

HEALING SHAME

Shame is perhaps the most painful of all emotions. Many people go to great lengths to avoid acknowledging or even feeling it. Shame also binds with other emotions, such as anger and fear, so that it is often hard to detect. Revealing shame can be in itself shameful. For many clients who don't get better in therapy, unacknowledged shame is the primary factor.

Shame can be viewed as developmental trauma. It causes much of the same physical and emotional freezing as trauma does. Not only do we lose tonus and energy, but it becomes hard to think clearly in a shame state. In addition, shame often accompanies trauma, forming a downward spiral that is hard to break. Both therapist and client need to understand how shame develops, what it is, and how it works.

In Bret Lyon's presentation on April 10, we will learn how to help our clients recognize shame and work through it. We will become more sensitive to the shaming that is often implicit in the therapy situation. Further, we will learn how to help clients separate feeling of shame from other emotions. Most importantly, we will learn how to take clients back to early shaming situations and reverse the outcome, thereby helping clients move their energy powerfully outward rather than turning it against themselves.

Bret Lyon has specialized in body-mind development for over 25 years. His unique approach combines Reichian breath and energy work with Feldenkrais body awareness, Focusing, Buddhist philosophy, shame and attachment theory, and the

trauma healing work of Peter Levine. Bret holds doctorates in both Psychology and Drama. His mentor, Al Bauman, worked directly with Wilhelm Reich. He is also certified in Focusing and Somatic Experiencing. In addition, he has trained with Sue Johnson in Emotionally Focused Therapy, and Diana Fosha in AEDP and Bruce Ecker in Coherence Therapy.

April 10th RECAMFT Meeting

10:30 - 11:00 social & sign in
11:00 - 1:00 meeting

Healing Shame Bret Lyon, Ph.D.

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

IF THE PARKING LOT IS FULL, YOU CAN PARK AT THE J.C. GARAGE ACROSS MENDOCINO AVE. FOR \$3 OR ASK PERMISSION TO PARK AT THE EGGAN AND LANCE MORTUARY. IF YOU DO NOT ASK THE COST OF TOWING IS \$225.

May 8th, 2009

Key Elements of Working with Groups Don Scully, MFT

May 29th, 2009

Accelerated Experiential Dynamic Psychotherapy Workshop Karen Pando-Mars, MFT & David Mars, Ph.D. Petaluma Community Center

See article page 7

President's Message

Susan Hartz, MFT



"L-I-S," the teacher says. "T-E-N," the children chime. I am observing my granddaughter's First Grade class and admiring how her teacher is managing her group of squirmy six-year-olds. Every time the kids begin to get restless and distracted, Mrs.

H. brings them back to attention with "L-I-S," and the kids respond with a chorus of "T-E-N," then settle down to what is at hand. How wonderful to be learning the importance of listening at such a tender age.

I don't have to tell you how vital this is to the therapeutic relationship; that, you already know. I'd like to point out, however, the gifts we give each other as colleagues knowing we can trust our listeners to hear with compassion. At our meetings, I'm moved by how much you participate, sharing personal issues, daring to reveal vulnerabilities. This kind of participation opens the way for rich exchange, and allows us to attract good speakers, who have much to teach us.

More than this, though, is the sense of camaraderie and collaboration this builds. We have a profession that is by its very nature isolating. When we come together, we help each other not only in expertise but in increasing respect for the many ways we can contribute to our communities, as we hear how wide the areas in which our diverse members work are. There is also sharing of the difficult issues we come up against, so we don't feel we have to deal with them alone. I want to say how much I appreciate all of you for your willingness to participate.

And I want to listen to you. I would like to hear if there are ways the chapter can better serve you. There are several means for you to let those of us in the leadership positions know: by writing suggestions on your evaluation forms, e-mailing, phone, or talking to us at meetings. One of the questions that several of you who can't make the Friday meetings have asked is why we don't have some of the activities on different days of the week, or on weekends. I understand how frustrating this can be but when surveys have been made, Friday turns out to be the best day for the most people. Another recent inquiry was about making an affiliate membership available for those who don't meet the requirements of being licensed but are certified and

working in a compatible profession, such as Art Therapists. Our charter has to comply with the state CAMFT; being licensed and a member of CAMFT are required for any kind of membership in RECAMFT.

While you may not be able to make monthly meetings, perhaps you can join us for the workshop we have coming up May 29. I'm excited and curious about this new way of working, called Accelerated Experiential Dynamic Psychotherapy, or AEDP. In the morning, we'll have presentations, including videos, on using this with individuals and with couples. In the afternoon, we will have hands-on work in small groups that will give us a more concrete understanding of how to use this. We need people to help out and some of what needs to be done will only take an hour or two, so if you can spare some time why not volunteer and get to know one another better. I'll be listening for your response.

