 in Los Angeles and presents academic research and expertise on LGBTQI issues and concerns to professionals working with these clients in their counseling practices. The conference is designed to meet the educational needs of psychiatrists, psychologists, LCSW, LMFT, MSW, interns, and students of psychology, and earns continuing education credits from APA. Approximately 130 professionals are expected to attend.

This year is LAGPA's 25th Anniversary since its inception in 1992. To honor that achievement Lorri L. Jean will be the keynote speaker. Jean is nationally recognized as one of the most effective leaders in the lesbian, gay, bisexual and transgender ("LGBT") civil rights movement. Jean serves as CEO of the Los Angeles LGBT Center, the world's largest LGBT organization. Previously, Jean served as the Executive Director of the National Gay and Lesbian Task Force. *OUT Magazine* has twice named her one of the 50 most powerful gay people in the nation, *Los Angeles Magazine* named her one of L.A.'s 100 most influential people and in 2014 it named her one of the ten most inspiring women in Los Angeles.

Jean has been an activist on LGBT issues since 1979. She was one of the lead plaintiffs in the successful landmark lawsuit against Georgetown University in the 1980s to prohibit discrimination on the basis of sexual orientation. She also was the first openly LGBT person to receive a top-secret security clearance from the Central Intelligence Agency. In 1989, with her appointment as Deputy Regional Director of the Federal Emergency Management Agency ("FEMA"), she became the highest-ranking openly LGBT person in the Federal government.



**Lorri L. Jean**  
Chief Executive Office  
Los Angeles LGBT Center

While serving at the helm of the Center, Jean has driven a period of unprecedented expansion, increasing revenues from \$8 to \$97 million and the numbers of people served every month to more than 42,000. While running the Task Force, Jean oversaw an organizational turnaround that brought the organization to financial solvency and increased annual revenues to an all-time high.

Jean and her wife of 25 years, attorney Gina M. Calvelli, live in Hollywood. They were legally married in 2008.

Sponsors in prior years include: Sexual Recovery Institute, Elements Behavioral Health, The Institute for Sexual Health, The Trevor Project, Vista Del Mar, PFLAG, Twin Town Treatment Centers, the Los Angeles LGBT Center Mental Health Services, Michael's House, Antioch University, University of Southern California, and many others.

### About LAGPA

The Lesbian and Gay Psychotherapy Association of Southern California, Inc. (LAGPA) was established in 1992 as an organization of mental health professionals interested in the psychological well being of gay, lesbian, bisexual and transgender individuals. This year represents its Silver 25<sup>th</sup> Anniversary. LAGPA provides a wide variety of activities designed to strengthen professional knowledge and competence in the provision of mental health services. LAGPA exists to join mental health professionals together for academic and social events, to provide educational community outreach, and to foster and promote a positive identity for members of the LGBT community. LAGPA events include: academic forums, social events, professional women's events, and the annual LGBTQI Psychotherapy Conference. Members also receive a quarterly newsletter, a membership listing on the LAGPA website and the on-line directory. LAGPA is an accredited provider of continuing education for Clinical Psychologists, Licensed Clinical Social Workers (LCSW), and Licensed Marriage and Family Therapists (LMFT) through the American Psychological Association (APA). For further information, visit our Website at: [www.lagpa.org](http://www.lagpa.org).

### Contact for Further Information:

Chuck Stewart, Ph.D.  
3722 Bagley Ave. #19  
Los Angeles, CA 90034  
310-838-6247  
[LAGPA@sbcglobal.net](mailto:LAGPA@sbcglobal.net)





## **CALL FOR PAPERS / PRESENTERS**

### **22<sup>ND</sup> ANNUAL LGBTQI PSYCHOTHERAPY CONFERENCE**

**Sunday November 12, 2017**

**Sponsored by:**

**Lesbian and Gay Psychotherapy Association of Southern California, Inc. (LAGPA)**

**Co-sponsor and Host:**

**Mount Saint Mary's University**

**Keynote Speaker: TBA**

LAGPA is accepting proposals for our Annual LGBTQI Psychotherapy Conference. The event is being co-sponsored and hosted at Antioch University Los Angeles and the LGBTQ Specialization on Sunday November 12, 2017. The topics must focus on LGBT clients and the knowledge needed by therapists to better serve this population.

Persons who are selected to present at the Conference will receive significant benefits including: half-off full membership rate in LAGPA (a \$70 saving), reduced admission to the Conference (a \$120 saving), and can have his or her business card printed in the Conference Program besides appearing on our website and newsletter for one year.

