

WORKING WITH GAY, LESBIAN, BISEXUAL AND TRANSGENDERED PERSONS

On Friday, June 13th, Jim Foster, MFT and a panel of youth and young adults will be presenting at our RECAMFT meeting. Jim and the panel are all from the local agency Positive Images and they will be sharing real stories about growing up queer. They will be focusing on the needs of young people who are gay, lesbian, bisexual, transgendered, queer, questioning or intersexed. (GLBTQQL.)

After the presentation the attendees will

1. Have a deeper understanding of societal homophobia in the 21st century.
2. Have a more intimate grasp of the Positive Images organization, its mission, vision and commitment to the Sonoma County Community.
3. Know first hand of the constant stressors of growing up queer and of being identified as second class people in today's society.
4. Have a better understanding of what is most helpful and effective in working with this population in therapy.

In January of 1990, Positive Images was created by co-founders Beverlee Laird and Jim Foster to address the need for educating and supporting the positive youth

development of gay, lesbian, and bisexual young people in an era where none previously existed. Since 1990 Positive Images has served over 1100 queer-identified youth and young adults from Sonoma and surrounding counties. As they have grown, Positive Images has expended its educational and supportive services to include the full range of gender and sexual identities that youth explore and express. In 1999 Nancy Vogl joined Jim Foster in leading the organization.

June 6th, 2008

Attachment in Psychotherapy Workshop

David J. Wallin, Ph.D.

Mary Agatha Furth Center in Windsor

8400 Old Redwood Hwy.

WWW.CEUREGISTRATION.COM

707.566.7474 for registration information



June 13th RECAMFT Meeting

10:30 - 11:00 social & sign in

11:00 - 1:00 meeting

Working with Gay, Lesbian, Bisexual & Transgendered Persons

James Foster, MFT & Panel from Positive Images

Odd Fellows Temple/ Mercer Hall, 545 Pacific Avenue, Santa Rosa

Positive Images began giving panel presentations the spring of 1990, initially serving as a resource for high-school communication and survival skills classes. As community awareness about issues affecting LGBTQI youth has grown, so has the demand for broader and deeper education regarding this population's needs.

From 1970-1983 Jim Foster was a special education teacher, working with elementary and high school students in a wide variety of settings. He received his MA in Psychology at USF in 1983 and was licensed as an MFT in 1986. In 1983 he also obtained an advanced degree in the Reiki Method of Natural Healing. In the 1980s Jim worked as a consultant for the Shanti Project in San Francisco and for Face to Face in Guerneville, programs working with AIDs and HIV. Besides co-directing Positive Images, Jim currently has a private practice in Santa Rosa.

Join us for this exciting and important presentation. See you there!

President's Message

Kate Maxwell, MFT

I went to Trader Joe's the other day to buy something for a hurried lunch. My choice was packaged sushi. I was really anticipating a delicious convenient treat, but as I ate I began reading the list of ingredients. Oh, my god! The list was huge, and 90% of it was not food, but chemicals. I must admit that I did finish eating my lunch. It wasn't a particularly good sushi and due to the "enhanced" ingredients I vowed not to repeat the experience. It just goes to show, if you want to enjoy fast food, don't read the labels.

So where am I going with this rambling? I'd like to explore with you the topic of ingested chemicals: what is commonly referred to as drugs, sweeteners, preservatives, etc.

As clinicians, we are concerned about drug (chemical) interactions when we look at a long list of prescription drugs our clients may be taking and we know that prescribing doctors rarely talk to one another. In addition, you need a specially trained pharmacist to evaluate the mix.

I recently attended a presentation given by Steven Rubin, MD, a geriatric psychiatrist from Reno, Nevada, who specializes in the effects of drug interactions in the elderly population (they are as sensitive to drugs as children are). According to Dr. Rubin, the frequent result of a commonly constructed drug cocktail is the appearance of dementia-like symptoms. He informed us that when you put 4 over-the-counter or prescription drugs together you get a 50% chance of problematic drug interactions and if you have 6 or more of these drugs the likelihood of a problem is 100%.