Susan Hartz is in private practice in Santa Rosa. She can be reached at 538-2011

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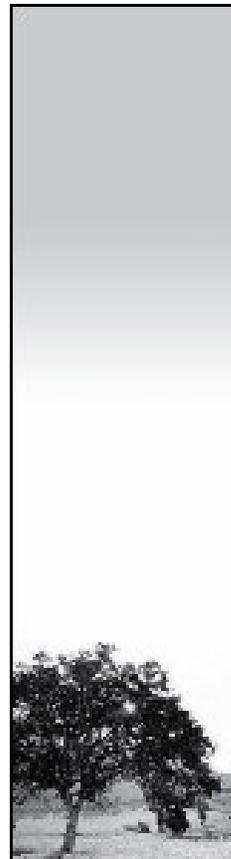
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Ethics Group Meeting

The Ethics Group meets once each in the Fall, Winter, and Spring. Topics for group discussion are generated from our own clinical practices or by an issue that has come up for one of us. For example, we discussed how to create and put in place a Clinical Practice Will, which we all should have.

Our meetings are informative and stimulating and RECAMFT members are invited to attend. No ongoing commitment is required.

Next Meeting – April 3rd, 2009

1:30 - 3:00 pm

For more information call Coralia Serafim at 781-0133

Older Adults and Disaster *By Margaret Newport*

They were not poor people who became old. They were older adults who became poor. These were folks from working or middle class life styles who had raised their children, done productive work and retired to live in a mobile home park. It was a convenient place to live in a charming, small community along the California coast. Within walking distance there was a post office, small grocery store, Laundromat and bakery. Up on a hill stood a small, white church. A bus stopped at the corner, providing transport to the nearby city. The park was made up of residents of similar age and socio-economic background. The tenants prized their independence and valued a sense of safety there. Most people stated they wanted to stay "forever." It was enjoyable to share the newspaper, to shop for groceries together and exchange homemade baked goods. The population consisted of three single men, eleven single women, and several married couples. Income was based on Social Security and small pensions.

Winter that year arrived with a very unusual weather situation. A cold storm from Alaska collided with a warm, tropical storm from the Pacific. This caused a record rainfall of twenty inches in a very short time. Water swept down rivers and creeks washing uprooted trees, mud and debris toward the coast. Electrical power and telephone service was disrupted to a large area. The creek beside the mobile home park rose ever higher and higher unbeknownst to the residents. The local fire chief became concerned. He went from home to home with warning of possible evacuation. At first, people refused to leave. A few who had their own cars self evacuated. The fire chief observed the rapidly rising water and called for a mandatory evacuation. Boats had to be brought. There was much confusion and no time to collect important possessions. Some people went to stay with family or friends in the vicinity. Those without a place to go were taken to local churches for temporary shelter. All residents were safely rescued by 2:30 in the afternoon. The water was still rising. During the night the creek reached flood stage and the mobile homes tumbled about like toys, covered with mud, smashed by trees. The residents returned the next day, planning to return to their homes. All was gone it was a shocking sight. Many months were to pass before the park was habitable. Some people had insurance or savings to obtain new homes some did not. Some chose not to return.

REACTIONS of OLDER ADULTS

Some special consideration of older adults in disaster courtesy of Diane Myers:

- Less likely to heed warnings. May resist leaving their homes
- May be slower to realize full extent of losses.
- May have chronic health problems, physical injuries or physical limitation.
- Might not have money to start over
- May lack time or strength to recover losses
- May be isolated, lack support systems.
- May be unfamiliar with bureaucratic systems.

What You Missed
By Michael Krikorian

On March 13 we were given an informative presentation on the "State of the Profession" by Cathy Atkins, staff attorney for CAMFT. Cathy came in place of Mary Riemersma who had a scheduling conflict.

Cathy touched on a number of topics to let us know of new developments in the areas of legislation, Board of Behavioral Science issues, legal issues and how CAMFT is helping to expand opportunities for MFT's in employment, insurance reimbursement and demand for our services. Some of the highlights follow.