#### **The workshops need to be LGBTQI related or centered:**

- Relevant to psychological practice, education and science;
- Enable psychologists to keep pace with emerging issues and technologies; and
- Allow psychologists to maintain, develop, and increase competencies in order to improve services to the public and enhance contributions to the profession.

To clarify:

Criterion One: First, the proposal must be relevant to LGBT concerns, and not just have "LGBTQI" tacked on. Proposals **MUST** address LGBTQI concerns. If your workshop does **NOT** adequately address lesbian, gay, bisexual/pansexual, transgender, intersex, and/or queer or questioning psychological issues, please rethink and revise your proposal before submission.

Criterion Two: Next, the proposal needs to offer something of applicable, practical, clinical value to psychologists, psychotherapists, and other clinicians. The APA requires this for all CE providers.

#### **Submission Guidelines:**

Please follow our simplified, 2-Step Application Process.

Step 1 — Submit Workshop Concept Application. The purpose of the Workshop Concept Application is to briefly describe the scope of the intended workshop. If the Application Review Committee deems the concept to be appropriate for the Conference, then the presenter(s) will be asked to submit an application that fully conforms to APA standards. The Workshop Concept

Application is intended to facilitate your creative process. You can give us the essence of your idea(s). If we like it, you can then devote much more time to develop it into a full application.

**Workshop Concept Application (not more than one page in length). Due Date: July 15, 2017**

- Title of Workshop (Approximately 15 words or less)
- Abstract (Approximately 75 words or less)
- Presenter(s) (list names, titles, and brief bio of not more than 3 sentences each)

Please attach a Word document to an email and send to Robbert Schalekamp, co-president, at [RobbertJanSchalekamp@msn.com](mailto:RobbertJanSchalekamp@msn.com). On the subject line, write: *Workshop Concept Application*.

Step 2 — If your Workshop Concept Application is accepted, the complete application form and instructions will be sent to you. You will have one month to complete the full application. **Due Date is October 1, 2017.**

If you require assistance or clarification please contact Chuck Stewart, Ph.D. at:

[lagpa@sbcglobal.net](mailto:lagpa@sbcglobal.net)

If you need additional applications, visit our website at [www.lagpa.org](http://www.lagpa.org).

**Some workshops given at previous LAGPA Conferences include:**

- Intersections and Clinical Concerns: Trans\*, Gender, Sexuality, and You. Yes, You!
- From Chaos to Clarity: Taking Charge of ADHD in the LGBT community
- Archetypal personality patterns in heterosexual and gay male couples: masculine, feminine, puer, senex, and shadow traits.
- LGBTQ youth today, where do we stand? Honoring the memory of Lawrence King.
- Eroticism, Shame, and the Lesbian Search for Self
- Our Changing View of Gay men's Lives: A New Model of Psychosocial Development Across the Lifespan
- Abandoned sacred locations: Exploring the role of Lesbian and Gay myth in clinical practice
- The Experience of Lesbian Co-Mothering
- Transsexual, Transgender & Gender Variant: Issues in Contemporary Clinical Psychology
- Psychotherapy with Gays and Lesbians From Iran
- Crystal Meth, HIV Risk, and Gay Men: A Harm Reduction Approach
- LGB/T Elder Therapeutic Concerns: Myths and Stereotypes, Treatment, and Psychosocial Wellness
- Bisexual Identity Congruence: Why Bisexuality is Not Only Legitimate and Healthy, But Possibly the Majority
- Demystifying "Lesbian Bed Death"
- Intersections: Intersex, Transgender, and Gender Community Health

**LAGPA TWENTY-SECOND ANNUAL LGBTQI PSYCHOTHERAPY CONFERENCE**

Co-hosted by Mount Saint Mary's University

Sunday, November 12, 2017

Mount Saint Mary's University, 12001 Chalon Rd, Los Angeles, CA 90049

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- Name recognition and/or logo (when appropriate) as Co-Sponsor on all Conference publications, press releases, and advertising.
- May make a 15-minute speech during the luncheon break and Keynote Speech.
- Display/vendor table at the Conference.
- Full-page size advertisement in the *Conference Brochure* and *Conference Program*.
- Listed as sponsor on website.
- Free Banner Ad on website (may rotate with other banner ads)

\_\_\_\_\_ **\$ 1700, Conference Brochure and Conference Program Sponsor:**

- Name and/or logo displayed on the front page of the *Conference Brochure* and *Conference Program*.
- May make a 5-minute speech just after the Keynote Speech.
- Display/vendor table at the Conference.
- Half-page size advertisement in the *Conference Brochure* and *Conference Program*.
- Free Banner Ad on website (may rotate with other banner ads)

\_\_\_\_\_ **\$ 900, Keynote Address Sponsor:**

- The Keynote Address Sponsor will be recognized during the introduction of the keynote speaker.
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- Reduced rate for Banner Ad on website

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- Display/vendor table at the Conference.
- Business card size advertisement in the *Conference Brochure* and *Conference Program*.
- Reduced rate for Banner Ad on website.