So how many drugs are you on? How about your parents? And of course we can't leave out your clients. Do you work with children who have been prescribed a

cocktail of drugs that have not even been tested on children? Are you working with older adults who are showing some beginning signs of dementia and are taking an unbelievable number of prescription drugs-- drugs for sleep and drugs for the side effects of drugs and for the side effects of those drugs?

Do you have any clients with restless leg syndrome? According to Dr. Rubin, this is linked to sleep apnea. Do the drugs for restless leg syndrome address sleep apnea? No. He also stated that misdiagnosis in the elderly resulted in prescriptions which could depress breathing (sleep apnea) compounding many problems and further leading to dementia-like symptoms.

Aricept was one of the drugs Dr. Rubin mentioned as frequently prescribed for Alzheimer's and as "having horrific side effects." He stated that in 33% of the cases where a doctor is prescribing Aricept they are also prescribing drugs for incontinence and the combination of just these two drugs results in a major decline in functioning. So I got curious and did a little web-surfing regarding Aricept. I found that Aricept has resulted in a reported 11 deaths in the test group and none in the control group. Here is a link you might find interesting if you would like to explore further:

<http://www.yourlawyer.com/articles/read/14345>.

Dr Rubin also informed us that recent findings indicate that long-term use of Prozac can result in tardive dyskinesia. There's a little known development that Eli Lilly would not appreciate. I did check on the internet and I could find no link between Prozac and tardive dyskinesia. Well, time will tell. Unfortunately a lot of people are damaged in the time it takes for drug side effects or drug interactions to become evident.

We can appreciate the possibility of the huge impact that drugs can have on the human body and psyche as we mix and match them. But how much attention is given to the mix of medicinal chemicals and food additives (chemicals)? There is some awareness, as I found out when I had a brief encounter with Coumadin, a blood thinner (rat poison). I was informed that I could not take certain vitamins or eat certain foods so I know that some of the interactions have been identified. But what about all the chemical additives in a single prepared “food” item, or in a typical breakfast cereal? Do you get up in the morning, reach for the synthetic sugar for your coffee, and follow it with a non-dairy (synthetic/chemical) creamer? Perhaps you follow that with a “fortified” breakfast cereal. Of course the list can go on and on with few clues to the mini interactions taking place within our body.

Then there is my personal favorite: sugar in all its forms and derivations. Cane sugar is highly processed to yield the beautiful white sparkling crystals and corn syrup is now unavoidable in most all prepared foods and drinks. Let’s consider the human body, which until one or two generations ago rarely experienced a sugar hit such as we can provide today. For thousands of generations we had simple diets which required time to digest, time to gradually raise blood sugar. We “ate” fruit; we did not “drink” fruit juices. Now within a couple of minutes we can overwhelm our system with sugar and require our liver to go into hyper drive to store the excess sugar before we go into a coma. This emergency action by the liver often lowers the blood sugar level below normal resulting in a depression of body and psychic energy resulting in a craving for more sugar.

In 1999 the Center for Science in the Public Interest petitioned the FDA to set a maximum recommended daily intake (Daily Value) for added sugars and require labels to disclose the percentage of the Daily Value a food provides. The cited article stated “the USDA advises people who eat a 2,000-calorie healthful diet to try to limit themselves to about 10 teaspoons of added sugars per day. ...Most teenage males do not eat a healthful diet, because they consume an average of 34 teaspoons of sugar per day.” For more information go to: <http://www.cspinet.org/new/sugar.html>.

If you are interested in an alternative/naturopathic view (to which it may be obvious that I subscribe) on the effect of food additives on children with ADHD go to: <http://www.adhdezine.com/Pigneguy.html>. Then for more information go to: <http://www.naturalnews.com/022068.html> for the complete article referencing a study published in the UK in 2006:

“In a landmark study published in *The Lancet*, commonly used artificial food colorings and the preservative sodium benzoate have been

strongly linked to hyperactivity in children, triggering renewed vigor in the decades-long campaign by activists to ban artificial food additives from food marketed to children. ‘We now have clear evidence that mixtures of certain food colours and benzoate preservative can adversely influence the behaviour of children.’ said Dr. Jim Stevenson, lead author of the study.”

