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PRESIDENT'S REPORT



Maureen Gorman PhD
APNS President

Springtime in Nova Scotia! Always a treat! It's about what psychologists love - uncertainty! What will be the weather by the end of month/ or day? What will the new federal and provincial budget do to my cash flow? Will I have to pay income tax this year? (&/or will I get it in on time?) What will return to thrive in my garden and shall I purchase full grown plants or start from seed? (and have them wilt and wither away in the window, but that's another issue). What stays or goes in the flurry (ok, flutter) of spring cleaning – and who can I get to do this job? Springtime, you see, also involves other things psychologists do well: assess, analyze, plan and implement (or delegate!). This spring APNS cannot control the weather - we recognize that – so we do what all other responsible Nova Scotians do: dress accordingly, adapt and cope, and prosper.

APNS springtime activities also reflect the themes of spring: renewal, rejuvenation, growth (and/ or re-growth), hopefulness, and anticipation of a fruitful spring, summer and fall. The APNS budget is very positive and projected to

continue to provide us with the funds to secure Susan Marsh's services into a full time position. Details are now being worked out but the anticipated return on investing in Susan's marketing, public relations skills and great office management is a very favourable return in the short and the long term. (And with no increase in fees!- Budget details at the AGM on April 27th at noon)

The current executive is being replenished as Shaun Newsome (Treasurer), Kevin Rice (Past-President), and Joann Doran (Student Member) pursue their other leisure time activities. I want to thank each of them for their dedicated work and accomplishments while serving you, the membership. Shaun has kept the cash flow flowing and has fully supported the plan to employ Susan full time, as well as being instrumental in reviewing policies and positions to facilitate the work of the executive and committees (assisted by Susan). He has taken the lead on developing the Issues Strategy workshop to address, for example, the use of psychological tests by unqualified users (in concert with Gerald Hann with NSBEP). Kevin has

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PRESIDENT'S REPORT continued from Page 1

continued with discussions with Blue Cross/Medavie on several issues that negatively impact on the ability of psychologists to practice ethically (as regards confidentiality) and with distinction (i.e., that our qualifications distinguish us from those of other "therapists"). Joann has the best reason to move off the board and that is because this winter she has completed her Masters degree in School Psychology and is no longer eligible to be a student representative. Joann worked on issues related to children and the suggested revisions to Children's & Family Services Act. Congratulations, Joann and may I wish you all the best in your new position! I am happy to report that we have nominations for two of three of these to-be-vacated positions (see page 5)

We need a President-Elect! This position means a three-year commitment and I can attest to the fact that it does involve some work, but also some fun aspects too, not to mention the good stuff you learn along the way. And you don't do it all by yourself; it really is a team effort and a source of personal and professional satisfaction. I am happy to stay on as Past-President and to see some of my pet projects survive (and thrive). For example, establishment of Interest Groups as a major source of input to the executive via committees as well as a major source of project implementers. I will also represent APNS at the national meeting of provincial associations, held twice yearly to provide our perspective on issues (advocacy and compliance with standards of professional practice) that benefit from use of a national response strategy or campaign.

The Awareness Month activities, particularly the Silent Auction, will continue to be an interest of mine. My only questions to members are: What do you want to do to celebrate your profession and yourselves in it? Do you care? Needless to say I am disappointed with the turnout for the Reception (this year's gala event) and particularly for the Silent Auction Feb. 16 that yielded just over \$600.00 for the Schizophrenia Society of Nova

Scotia (as compared with over \$1500 raised last year and \$2000 the year before). Any suggestions or feedback are welcome.

Also staying on the executive is Dean Perry as Member-at-Large and APA Public Education Coordinator; so please contact Dean regarding APA (and APNS) materials and to plan public education events in your area. Debra Garland (Secretary) has another year in her term and that's a good thing because she is passionate about her work and able to produce coherent minutes from our long agendas. Debra contributed to the Issues Strategy workshop and has written responses to several requests for input from the association in areas relating particularly to child custody and access. Bob Milks has made his return to the executive after a two year break and will lead the association through to the coming of age of the "voice of psychology" and of its having a greater impact on the practice of psychology, and thus on the benefits to the public in general and for all of the stakeholders and "users" of psychology.