	<b>Corporate Table Sponsor or Vendor</b>	<b>Keynote Address Sponsor</b>	<b>Brochure or Program Sponsor</b>	<b>Conference Co-Sponsor</b>
<b>Display Table at Conference</b>	✓	✓	✓	✓
<b>Banner Ad on LAGPA Website</b>	✓ Reduced Rate	✓ Reduced Rate	✓ Free	✓ Free
<b>Display Ad in Conference Brochure and Conference Program</b>	✓ Business Card Size Ad	✓ Quarter- page Size Ad	✓ Half-page Size Ad	✓ Full-page Size Ad
<b>Presentation During Luncheon Break and Keynote Speech</b>		✓ Right to place marketing materials at all lunch tables	✓ 5-minute speech to entire conference	✓ 15-minute speech to entire conference
<b>Name Recognition and/or Logo as Co-Sponsor on all Conference publications, press release, and advertising besides Website.</b>				✓

(OVER)



**NOTES:**

- There may be multiple sponsors at each level.
- On the day of the conference, we hold a raffle game to drive conference attendees to your booth. You are welcome to donate items or services to include in the raffle. Just let Chuck know what you want to include.
- Please include, where available, camera-ready images of corporate logos for printing on recognition materials. The files should be emailed to Chuck Stewart—  
LAGPA@sbcglobal.net— in jpg, png, pdf, tiff, Word, or Photoshop format.
- Advertising mechanical specifications (may be submitted in full color at no additional charge):  
Mechanical Information (w x h):
  - Full Page— 7.5(w)“x10(h)“
  - ½ Page (h)—7.5(w)“x4.95(h)“
  - ½ page (v) — 3.7(w)“x10(h)“
  - ¼ page — 3.7(w)“x4.95(h)“
  - Business Card — 3(w)“x2.5(h)“
- If you are unable to provide an on-site representative to staff a sponsorship table, please contact Chuck Stewart to discuss arrangements for display on the Community Table.
- For those obtaining a Banner Ad, please contact Chuck Stewart directly for details.

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**Ad Copy is due August 15.** Full payment is required by October 30. Advertisement requests received after July 1 will be only included in the *Conference Program* distributed to all conference attendees.

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**PAYMENT**

**CHECK:** \$ \_\_\_\_\_ made payable to: LAGPA  
**OR**

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Mail form, checks, and camera-ready copy to:

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LAGPA Executive Director  
3722 Bagley Ave. #19  
Los Angeles, CA 90034-4113

You may also email ad copy to  
LAGPA@sbcglobal.net. If you are  
using credit card payment method,  
you may fax to 310-838-6247 or  
send email to  
LAGPA@sbcglobal.net.

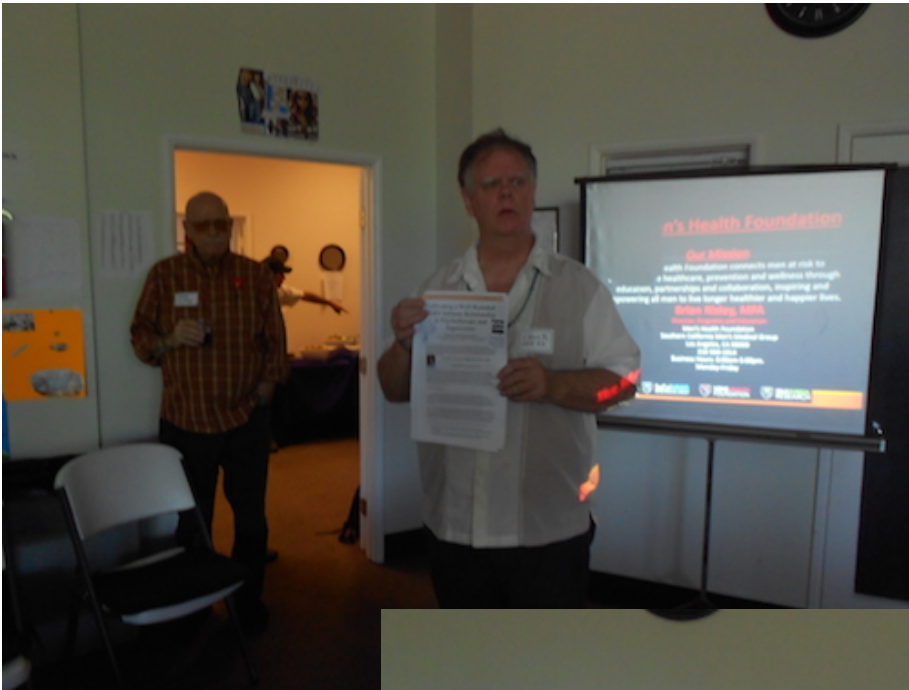
For additional information, call  
Chuck Stewart at 310-838-6247