In the area of legislation, CAMFT is working to get new regulations implemented so the Veterans Administration will begin hiring MFTs to provide mental health services to vets. The need is certainly there with so many vets returning from war duty. CAMFT is also continuing to lobby for MFTs to be able to provide services under Medicare. Cathy states that one of the obstacles is the lack of awareness among legislators that MFTs can provide more than just "marriage counseling." In that same regard, CAMFT is conducting a marketing campaign for MFTs around the state by means of exhibits, brochures and press releases. A third area where CAMFT is lobbying to expand our job opportunities is within the Department of Corrections. They have traditionally resisted including MFTs within that system but after running a temporary pilot project of employing MFTs, they are very pleased with the results. CAMFT continues to push legislation to require the Department of Corrections to permanently open positions for MFTs.



Cathy Atkins (right) with Membership Chair, Bettina O'Brien

CAMFT is currently having internal discussions on what position to take on the introduction of a new state licensed clinical profession, Licensed Professional



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:

Drug or alcohol abuse/dependence • 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

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Counselor, and how it relates to MFTs. They are also debating whether or not to take an official position on recently passed Prop 8 (prohibiting same sex marriage) and whether to oppose the Governor's plan to take some of the funds from Prop 63 (tax on wealthy to support mental health services) to deal with the budget crisis.

Cathy reminded us that when we engage in telemedicine (doing therapy with a client via the Internet), we must give the client the Telemedicine Disclosure Form which is available on CAMFT's website, www.camft.org. She cautioned us about doing ongoing therapy via the telephone or Internet with a client now residing out of state. The law so far is not clear about this but she believes you could subject yourself to legal penalties as the laws of the state where the client resides are likely to take precedence and we are not licensed to practice in that state.

Thank you, Cathy, for the interesting and informative presentation. Cathy can be reached at CAMFT headquarters at (858) 292-2638.

Michael Krikorian is a licensed MFT in Santa Rosa. He has over 30 years experience serving adults and teens, couples and individuals. He can be reached at (707) 579-0838.

April 5150

The April 5150 prize is a Therapeutic Bodywork session being offered by Karen Euston, CMT. With her broad experience and training as a Certified Massage Therapist, Karen offers a wide spectrum of modalities. You may choose from a stress relieving, relaxing Swedish Esalen-style massage with hot stones and aromatherapy as desired. Or perhaps you would like foot and hand reflexology, after which you will feel you are walking on air. In addition, Karen offers Medical Massage that can focus on relieving any aches and pains, going lightly or deeply depending on your preferences. A special wave-like massage stroke relaxes while it encourages rehydration and rehabilitation of your joints and muscles. Karen listens to YOU, and will deliver a session custom for you, whatever it is that you need on that day. Schedule your appointment by calling Karen at 707 843-0808. Many thanks to Karen, and to Lea Blum for recommending her.

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.)

Intern Greetings *Karen Nemrow*

Hello All!

Our chapter meetings have been really well attended by interns and trainees. Thank you for continuing to support the chapter. The trainings have been very interesting and remember they count towards workshop hours and are free! Our intern support group meets at 9:30, right before the chapter meeting. The road to licensure seems a little easier to get through when shared! Please join us!

NEW: INTERN BULLETIN BOARD

Do you have something you would like to post/share with others? Perhaps you just passed your exams or are looking for a study partner? Are you looking for an unpaid internship? Do you know of an agency looking for an unpaid intern? If you have something to post, let me know at karenbnem@comcast.net

Intern Bulletin Board

POSSIBLE INTERNSHIPS AVAILABLE

Social Advocates for Youth	544-3299
United Against Sexual Assault	523-9192

Lessons for Surviving in Hard Times

Peter M Bernstein, PhD, FAPA, MFT, CMT

As we face these hard times, I offer ten lessons from my personal experience of financial loss to encourage you and your patients. These principles - and taking life one day at a time - have been of great value to me.

1. Refuse to Take On the Spirit of Fear

The spirit of fear is present on a massive level. It's essential not to allow the spirit of fear to overpower you. Try to rise above it.

2. Deal With Reality

It's important to face reality; don't bury your head in the sand. Look at the hard facts of your financial situation, as painful and traumatic as they may be. The things you based your security on may be gone now.

3. - But Recognize that Facts Aren't the Complete Reality

Don't let facts be the complete reality that determines whether you're happy or sad, fulfilled or miserable. Take a look at the non-tangibles, like health and family. Leave the tangibles and the number-crunching up to bookkeepers. Realize there's so much beyond that.

4. Don't Let Your Emotions Dictate Your Perspective

Don't let your emotions dictate your perspective; don't let your history determine your future. Don't get fixated on what's been taken away or lost. Be aware of it, deal with it, and shift your perspective as quickly as you can.