The transition between the "old" year and the "new" ends on a personal note of satisfaction in having Dr. Philippe Cappeliez, from the University of Ottawa, give a workshop on depression and psychotherapy with older adults. If you think you do not need this workshop (because you "don't work with old people") I challenge you to check the demographics that say the "population is aging" which means your client base will shift to include more older clients within the next ten years - if it hasn't already. This workshop can initiate you to the issues of the older client (gero-psychology) and assuming basic therapy intervention skills, you will begin to see how you can assess and intervene with this growing segment of our population. I hope to see many young psychologists there because I need to know that there will be well trained clinicians out there to whom I (and my contemporaries) can go for help in the too near future!

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APNS ANNUAL GENERAL MEETING May 5 2006 - Minutes

Present:

Executive: Joann Doran (*Student Member*), Maureen Gorman (*President-elect*), David Mensink (*Past President*), Shaun Newsome (*Treasurer*), Kevin Rice (*President*), Susan Marsh (*office manager*), Debra Garland (*Secretary*), Lauren Marsh-Knickle (*Member-at-large*)

Members: Victor Day, Catherine Thurston, S. Margaret Grant, Eileen Donahoe, Carol Thompson, Leah Clyburn, Joelle Caplan, Veronica Hutchings, Joan Hanley, Carolyn Humphreys, Barry Wiser, Pauline Faulkner, Mark Pottier, Richard Zehr, Shelley Goodwin, Rilda van Feggelen, Charles Hayes, Todd Hill, Norma Kennedy, David Pilon, Lynn Ross, Chris Ellsworth, Ivan Drouin, Myles Genest, Richard Braha, Diane Birch, Gordon Butler, Doreen Smith, Heather Higgins, Brenda Durdle.

1. Call to Order

Meeting called to order by Chair, Kevin Rice at 1:10pm.

2. Approval of agenda

The agenda was approved with an addition to New Business – Medavie Blue Cross
Motion – Carolyn Humphreys; second Charles Hayes

3. Approval of Minutes from past AGM May 13, 05

There were no corrections or additions.
Motion to adopt the minutes by Victor Day; seconded by Rilda van Feggelen.

4. Business Arising

4.1 Psychology Month 2006

Maureen Gorman delivered her report with references to written format in newsletter; thanked all those involved.

Certificates to be forwarded to participants with personal presentation at meeting of certificate to David Mensink.

4.2 Ethical consultation

Kevin reviewed changes re: the NSBEP no longer providing ethical consultation to members.
APNS to assume this role reference to comments in newsletter.

4.3 Blue Cross

Document circulated previously re: confidentiality management at Blue Cross, acknowledged error on their part.

5.1 President's Report - Maureen Gorman

Refer to newsletter and written report.
Association doing well including financially.
Plan to move forward with education, advocacy.
Primary goal – raise awareness of psychology in general. Psychology month CPAP assisted.
Reference to written report in newsletter for details.
\$1500 Caregivers association of NS cheque to be presented at another time by Kevin Rice. Looking to further develop speakers bureau.

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PRESIDENT'S REPORT *continued from Page 2*

So we transition in the hopeful atmosphere of “planting the seed” of interest in gero-psychology as well as being in the planning stages of exciting new developments in offering continuing education and training opportunities. For example, there are expressions of interest in hosting decentralized (i.e., not all in Halifax) workshops to benefit the members in their communities and there is agreement in principle to working towards a co-sponsored workshop in 2009 with the School of Social Work Continuing Education Department. At this point, I see the finances are good, the

house is clean, garden is in shape and there is promise of a fruitful year ahead and beyond. To all executive members, committee chairs and members, Susan Marsh and her co-op marketing student Sheena Morton, supporters of all of the Awareness Month Activities, the NSBEP (particularly Meredith Burns for her collaborative and collegial spirit), and to the APNS members who continue to promote the aims of the Association, happy spring and all that it brings.

Reports

APNS ANNUAL GENERAL MEETING May 2007 - Minutes (continued from page 3)

6.0 Treasurer's report ~ Shaun Newsome

Difference in reporting, greater consistency; more regular reports from accountant.

Thanks to B.Milks, previous treasurer and Susan Marsh. Overall, association in decent financial shape. Renewed lease for office for 5 years. Investigating possible government grant for student assistant.

Rent and mail outs highest expenses.
\$5000 budget for psychology month – cost was 11,000;
10,000 budget in current budget for psychology month. Increased memberships - 10; 310-320 total members.

Motion to accept budget – Myles Genest; Lynn Ross – second; unanimous

7.0 Auditor's report

Report from Lynn Ross; attached to filed records.