Thank you for your generous support of LAGPA's Annual LGBTQI Psychotherapy Conference. Although LAGPA is a not-for profit corporation, contributions are not tax deductible. Under certain circumstances sponsorships may be eligible for deduction as a business expense. Please consult with a tax specialist to determine eligibility.

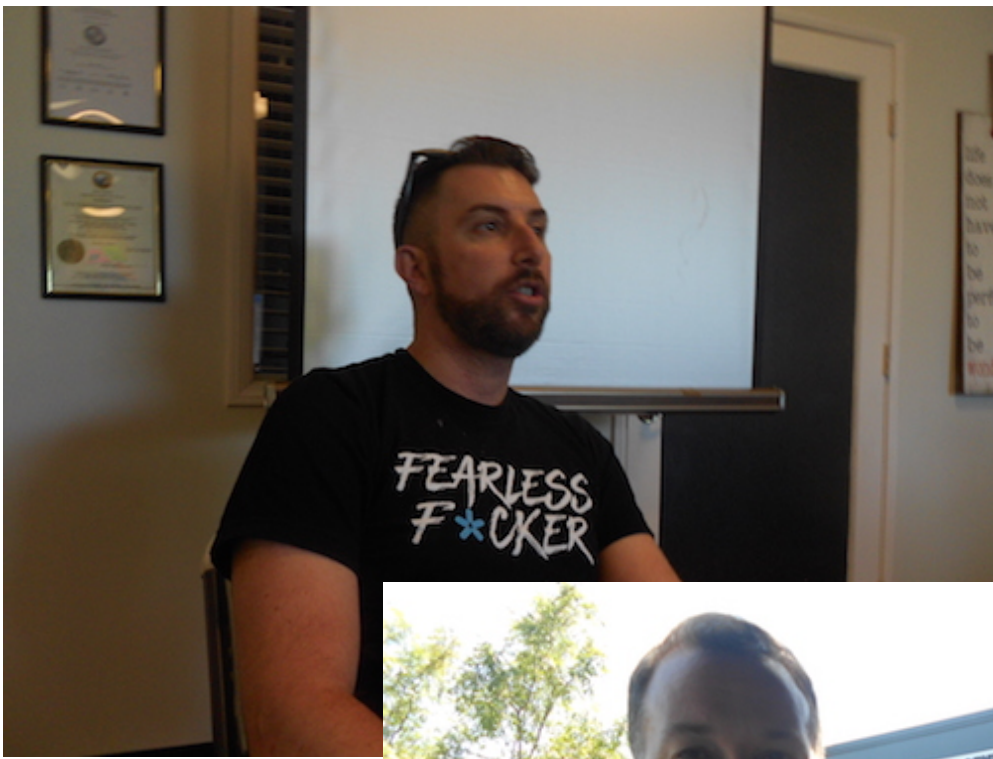
Mount Saint Mary's University, 12001 Chalon Rd, Los Angeles, CA 90049

## EDUCATIONAL FORMS 2017 — PrEP/PEP

This workshop brought together experts in the field to inform you about the medical research concerning PrEP and PEP besides explore the recommendations of mental health professionals and therapists who have first hand knowledge and experience dealing with LGBT clients. Moderated by LAGPA board member Fred Wilkey, Ed.D., respected therapist with a private practice in West Hollywood. Gilead sponsored the lunch (catered by Eddie Morgado) and hosted by Twin Town Treatment Center on Sunday April 30. Three CE credits were available through the APA. Almost thirty people attended.















# Neurofeedback

*Calm the Brain ~ Reach the Mind*

## Neurofeedback in a Clinical Practice

*4-day Hands-on Course*

**Ed Hamlin, Ph.D., BCN**

**Mary Ammerman, Psy.D., BCN**

"For psychotherapists interested in learning how to do neurofeedback training, the courses taught by Dr. Hamlin offer scope, depth, and hands-on training. **Highly recommended.**"

**Sebern Fisher** author of *Neurofeedback in the Treatment of Developmental Trauma*

**Contact:** [training@eeger.com](mailto:training@eeger.com) ~ 800-789-3456

EEG Education & Research (EEGER) is approved by the American Psychological Association to sponsor continuing education for psychologists. EEGER maintains responsibility for this program and its content.