5. Appreciate What You Have

If you have your health and a loving family, the things that really matter, embrace them. Appreciate what you have, what you've been given, and how good things have been. Recognize the ways your life has been rich and full.

6. Examine Your Spiritual Life

This is a good time to consider where you are with your spirituality. Is this an area you've neglected, or that you've used as an escape? Look to the people you consider spiritual to guide you. Work towards finding the balance between trust in God's provision and taking the responsibility to do your part.

7. Reach Out to Others

You are not alone. Many people are experiencing what you are, and far worse. If you haven't been charitable, this is a good time to start because so many are in need. If you don't have money to give, give of your time and yourself.

8. Look for Opportunities

Now is a good opportunity to consider things you may have been distracted from. Is it time to develop a different career, to improve your relationships, or to grow personally in new ways? What about your life needs to change?

9. Find Help

Examine your emotional life. If wounds and scars from your past are distorting your life now with fear, this is a good time to get professional help. There's help out there for you.

10. Don't Give Up

Let me encourage you - hang in there. Don't let your finances determine your future. Remember that there's far more to life than that. Through all that we are experiencing, I believe something will come out of this for good.

Peter Bernstein can be reached at the Bernstein Institute for Integrative Psychotherapy, 600 Seavey Road, Petaluma, CA 94952

707-762-3253 pmbphd@netvista.net

"I Want To Talk To Other Teens Who Have Been Sexually Abused."

By Susan Amanda Schratter

Middle school - hormones surging, the atmosphere is charged with newly emerged sexual energy. Identities are being forged, alliances are shifting, academics press increased demands and boys/girl attractions illicit a host of novel behaviors, fantasies and questions, both exhilarating and confounding. Most girls find their way through this period of middle adolescence well enough, but for the teen girl who has been sexually abused there is a bewildering and murky overlay for the tasks at hand. In my office I hear their stories: socializing at lunch, a boy likes a girl, joking, flirting, he lightly bumps her shoulder, and touches her arm. The girl, not attracted to this boy, sharply snaps, "Quit molesting me!" The group laughs it off including the scorned boy (though secretly bruised by the shaming rejection.) Not laughing is the girl who knows sexual abuse. Stunned, she thinks, "You have no idea what it means to be molested." Swallowing her embarrassment and terrible secret, she shrinks inside.

Teen girls find boys approaching them in numerous ways. Boys, exploring this new terrain wonder: What are girls like? How do I act? What if I talk to her? Touch her? All natural age-appropriate behavior, but for sexually molested girls, boys' overtures for contact are particularly confusing. "What does it mean when a boy...?" is a question posed to me, one with a double entendre: Does he like me? Does he want to have sex with me?

In our sessions my clients plead to know, "How long will it be before I stop thinking about it?" Looking away they tell me sadly, "I feel different." I gently confer, "I know. It is so very hard to feel different." Then there is their most poignant wish of all, "I just want to be normal!" When I inform them they are not alone, approximately 1 out of 4 girls are sexually abused within a continuum from verbal sexual harassment to forced intercourse, a sliver of isolation is mitigated.

Difficulties occur at home too: A big brother calls his teen sister a baby. Pain rips through her. Turning beet red she screams, "Don't call me a baby. I hate you!" Racing to her room, she slams the door hard. A parent comes in and learns this is what her abuser called her when she wouldn't cooperate. Unwittingly, her brother stepped onto a minefield igniting a trigger. I educate my clients about triggers. Having this phenomenon named and triggers identified helps clarify their reality.

My group for teen girls who have been sexually abused is a safe container for appropriate sharing. Here they shall practice setting boundaries, reclaim their stolen "No!" and learn healthy means to express feelings they struggle with daily. Equally essential is to rediscover their special qualities and innate goodness. These brave girls, while giving voice to their rainbow of truth, shall shine a light onto the soul-devouring shadows that haunt them. Step by step and arm in arm they shall reclaim their beauty and fullness of being.

Susan Amanda Schratte, MFTI, supervised by Sarah Jolly, MFT can be contacted at (707)829-8069 or (415) 302-8185. 7765 Healdsburg Ave., Sebastopol, CA 95472

May 29th Workshop
AEDP - Accelerated Experiential
Dynamic Psychotherapy
By Gail Van Buuren

On May 29th RECAMFT and AEDP West will be hosting a one-day introductory workshop at the Petaluma Community Center. Our presenters for the event are Karen Pando-Mars and David Mars, faculty members of the AEDP Institute and two of the coordinators of AEDP West, which is based in San Rafael. The cost for the six hour workshop is \$100 for the day. We will be treated to excellent videotaped sessions with both an individual and with a couple that reveal the power of this work. In the afternoon we will have hands on experience with facilitators trained in AEDP so we can get a 'felt sense' of AEDP. I took an AEDP five-day intensive training in

January 2008, after reading Diana Fosha's book The Transforming Power of Affect: A Model for Accelerated Change, because I knew that I needed to learn this way of working, because it is the way I work already and because it would enable me to take my work to a much deeper and more detailed level. If you work from your heart and love being completely present with your client, you will be excited about AEDP.