Then back to the subject of sugar, in 2007 there was some very interesting research out of Norway: Norwegian research published in the *American Journal of Public Health* has found that teens in Norway who drank the highest amounts of sugary sodas experienced higher rates of mental disorders such as hyperactivity and distress.

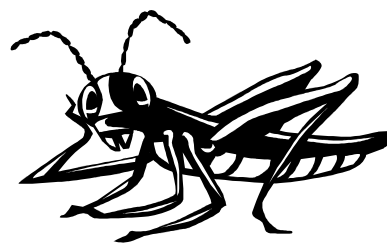
Researchers from the University of Oslo surveyed more than 5,000 Norwegian 15- and 16-year-olds on their soda consumption habits, then questioned them on mental health, including questions on hyperactivity and distress. The researchers found that the teens with the most [mental health](#) problems were the [teens](#) who reported the highest sugary [soda](#) consumption.

"There was a strong association between [soft drink consumption](#) and mental health problems among Oslo 10th graders," the researchers' report stated. "This association remained significant after adjustment for social, behavioral and food-related disorders." <http://www.NaturalNews.com/020585.html>.

The subject of sweeteners has been in the public eye for several years and our clients may be open to exploring the impact that sweeteners have on their psychological as well as physical wellbeing. I believe the place to begin is with self observation, education and discussion.

Drugs, food additives and sugar: I hope I have peaked your curiosity.

Kate Maxwell is in private practice at the Erickson Institute in Santa Rosa and can be reached at 237-8900.



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June 5150

Have you been trying to get yourself organized, but don't know where to start? Here's your chance. The June 5150 prize is being donated by Jeannie VandeWeg, the owner of *All Squared Away Organizing*. Jeannie helps clients organize their homes and offices with style. "They learn that getting organized is not only fun, but life changing." She is donating up to two hours of Home Consultation, which includes a "Home Organizing Plan of Action" to direct you in your challenges. She is featured weekly on 92.9 F.M. with an organizing tip of the week. She also teaches a class at the SRJC (Community Education Department) called "Organize your Home – Strategies for Streamlining". Her next class is June 24, 2008. You can check out more on her website – www.allsquaredawayorganizing.com or call her directly at (707) 829-1282. (Many thanks to Jeannie for her generosity.)

"It's not about getting rid of everything. It's about making room for the truly important things in life".

The 5150 Raffle is held every month at the RECAMFT general meeting. All attendees are eligible to win. Winners please contact the person donating the service within 6 weeks. Feel free to pass

the prize to someone else if you are not able to take advantage of the offering. If anyone has ideas about people who might be interested in donating future 5150 prizes, please contact Jan Lowry-Cole at 542-7987. Enjoy! (For winners of the raffle, please give Jan feedback about the service you receive.)



Referring to an Outdoor or Residential Treatment Program?

Educational consultants, in collaboration with referring mental health professionals, work with families to identify appropriate therapeutic treatment options for struggling students. Bob Casanova is an experienced, licensed marriage and family therapist (MFT) who provides realistic, comprehensive recommendations to Therapeutic Schools, Residential Treatment Centers and Outdoor Therapeutic Treatment Programs for teens and young adults who need help coping with such challenges as:

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- Learning differences
- Social, emotional or psychiatric concerns
- Self harm
- Eating disorders
- School failure or refusal
- Adoption/attachment issues
- Asperger's/PDD/NLD
- Family conflict
- Loss and grief
- Divorce

BOB CASANOVA *Educational Consultant*
and Licensed Marriage & Family Therapist
Affiliated with McClure Mallory & Baron
319 South E Street, Suite A | Santa Rosa, CA 95404
707.526.5800

What You Missed

By Judith Peletz

On Friday, May 9th, Joe Persinger, Ph.D. gave a very interesting talk on Somatic Experiencing. He explained that he first became interested in the topic when he saw the results of a small study done at Kaiser on women who had fibromyalgia but were symptom free. They had a number of things in common such as a healthy life style and a sense of gratitude, but they also had engaged in some type of somatic oriented psychotherapy. Information gained from that study and from reading Waking the Tiger and The Body Bears the Burden led Joe to take trainings in Somatic Experiencing over a three year period. He has since graduated and now assists at SE workshops.