*We love that they've served the LGBTQ community for decades.*



*My insurance helped pay for treatment.*



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For more information, contact Clinical Outreach Manager, Joelle Jacobson, MA, LMFT, PPS, at **310-922-5072** or **JJacobson@HazeldenBettyFord.org**.

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## Relational Psychotherapy

### XVI

#### Neuropsychology and the Unconscious: Integrating Brain and Mind in Psychotherapy

##### Instructor:

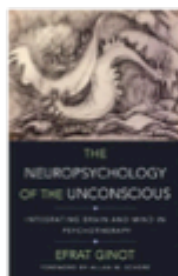
Third Monday  
Third Tuesday  
Third Thursday

Lawrence E. Hedges, Ph.D., Psy.D., ABPP

11:45-1:15  
10:30-12:00  
11:00-12:30

8-month Advanced Reading and Discussion Seminar—October 2016 through May 2017

Tuition for the year (12 hours of continuing education credit) is \$375 to be paid in 3 installments of \$125. **Early Bird fee of \$325 due by September 1, 2016**



**Text:** Ginot, E. (2015). *The Neuropsychology of the Unconscious: Integrating Brain and Mind in Psychotherapy*. New York: W. W. Norton & Company. (Norton Series on Interpersonal Neurobiology).

##### Course Description:

More than one hundred years after Freud began publishing some of his seminal theories, the concept of the unconscious still occupies a central position in many theoretical frameworks and clinical approaches. When trying to understand clients' internal and interpersonal struggles it is almost inconceivable not to look for unconscious motivation, conflicts, and relational patterns. Clinicians also consider it a breakthrough to recognize how our own unconscious patterns have interacted with those of our clients.

Although clinicians use concepts such as the unconscious and dissociation, in actuality many do not take into account the newly emerging neuropsychological attributes of nonconscious processes. As a result, assumptions and lack of clarity overtake information that can become central in our clinical work. This revolutionary course presents a new model of the unconscious, one that is continuing to emerge from the integration of neuropsychological research with clinical experience.

Drawing from clinical observations of specific therapeutic cases, affect theory, research into cognitive neuroscience and neuropsychological findings, the course will present an expanded picture of nonconscious processes. The model moves from a focus on dissociated affects, behaviors, memories, and the fantasies that are unconsciously created, to viewing unconscious as giving expression to whole patterns of feeling, thinking and behaving, patterns that are so integrated and entrenched as to make them our personality traits.

Topics to be covered include: the centrality of subcortical regions, automaticity, repetition, and biased memory systems; role of the amygdala and its sensitivity to fears in shaping and coloring unconscious self-systems; self-narratives; therapeutic enactments; therapeutic resistance; defensive systems and narcissism; therapeutic approaches designed to utilize some of the new understandings regarding unconscious processes and their interaction with higher level conscious ones embedded in the prefrontal cortex.

Larry Hedges, Ph.D., Psy.D., ABPP., began seeing patients in 1966 and completed his training in child psychoanalysis in 1973. Since that time his primary occupation has been training and supervising psychoanalysts and psychotherapists individually and in groups on their most difficult cases. He was the Founding Director of the Newport Psychoanalytic Institute in 1983 where he continues to serve as supervising and training analyst. Throughout his career Dr. Hedges has provided continuing education courses for psychotherapists throughout the United States and abroad. He has consulted or served as expert witness on more than 400 complaints against psychotherapists in 20 states and has published 19 books on various topics of interest to psychoanalysts and psychoanalytic psychotherapists, three of which have received the Grady award. During the 1909 centennial celebrations of The International Psychoanalytic Association his 1992 book, *Interpreting the Countertransference*, was named one of the key contributions in the relational track during the first century of





# TWIN TOWN

## Treatment Centers

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**[www.twintowntreatmentcenters.com](http://www.twintowntreatmentcenters.com)**

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*Sharing best practices in  
supporting the  
LGBTQ community  
with co-occurring disorders*

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Palm Springs, CA 92262

**CALL FOR PRESENTERS**

We encourage the submission of workshop and presentation proposals that strengthen best practices, and bring forward relevant information for best practices in supporting the LGBTQ community with co-occurring disorders. Our intention is to offer a container for discovery and focused discussion to find effective solutions for professionals and their LGBTQ patients. We desire workshops that are research based and are contextually forward thinking.