Motion: David Pilon; Seconded – Shawn Newsome. Unanimous

8.0 Committee Reports

Newsletter contains full reports.
CE committee no report in newsletter so an oral report from Carolyn Humphreys – C.E. committee planning future workshops over 2-3 years. Looking at proposal for acquiring continuing ed. credits for members.
W.Digout – Membership committee
Extending membership benefits
Doug Symons – Rural health network APA initiative
School committee – special. status with NSTU
P. Corkum – interested in changing committee to child/adolescent committee.

8.1 CHRSP

Richard Braha -by law change reduction in board size from 20-5.
Increased input by members; now elected rather than

appointed. Continuing education workshop liaising with APNS to co present.

Impact of raising profile e.g. WCB recognition of ability to diagnose anxiety/depressive disorders.

9.0 Election of officers

Report in newsletter.
Acclamation – Dean Perry member at large
Debra Garland secretary; no president elect.
Presentation of thank you and certificate to Lauren Marsh Knickle and David Mensink

10.1 New Business

Maureen Gorman's incoming address
Presentation of past president pin to Kevin

10.2 Motion for appoint of auditor 2006-2007

Maureen nominated Lynn Ross, who agreed to continue in this role.

10.3 Appointment of Electoral Officers for 2006-07

Motion to appoint electoral officers: Victor Day, David Mensink, Kevin Rice. Motion by Myles Genest; Seconded. Unanimous

11.0 Student Awards

Joann Doran renewed interest in awards

11.1 Gerald Gordon Award for Undergrad

Gordon Award-Sean MacKinnon UCCB (\$250 – books; 1 yr membership with APNS); unable to attend.

11.2 Brian Dufton Award for Grad - first time presented. Melissa McGonnell, Ph.d student Dalhousie University; \$500 – 1 year membership APNS

12.0 Adjournment.

Respectively submitted
Debra Garland, APNS Secretary

ELECTIONS COMMITTEE ANNUAL REPORT 2006-2007

The Elections Committee is responsible for soliciting nominations for positions on the Executive as they become open, and for conducting elections. It is also responsible for soliciting nominations for the annual Fellow appointment, and passing such nominations on to the Executive for selection. The Board Nominations subcommittee of the Elections Committee is responsible for soliciting nominations of psychologists for appointment to the NSBEP as vacancies occur, and for passing such nominations on to the Executive with recommendations. Currently all members of the Elections Committee are members of the Board Nominations subcommittee.

This year, three Executive positions become open by the AGM, for President-elect, Member at Large Treasurer, and Student Representative. Two nominations were received, of Laurie Tracey for Member at Large and Melissa McGonnell for Student Representative. They therefore take those positions by acclamation. Laurie practices with Breakthrough in Halifax and at the Counselling Service of Dalhousie University; Melissa is a Ph.D. student in clinical psychology at Dalhousie.

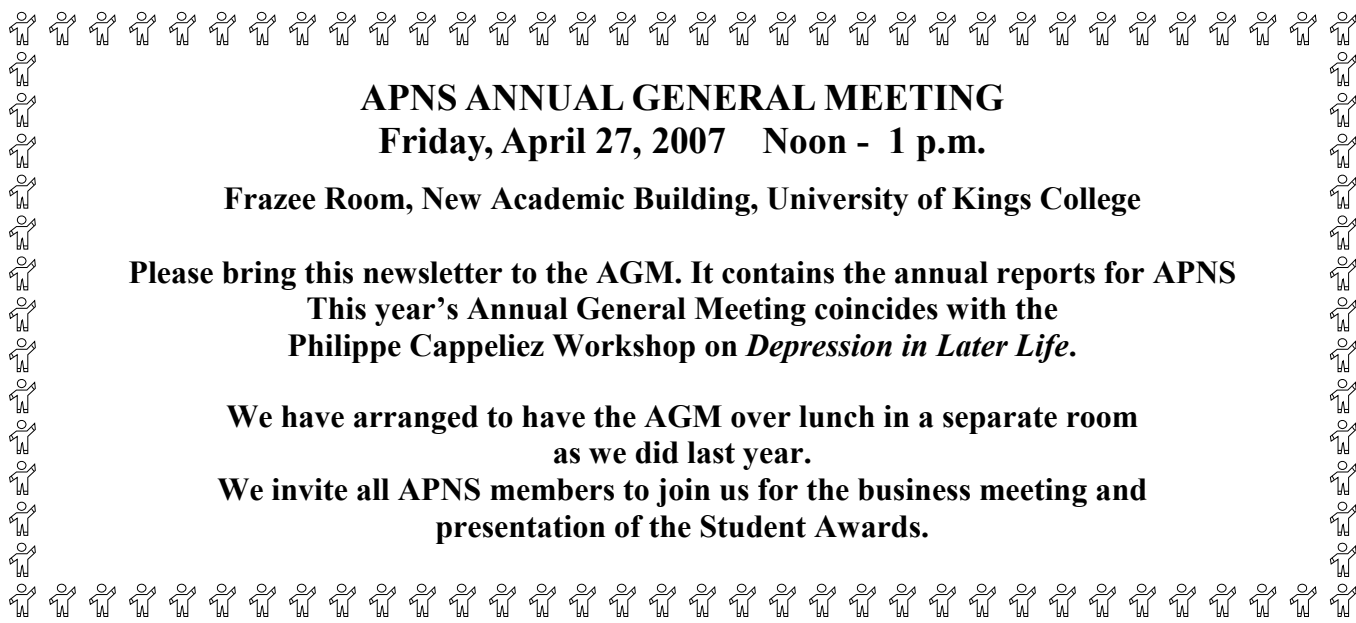
As of the writing of this report (March 31) we still have not received a nomination for the President-elect position. If there is an election, you may have been notified of it before you receive this report. If the position is filled by acclamation, announcement of this will occur at the AGM.