Joe gave us some background information about the sympathetic and parasympathetic responses to trauma. The sympathetic response is the fight/flight response where heart rate and blood pressure increase along with shallow chest breathing. On the other hand, the

parasympathetic dorsal vagal response results in immobilization which can include freezing or collapsing. These responses, fight/flight and freezing, are basic and can be life saving.

Faced with a perceived trauma, the natural response is to stop, scan the environment to locate the threat, assess the situation and then respond. If a major response is required, the animal or person will attempt to fight or flee. If that is not successful, the next response is to freeze. However, there is still a lot of sympathetic energy in the body that needs to be dissipated. After the threat is over, trembling and shaking is the primary way this energy can be discharged. Joe emphasized the importance of allowing people to shake after something like a car accident unless it is counter-indicated by their injuries. Talking and crying also help, but so often we stuff our feelings and dissociate, and the trauma is not resolved.

Unresolved trauma leads to chronic sympathetic activation symptoms which include anxiety, tension, irritability, and a general feeling of not being safe. It also leads to parasympathetic arousal with depressive/dissociative symptoms such as feeling numb, disconnected, and fatigued. Often, there is cycling between the anxiety symptoms and the depression/dissociation symptoms. Joe suggested that many people diagnosed as bipolar actually may be suffering from trauma, particularly if the cycles are rapid and irregular.

It is not hard to imagine that chronic arousal wears the body down and leads to a number of medical conditions such as chronic pain, fibromyalgia, chronic fatigue, irritable bowel syndrome, frequent headaches, insomnia and others. Also, mental health is affected and can be connected to a variety of disorders in addition to Post Traumatic Stress Disorder such as mood disorders, other anxiety disorders, substance abuse, dissociative disorders, etc.

Somatic Experiencing is a treatment where the focus is on body awareness. It teaches people to pay attention to their somatic experience. The body leads the way in this treatment. The goal is to regulate the automatic nervous system by discharging blocked energy. As Joe put it, "If you pay attention to the soft voice of your body, then it won't have to shout!" Basic body awareness and mindful acceptance of what we're experiencing goes a long way towards resolving blocked trauma response.

Joe led us through a number of exercises. One was the body scan exercise where you move your attention through the body and notice any sensations such as

pressure, warmth, coolness, tingling, numbness, heaviness, etc. Also, one particular sensation can be tracked for several moments to see if it changes. Joe labeled these methods as focusing and tracking.

A second exercise illustrated pendulation. Joe had us focus on a part of the body that felt comfortable and another part that was not. By moving our attention from one area to the other, the less comfortable part frequently became more comfortable. This exercise helps the nervous system to move between states of charge and discharge.

Resourcing helps people notice positive body states. Dissociation impairs our ability to feel pleasure as well as feel pain. Joe had us practice deep breathing and then had us remember something we enjoyed experiencing recently. He had us recall something pleasing that we heard, something we ate or drank, and something that felt good on our skin. After each memory, we breathed out a "Thank you."

Titration is a way of working with trauma without flooding or re-traumatization. Small amounts of energy can be discharged by recalling details related to the trauma out of sequence, beginning with the less intense memories and working toward the crisis moment. Renegotiation of an event is facilitated through imagining a successful outcome. This can also be used after nightmares as well as after a traumatic event. For example, a person can imagine turning around and addressing the person chasing them in a dream by saying, "What is it that you want?" Renegotiation after a car accident might entail thinking of the other car as a giant marshmallow. Renegotiation helps to unfreeze the charge, and the person may experience a rush of tingling sensations.