*Download Application*  
**LGBTQSymposium.com**  
*Deadline April 15th*



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freedom**  
**2017**

For more event details  
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[LGBTQSymposium.com](http://LGBTQSymposium.com)

For more information,  
including sponsorship  
opportunities, please  
contact Renee Baribeau  
at 760-464.2138 or  
[Renee.Baribeau@frnmail.com](mailto:Renee.Baribeau@frnmail.com)



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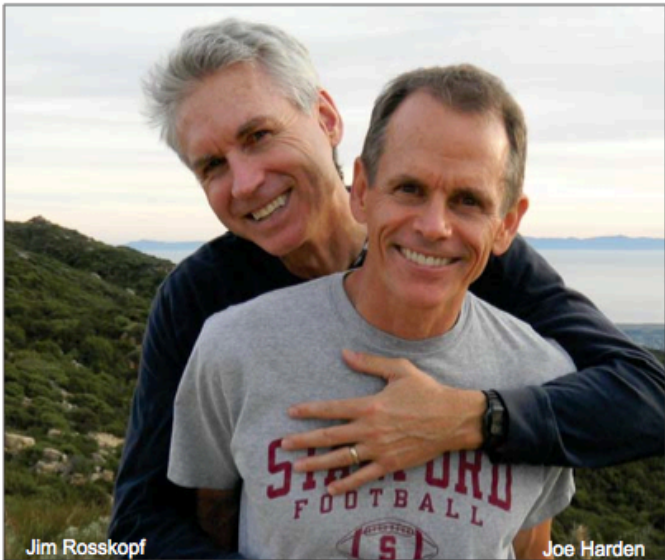
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**Brazil opens doors to adoption  
for gay and lesbian men and women.**

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or email [adoptions@vistadelmar.org](mailto:adoptions@vistadelmar.org)



## CLASSIFIED ADS

The **Classified Section** of the *Progress Notes* allows members and non-members to advertise available therapy services, employment, and office space. This section is **free for members** and \$15 for non-members.

### POLICY FOR MAILING LISTS AND FLYERS

LAGPA does not sell or give out its mailing list (in any form) to any person, group, or organization. If you would like to send an electronic mailing to the membership you must send us the text, graphics, URLs, and any accompanying attachments you wish to send so our Editor, and the rest of our Board may review it. Rates for this type of service are: Members \$125.00 per mailing; Non-Members \$175.00 per mailing. We strongly suggest you place an ad in the *Progress Notes* rather than create a separate mailing. Members may bring flyers to LAGPA events and place them on tables where participants can pick them up.

The Board reserves the right to refuse to e-mail, include in the *Progress Notes*, or display any material it deems inappropriate or offensive to its membership, or in direct conflict/opposition to the purpose/ mission statement of the organization. For more information please contact our Executive Director, Chuck Stewart. The purpose of a newsletter is to provide specialized information to a targeted audience. Newsletters provide a great way to market your product or service, to create credibility, and to build your organization's identity among peers, members, employees, or vendors.

First, determine the audience of the newsletter. This could be anyone who might benefit from the information it contains, for example, employees, or people interested in purchasing a product or requesting your service. You can compile a mailing list from business reply cards, customer information sheets, and business cards collected at trade shows, or membership lists.

Next, establish how much time and money you can spend on your newsletter. These factors will help determine how frequently you publish your newsletter and its length. You should publish your newsletter at least quarterly so that it's considered a consistent source of information. Your customers or employees will look forward to its arrival. ▼

### Article Submission

Your articles are welcomed and solicited, and will be published on a space available basis. Please send a copy of your articles by email, to [LAGPA@sbcglobal.net](mailto:LAGPA@sbcglobal.net) This newsletter is emailed to over 600 current and past members. PN is published 3 times a year—Jan or Feb, June or July, October or November. Advertising and articles are due three weeks before publication. Contact us for dates.

### Classified Advertisement Rates

Members FREE

Non-member \$15.00

### Display Advertisement Rates

<u>Size</u>	<u>Member</u>	<u>Non-mem.</u>
1/8 page or business card	\$20.00	\$30.00
1/4 page	\$40.00	\$50.00
1/2 page	\$70.00	\$90.00
Full page	\$90.00	\$125.00

This includes business cards, advertisement for upcoming events you are producing, personal promotion, or anything that you may want members to be aware of.