The term of one member of NSBEP, Gerald Hann, ends June 30. We have called for and received nominations. We sent these nominations and our recommendations to the Executive, which will announce its decision.

Kevin Rice has served actively on the committee ex-officio as Past-president for this past year. We thank him for his contribution, and look forward to Maureen Gorman joining us in the upcoming year.

Respectfully submitted,
Victor Day, PhD

Members : Victor Day (chair), Louise Stringer-Warren, David Mensink, Kevin Rice



APNS ANNUAL GENERAL MEETING
Friday, April 27, 2007 Noon - 1 p.m.
Frazer Room, New Academic Building, University of Kings College

Please bring this newsletter to the AGM. It contains the annual reports for APNS
This year's Annual General Meeting coincides with the
Philippe Cappellez Workshop on *Depression in Later Life*.

We have arranged to have the AGM over lunch in a separate room
as we did last year.

We invite all APNS members to join us for the business meeting and
presentation of the Student Awards.

POST-TRAUMA SERVICES COMMITTEE ANNUAL REPORT

The Post-Trauma Services Committee was developed to coordinate a provincial network of psychologists who would respond in a timely manner following a major disaster and provide *pro bono* psychological services and assistance, such as group debriefing sessions, to affected individuals. Today, our network consists of approximately 75 volunteers from all over Nova Scotia. On behalf of the committee, I would like to offer my sincere thanks to those individuals who have contributed their time and efforts to this important endeavor in the past and to those who are prepared to respond in the event of a future disaster.

As chair of the committee for three years, I would like once again to say thanks to those active committee work group members; Pam Dixon, Charles Hayes, and Janice Howes (Disaster Response Coordinator). It has been a very busy year for all members, however, they have still found time to volunteer their time for meetings and to gather an abundance of recent research in the area of trauma response.

As stated in last years' annual report our committee has shifted its focus towards a more educative agenda since the original mandate of the Post-Trauma Services Committee has been accomplished. Plans were made to provide network members with a presentation of post-traumatic stress and treatment options for March 2007. Unfortunately, due to short notice to network members and a pending snow storm, this event was postponed. We will update APNS members regarding the new date for this presentation as soon as it is finalized.

It is important to note the continued involvement of the Post-Trauma Services Committee in education within Atlantic Canada. I am pleased to report that two of our committee members, Dr. Janice Howes and Dr. Charles Hayes, will be presenting at Canadian Red Cross' first Atlantic

Conference in Trauma Management – Preparing as an Atlantic Community, May 8 & 9 in Moncton, NB.

We are continually updating our volunteer list as we recruit more psychologists to the network. If you are interested in becoming a volunteer, please take a few minutes to complete the form included in this edition of the journal. Our “Handbook for Post-Disaster Volunteers”, is currently under review and the mailout with this handbook will be sent as soon as the revisions are complete. We are still in need of more psychologists who practice in rural areas, as there is a current need for providers in under-represented regions such as Cape Breton Island.

If you currently are a member of the network, we would also appreciate you taking a few moments to review the form and, if applicable, provide us with updated contact information. In particular, we are still attempting to generate a database of current email addresses so that we can communicate more efficiently with the network and keep volunteers apprised of relevant information, such as upcoming training opportunities or important resources that are worth checking out. As our mandate expands into the realm of education, we will also require more work groups members to make such events happen. If you are interested in learning more about new developments in trauma research and would like to help plan or organize such educative events, you may contact me directly at 492-2102 or andrea@waldegrovepsych.com.