If a client gets over-activated in a session, Joe uses EMDR. He also suggested a couple of other activities that provide bilateral tactile stimulation. One is having the client stand and stamp their feet. Another one is the butterfly tap. The butterfly tap is alternating taps on the upper arm while hugging oneself.

Joe had much more knowledge to share than could be fitted into the time allotted. However, his handout provided additional information. Furthermore, Joe offered to start a consultation group for people interested in Somatic Experiencing. If interested in learning more, please e-mail Joe at docp@sonic.net.

Thank you, Joe, for a very interesting and practical presentation.

Judith Peletz is in private practice in Santa Rosa and can be reached at 526-7720 ext. 315

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Where Are My Boxes? By Gail Van Buuren

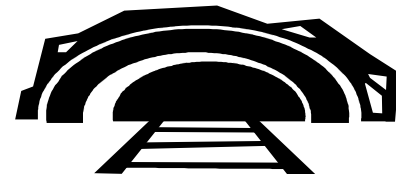
Michael Ventura has an interesting article in the May/June issue of *Psychotherapy Networker* about the changes in Lubbock, Texas between 1973 and now. When he lived there in 1973, "Anglo Saxons, Hispanics, and African Americans didn't mix socially (to state the obvious and put it mildly) and kept to their own neighborhoods." Most restaurants were Texan with a few Mexican, one Chinese and one Italian, there were lots of Christian churches and most everyone spoke with a Texas accent. Thirty-five years later, the accent has faded, food from every culture is available both in restaurants and supermarkets, there is a mosque and a synagogue, and it is not "rare to see people of indeterminate ethnicity in Lubbock - Asian-Hispanic, Middle Eastern-Irish, Euro-Asian, African-Middle Eastern, etc." He points out that "Lubbock, Texas, 1973, would never have agreed to become Lubbock, Texas, 2008. Its changes were and are irresistible." Many in this country are alarmed and disoriented by the changes happening all around them and would stop it if they could. "From about 1930 to about 1980, the question of American identity seemed decided; but history didn't accept that era's definition. History

moved on, though America's self-image lagged (and still lags) far behind our historical reality."

And the problems are not limited to ethnic boxes. He also mentions that "[w]hen millions feel it necessary to pass laws that say marriage is an institution possible only between a man and a woman (something absolutely taken for granted in 1960), then clearly the world will never be 'straight' again" just as it will never be 'white' again. Last Friday our Board met with RECAMFT member Leslie Hanson regarding a conference (more on details about it in a future newsletter) addressing issues around gay, lesbian, bisexual, transgendered, queer, questioning and intersexed people. There are a lot more boxes here than male, female, heterosexual, and homosexual. The culture has had quite a struggle making room for gay and lesbian individuals and continues to do so, but what about those who change sex or choose to embrace their need to be both or to be gender neutral? Some of us may be excited by the freedom of having ethnicities, races, and genders so mixed that it is impossible to find an applicable box to check on standard forms, so we write in our own box - **All of the above** - and joyfully check that. Others may be near panic and calling for the passage of more laws. Many may be so confused and find it so difficult to cope that they simply do not acknowledge the changes. The changes are here nonetheless.

As Ventura points out, "Psychology must greatly extend its boundaries if it's to remain relevant and applicable." We have a great many more variables to contend with now, both culturally, ethnically, and sexually. He ends the article with a strong admonition. "Psychology, as a practice and as an intellectual project, must realize that the monocultural contexts out of which it arose are no more. The psychological parameters of the Jamaican-Jewish-Irish-Iranian married to the Chinese-Lakota-African-Hispanic, with their two Jamaican-Jewish-Irish-Iranian-Chinese-Lakota-African-Hispanic children will be...different. The globally-referenced world they'll inhabit will be utterly different from the Euro American world that produced today's psychology." Psychotherapy as a whole and we as individuals will need to come from our hearts to know and make room for "the other" and do so without fear. These changes can only happen there.