First, let me tell you what excites me about this work. As a therapist, this model encourages me to bring all of me into the room, to use my own body for feedback, to lay my own feelings on the table, to practice intersubjectivity with my clients, to focus on affect, to utilize our attachment, and to experience immersion in the process of psychotherapy with my clients. At the same time, I hold and contain the space and maintain awareness of where we are going, (hopefully.)

Accelerated Experiential Dynamic Psychotherapy (to quote Diana Fosha, Ph.D.)

"seeks to explain the quantum transformational nature of deep somatically based emotional experiencing in the context of a relationship with a trusted 'true other.' AEDP's metapsychology is an adaptation-based model informed by attachment theory, affective neuroscience, developmental mother-infant interaction studies, and, last but not least, emotion theory (a la Darwin, James, Tomkins, Damasio, Ekman & co)."

This theory's point of view is that we all make the best effort, given our circumstances, to adapt to our lives. We are not psychopathic because we have been doing the best we can. Right here we can align with our clients and validate their resourcefulness, thus establishing the first link in our attachment with them.

I like the way Candyce Ossefort-Russell describes it on the AEDP website:

AEDP works through safety and caring. The AEDP therapist creates safety through a warm and emotionally engaged relationship where the patient is valued and respected. Because the patient feels safe and cared for, his defenses against feelings aren't needed as much as in other areas of his life, so the defenses "melt" away with the therapist's help. As the defenses dissolve, the therapist helps the patient to manage the deep feelings that are then free to emerge. These feelings are ones that have almost always been too difficult, frightening, or painful for the patient

to experience alone, so feeling them in the company of a caring other is new and freeing. Though painful, being met in the feelings is healing. When the full wave of emotion flows through, the patient feels lighter, grateful, transformed, changed for the better. The therapist then encourages the patient to reflect on the healing and transformational feelings, and this reflection generates deeper and deeper levels of healing and growth.

So begins a journey, well mapped out by AEDP where patients move from their stress, distress and symptoms through transitional affects to their core emotions which have usually been hidden away. With secure attachment, deep empathy and responsiveness in the therapeutic relationship, our clients are accompanied as they process deep feelings, and are thus able to develop new capacities as they access within themselves strong transformational affects such as relief, hope, renewal, pride, joy, and competence.

Here is the piece that is so important and that really uses the attachment and the cognitive function together. At every stage of completed work, you stop and ask your client how it feels to do this work together, how it feels to have me here with you to witness and celebrate it. This is metaprocessing and it brings out other positive transformational affects such as gratitude, tenderness, feeling moved and you are genuinely mirroring those right back. This is the repairing of the attachment bond because of the affective-cognitive piece that works on the nervous system and the brain. At this point the client moves into the core state of what I call "true self." Of course, this process is repeated many times in the work you do together, but over time you see more and more of the client's true self emerging in his or her everyday life.

There are many valuable aspects to AEDP, many of which we are already aware and using. I spent five days with some of the most earnest therapists I have ever met and listening to some truly brilliant people like Daina Fosha and Ron Fredericks and as well as many therapists in the audience who spoke about the nuts and bolts of using attachment, neuroscience, and ourselves in therapy to bring about healing in our clients. Will it work for everyone? Of course, not. Do we use it every minute of every session? No, but we think that way all the time. What is so different? We plant our own true selves right in the center of the therapy with the client. We openly hold our client in our hearts and in our minds. Attachment happens because it is the most important ingredient.

Some of this was written a year ago. Since that time Donna Fraser, Lisa Hauck-Loy, Karen Pando-Mars, and David Mars have co-founded AEDP West to host AEDP faculty from around the country to present in Marin County. David and Karen facilitate AEDP consultation groups in which therapists using videotaped sessions with permission from their clients to get help sharpening their AEDP skills. If you are interested in deepening your empathic work with your clients, you will not want to miss this workshop. Look for a second article in the May issue which will highlight information about AEDP for Couples.

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

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For more information call, fax, or email the office at:
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