Respectively submitted
Andrea Cook, Post-trauma Chair

ADVOCACY COMMITTEE ANNUAL REPORT

APNS participated at the American Psychological Association's State Leadership Conference in March 2007 in Washington DC. The annual conference is an opportunity to bring together the leadership of state and provincial psychological associations with the collective goal of advocacy training. The theme of this year's SLC was "Positioning for Change: Expanding Psychology's Roles, Influence and Value." Over 500 delegates from each of the states, the US territories and the six affiliated Canadian provincial associations participated in the four day conference. On the final day, American delegates met with their elected officials on Capital Hill to advocate on behalf of psychology's agenda (i.e., mental health parity this year, which is the thrust to ensure that mental health care needs have comparable reimbursement to physical health care needs). Dean Perry (Public Education Campaign Coordinator) and David Pilon (Federal Advocacy Coordinator) comprised the APNS delegation at this year's SLC.

In keeping with this year's theme, much of the conference agenda was devoted to creative strategies to help realize psychology's vision of the future. Advocacy initiatives designed to influence elected officials, the media and the public were shared among delegates. The perennial concerns of the "unhealthy" US health care system were the focus of many sessions with psychology's proposed solutions thereof. Former Speaker of the House, Newt Gingrich delivered a keynote address on the necessary transformation of the health care system by empowering the consumer of health care, offering them more choice, expanding health coverage universally, expanding free market approaches and providing pay for performance incentives for providers who can demonstrate their outcomes. Recent legislative advancements in the

domains of prescriptive authority and expanded hospital privileges for psychologists were highlighted for their advocacy lessons. Enhanced roles for psychologists including more work with first-responders (e.g., firefighters or journalists who cover war or terrorist venues) were compelling described.

The Public Education component of the conference was an opportunity for state and provincial public education coordinators to share ideas and develop new initiatives for the APA's public education campaign. The campaigns are designed with the purpose of providing information on a variety of mental health issues and to underline the role of psychology. This year, there has been further development of the Mind/Body Health Campaign. The campaign has been initially successful as both an advocacy and educational tool.

APA's Psychologically Healthy Workplace Awards, a significant cornerstone of APA's efforts to reinforce corporate America's healthy treatment of their employees, were featured with the 2nd annual National PHWAs announced. As always, a healthy sprinkling of elected officials (including psychologist elected officials) were on hand to offer their advice on how to interact with and influence policy makers. Not surprisingly, a few sessions were devoted to the concept of political giving, fund-raising for those candidates who are favourable to one's agenda of interest.

Much of the benefit of participating at the State Leadership Conference is the networking with other psychologist leaders from around North America on universal issues of mobilizing association member interest and participation, promoting psychology within the community, safeguarding the public from unqualified providers, etc. Many of these issues transcend the US Canadian border and contributed to stimulating and productive dialogues and relationships among delegates.

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Advocacy Chair David Pilon and PEC Rep Dean Perry with APA President Dr. Sharon Stephens Brehm at State Leadership Conference in Washington D.C. in March 2007

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CONTINUING EDUCATION COMMITTEE ANNUAL REPORT

The CE Committee has met regularly over the past year. Our mandate this year was focused first on CE events. We sourced speakers for CE events and collected ideas for various types of CE opportunities. The committee also prepared a proposal for mandatory CE that was presented to the Executive. The Executive will then take the proposal to a joint APNS/NSBEP meeting.

The CE Committee is committed to finding CE presentations that are relevant for practitioners in various types of practice and with various populations. A workshop has been confirmed for October 2007 and the committee is planning for 2008. It is also exploring partnering with other groups to bring in more costly speakers or larger events. The committee partnered with CRHSPP in February for a taxation workshop and is planning another joint event with CRHSPP.

The Continuing Education Credits proposal was developed at the request of NSBEP and APNS. Psychologists are one of the few professional groups in this province that do not have a continuing education requirement. All provinces were surveyed as to their current practice and requirements for CE credits. Many provinces had similar requirements. We adapted these to meet our particular needs in this province. We are

confident that such requirements will not be onerous or expensive to meet and will ensure a minimum standard of mandatory ongoing professional development.

I wish to thank those of you who have suggested topics and speakers for CE events. Some of them may take some time to bring to fruition but I can assure you that all suggestions are given serious consideration.