### Mechanicals

<u>Size</u>	
Business Card	3.5"w x 2"h
Horizontal eighth-page	3.7"w x 2.37"h
Vertical eighth-page	1.82"w x 4.8"h
Horizontal quarter-page	7.5"w x 2.4"h
Vertical quarter-page	3.7"w x 4.8"h
Horizontal half-page	7.5"w x 4.8"h
Vertical half-page	3.7" w x 9.75"h
Full page	7.5" w x 9.75"h

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Learn how it is possible to have your student loans discharged through bankruptcy or other means.

This book is now available for **FREE** as a pdf download from the website.

## THERAPY

### Group

Gay Men's Mastermind Career Support Group for support professional dreams and goals. Held on Monday evenings, 6:00-7:30 p.m., fee slides from \$50 to \$65. Approximately 25-45 age range, but flexible. Intake interview by phone required. Group is in progress. Call 310-726-4357, or email [Ken@GayTherapyLA.com](mailto:Ken@GayTherapyLA.com).

### Affirmative Therapy in West Los Angeles

Dr. Lani Chin is now accepting new clients in Westwood. Dr. Chin has worked with various members of the Gay, Lesbian, Bisexual, and Transgender community specializing in affirmative therapy for the treatment of anxiety, depression, substance abuse and anger management. Dr. Chin works with both individuals and couples. Dr. Chin has also added an intern to her practice that is available to offer services on a sliding scale basis. Lani Chin, Psy.D.

Licensed Clinical Psychologist PSY 24971  
1328 Westwood Blvd., Unit 9  
Los Angeles, CA 90024  
310-344-5550  
[www.drlanichin.com](http://www.drlanichin.com)

### Westside Men's Psychotherapy Group

Westside Men's Psychotherapy  
Group meets Wednesdays 7-8:30pm near Westside Pavilion. Established interpersonal process group with a current opening. Contact Andrew Susskind, LCSW, SEP, CGP for more details. 310-281-8681 or [andrew@westsidetherapist.com](mailto:andrew@westsidetherapist.com).

### Community Event @ the SunMoon Retreat, Topanga

Sunday afternoon, from 2pm to 5pm on January 22: "An Inauguration Wake". Meet up Irish-style for grief, jokes and chatter. An event for the LGBT community and Topanga locals. Contact Mary Guillermin for directions at 310 422 6497 or [thefemininityproject@gmail.com](mailto:thefemininityproject@gmail.com)

### SunMoon Retreat Workshops in January & February:

Both workshops offer a chance to heal from election pain.

Jan 28 & 29: **Dancing out of the Darkness, Into the Light.** Women only. Learn two ancient dances with internationally-renowned dancer, percussionist and healer, Alessandra Belloni and discover how your Solar & Lunar nature can help you with Mary Guillermin, LMFT.

February 10 (eve), 11 & 12: **Courage: The Process of Adapting to Hard Change.** Led by Peter Fleming, Director, Pellin Institute International. Follow up workshop in June on **Hope**. Inquiries, contact Mary Guillermin, details above.

## EMPLOYMENT and INTERNSHIP

### Intern

Paid private practice weekend internship opportunity offered to qualified Associate Clinical Social Worker (ASW) or Marriage and Family Therapist Intern (IMF) for sessions on Saturdays, Sundays, and possibly Monday mornings/afternoons at established office near Beverly Center. Supervisor has 20 years experience as clinical supervisor and is part-time faculty of USC School of Social Work, with over 13 years in full-time private practice and over 25 years clinical experience as a specialist in gay men's and HIV mental health, and men's psychology. Adult population focus only, with mainstream, evidence-based interventions (preferably CBT, DBT, IPT, or psychodynamic). NOTE: Must have existing clients or reliable referral stream. Motivated self-starters only. Supervision and private practice career coaching. 50/50 fee split basis. Available immediately. One opening. Email letter of interest and resume/CV to Ken Howard, LCSW, at [Ken@GayTherapyLA.com](mailto:Ken@GayTherapyLA.com).

### Intern

Private Practice Internship: Part-time, post-graduate position available for MSW associate or MFT intern with fewer than 1500 hours. Saturday hours required. Email CV to Andrew Susskind.  
[andrew@westsidetherapist.com](mailto:andrew@westsidetherapist.com).

### Joining Part-Time Practice

Experienced DMH therapist working with children, adolescents and families interested in joining an existing part time practice somewhere in greater L.A. Brian Garfield, LCSW 310 383 1601.