Gail Van Buuren, MFT is in private practice in Sebastopol and can be reached at 494-4198.



Reading Straight Through

Since you coped by growing,
by now you must be six feet tall -
even your blue eyes large
as the quarters you'd collect
for bus rides from state shelters to my office,
or for washing clothes
already one size too small

You always came folded beneath a baseball cap
as if you were afraid
something might fall on you
any minute
the way your father's fists had
or the frying pan that time

In your mother's eyes you saw your own --
and couldn't believe she never noticed
and later tried to forget the blood,
seeping, like twilight, everywhere that night
her desperate liberating steak-knife stab
his lung punctured

And, just as suddenly, her mothering exhausted --
blinked out, like a star
evaporated
like her voice
those bedtime story nights
when you'd squinch your fists to keep awake,
hoping this time
she'd read straight through
to happily ever after



ADS & ANNOUNCEMENTS

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Join four other therapists as the first occupants of lovely new offices located in central Rohnert Park. High ceilings, natural lighting, easy access and plenty of parking. Available August 1. Call Katie Anderson @ 795-6885 to make inquiries.

Family Service Agency of Sonoma County

Membership: Bettina O'Brien 583-2336
is looking for an experienced Clinical Supervisor (MFT or LCSW) to manage and lead its *domestic violence treatment program* and to provide interns with clinical supervision.

General Description:

The Clinical Supervisor/Program Manager does the administration of the domestic violence treatment program, does group supervision for interns, is lead facilitator of one

domestic violence group, does individual supervision and helps develop new clinical programs at the Agency.

Qualifications:

At least 7 years experience as a therapist.

Possession of a CA State License as a Marriage, Family Therapist or Social Worker.

Completion of yearlong certification process with the ability to deliver Domestic Violence Prevention services.

Meets the requirements to supervise interns/trainees.

Knowledge of the Sonoma County System of Care.

Has a passion for teaching, supervision and clinical program development. This position is 4 days a week, 20 hours and has part time benefits.

Please email or send resume to:

Anja Woltman, Executive Director

751 Lombardi Court, Suite C

Santa Rosa, CA 95407

awoltman@familyservicesonoma.org

707-545-4551 ext. 212

WORKSHOP ~ Understanding Addiction: Focus on Adolescents and Young Adults ~ September 17, 2008 8:30 AM to 4:00 PM. Well-known speaker and author, Dr.

Timmen Cermak will be the presenter. 6 CE Credits offered to RN's, Psyche Techs, MFTs, LCSWs, Addiction Counselors and Attorneys. \$89.99 includes am/pm breaks & boxed lunch.

What you will learn: The elements of brain development during adolescence that underlie psychological development; the reasons that addiction happens more frequently and faster in adolescence; the elements of interviewing needed to engage adolescents and young adults in treatment; and how to activate the 7 precursors of change - and MORE. (see www.daacinfo.org)

PLUS Special Presentations from the Sonoma County Methamphetamine Task Force releasing recommendations from a year long study and The Sonoma County Prevention Division will be presenting an overview of Community and Environmental Strategies focusing on adolescents and young adults. For more information and sign-up see the flyer enclosed or go to The Drug Abuse Alternatives Center website at www.daacinfo.org (events)

Law & Ethics Update, 2008

Instructor: Will Rogers, J.D.

When: Saturday July 26, 2008 9:00 A.M. - 4:00 P.M.

Where: International Institute for Humanistic Studies,
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Cost and Accreditation: Professionals \$100: 6 CEUs
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Julie Green	1999
Jan Lowry-Cole	1998
Rhaea Maurel	1997
Paula Hall	1996
Kitty Chelton	1994-1995
Don Scully & Randi Farkas	1993-1994
Hari Meyers	1992-1993
Grace Harris	1991-1992
Richard Alongi	1990-1991
Diana Young	1989
Andrew Leeds	1988
Carleita Schwartz	1987
Christine Bucholz	1986
Thomas Hedlund	1982-1985
Rick Mawson	1980-1982