## BOOKS BY MEMBERS

**Three books by Jeffrey Chernin Ph.D., MFT.** The second edition of Kindle book *Get Closer: A Gay Men's Guide to Intimacy and Relationships*. Also, a Kindle book for non-gay couples, *Achieving Intimacy: How to Find a Loving Relationship that Lasts*. Both books offer ways to have a lasting, loving relationship. The books also offer help to overcome several kinds of challenges, with an emphasis on developing better communication, putting an end to conflicts and emotional distance, and changing long-standing patterns. His first book, *Affirmative Psychotherapy and Counseling for Lesbians and Gay Men* is available in hardcover and paperback and is being used by AAMFT-CA for their LGBT certification program. All are available on Amazon.

## OFFICE SPACE

### Office space in Studio City & West Hollywood

Ideal office set-up for licensed therapists and newly licensed therapists-- especially those who would like to apply for insurance panels or who are on panels. For under \$200 a month, you could have an office in LA. Or, for an additional rate, you could have two offices in LA: one in Studio City and one in West Hollywood! Having two offices is a plus for applying to/being on insurance panels and for always having a conveniently located office in a large city such as Los Angeles. Call Mike Fatula, MFT, at 323-876-8861 for current availability in either or both locations.

#### West Hollywood

- "Stand-Alone" office space (i.e., not a shared waiting room) in quiet garden courtyard of therapists & designers near Cedars-Sinai
- One story building; 24/7 building access and 24/7 AIR
- Windowed, private waiting room; sound-proofing & call-light systems
- Windowed & skylighted private therapy office
- Separate entrance-exit; separate restrooms for clients & therapists
- High vaulted wooden ceilings
- Utilities included with reasonable rent; private, covered, well-lit parking for therapists and clients
- Easy canyon access (Laurel and Coldwater) to San Fernando Valley
- \* Amenities: copier, frig, microwave, tea/coffee service

#### San Fernando Valley

- "On the Boulevard" office space -- Ventura Blvd near Laurel Canyon in Studio City
- \* Easy canyon access (Laurel and Coldwater canyons) and freeway access (101/134/170) to West Hollywood, Hollywood, Silverlake, Glendale, Pasadena, and the rest of the San Fernando Valley
- \* 2nd. Floor of 2-story building
- \* Waiting room in counseling suite shared only by 2 other therapists; call light system
- \* 24/7 building access and 24/7 AIR
- \* Reserved, well-lit parking for therapists & ample street parking for clients

\* Utilities included with reasonable rent

\* Amenities: copier, frig, microwave, tea/coffee service

#### • Near Beverly Center

Furnished office space available weekday mornings and Saturdays and Sundays in a 3-office suite on San Vicente near Beverly Center. \$20 per hour. No separate exit or call-light system, but good parking situation, 7-day air conditioning, and convenient location to Westside, Beverly Hills, Mid-Wilshire, and West Hollywood. Bright and light (windowed). Email Ken at Ken@GayTherapyLA.com for more information.

#### West Hollywood

As of June 1, 2017, we will have several office vacancies available for psychotherapists looking to rent office space in our very established psychotherapy office suite. Our suite is located at 8235 Santa Monica Boulevard in West Hollywood. We have several different offices available, at different times of the day and different days of the week. We are on the 4th floor and most offices have a south facing city view. Rates are based on blocks of time (i.e. 8am-4pm or 4pm-10pm) and discounts apply for full days (8am-10pm) or multiple days in the week. The basic rent for one block of time for a month (i.e. Wednesday from 8am-4pm for an entire month) is \$200 and discounts apply for any additional time rented. The rent includes the office, copy/fax, wifi, a mailbox, office supplies etc. For specific availability or to schedule a visit, please call Brad Chabin, Ph.D. at 323-369-8838.

#### Community Event @ the SunMoon Retreat, Topanga

Please support LAGPA by attending a Concert and Fundraiser at the SunMoon Retreat Center, 20845 Cheney Dr in Topanga. Come and enjoy connecting with Topanga locals and the gay community as we listen to the "melodic alternative pop" music of Cousin Kate outside under the oak trees of the Sun Temple. Love donations shared with LAGPA and Cousin Kate. The afternoon includes three sets of music, including a solo by Brian Florian, the opportunity to purchase original art or prints by the twin sister vocalists, Isabelle and Corinne Cott and SunMoon SoulCollage® Card Readings by Mary Guillermin (by donation).



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**Progress Notes**

A tri-annual publication of the Lesbian and Gay Psychotherapy Association of Southern California, Inc., an organization dedicated to the promotion of lesbian, gay, bisexual, and transgender psychology, by supporting and serving the mental health professionals who work within the lesbian, gay, bisexual, and transgender community.

Spring/Summer, 2016 - 2017

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