I would also like to thank Susan Marsh who does almost all the planning for a workshop from contacting the speakers to arranging accommodations, to developing the budget. It is a pleasure to work with such a competent individual!

Finally, thanks to the Committee members, who are all so passionate about Continuing Education – Diane Birch, Eileen Donahoe, Chris Ellsworth and Heather Higgins. Our meetings are always lively and informative and productive.

Respectfully submitted,
Carolyn A Humphreys, PhD. Chair.

ADVOCACY COMMITTEE ANNUAL REPORT (continued from page 7)

The 24 Canadian delegates in attendance were able to pursue our own “cross country check-up” of ideas and activities which is always fruitful. The APNS participation at SLC is one of the many tangible benefits of our affiliation with APA. For further information about the State Leadership

Conference, please contact the APNS Advocacy Committee.

Respectively submitted
David Pilon, Ph.D. & Dean Perry, PEC Rep

ISSUES STRATEGY WORKSHOP ~ SUMMARY OF DISCUSSIONS

Maintaining Boundaries: The Provision of Psychological Services by Non-Psychologists

Panel: Julia Holt, Shaun Newsome, Debra Garland, Gerald Hann; Moderator: David Pilon

The Issue Strategy Workshop was devised as a way to bring psychologists together to discuss issues relevant to APNS and all psychologists, and then to come up with concrete steps to address important issues. This 1st Issue Strategy Workshop looks at issues surrounding non-regulated psychological service providers. NSBEP and APNS get inquiries regularly on this topic and want to be able to respond to such questions appropriately. A working group was created to deal with the issue. This panel is comprised of the people on the working group.

Julia Holt – several years practice in Ontario, school psychology and then clinical psychology. Currently living in Maitland building a private practice in Halifax. Background in psychological testing in educational setting. Called NSBEP with concerns about how we deal with the testing issues and joined working group.

Shaun Newsome – I/O psychologist specializing in HR assistance and development. Formerly full-time faculty at Saint Mary's and now in private practice. Interested in issues around employment testing; not advocating that non-psychologist shouldn't be administering tests, but concerned about how the tests are used. Businesses hire and fire and make other important decisions about their employees based on tests that are not administered correctly or assessed in the proper context. Employees are at the mercy of whomever is administering the test.

Debra Garland - Private practice in Dartmouth with an interest in school psychology, children and families – specifically in areas of custody access and parental capacity.

Non-psychologist may well be competent but psychologists may find themselves in court and are penalized because they don't use a psychological test. We need to make people

understand that what we offer as psychologists is more than just the test. What psychologists do has a different value.

Gerald Hann – Works with Breakthrough in area of family & school relations and child welfare. Also 2nd term on NSBEP. Focus on use of non-psychology tests in community service area. Interest in Policy 75 and those who appear on that list may not be psychologists, but if they are on the list they are assumed to be ok. Has people on it Bachelor Fine Arts & Divinity; social workers used interchangeable with psychologists. NSBEP can't deal with any complaints unless it is a psychologist. Brought the issue up at CPAP. John Service comment that they should do something as regulators - talk to test manufactures, government, child welfare agencies.

Key Discussion Points

There was wide-ranging discussion around the issue. This is a summary of those comments and questions followed by a list of ideas. David Pilon's list of key points with specific action steps appears at the end of this document

How should the working group proceed to deal with such issues?

In the past Letters to MLAs has been done; and next week a series of Q & A about what should the public be asking will appear in the provincial Herald. Where do we go from there?

How well are the credentials and training of those who do testing checked?

Unlikely that they are checked, although it is important to do so. We need to advocate for those kinds of checks to be done. Attitude is that the test companies sold them the test so they must be authorized to use them. There is a user qualification form that must be signed but not foolproof.

Is the answer to educate the public? Or to educate the test publishers? Test publishers are only in it to make money and don't really care – how do we educate the test users?

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ISSUES STRATEGY WORKSHOP ~ SUMMARY OF DISCUSSIONS (continued from page 9)

In pain management work physiotherapists will give a test and decide the patients should see a psychologist. But if psychologists disagree then they lose creditability because of the physio's opinion. They see the Test as the Ultimate Answer when it is only one tool.

Concerns whether the public dares to ask the questions. If you ask the question may you not be slapped down? We say they should ask – they get told forget it and when their job is at risk they can't afford to ask.

John Gainer mentioned discussions they had in CB on professional competencies. Non-psychologists raised questions on their ability to administer psychometric assessments. A policy was hastily drafted which proposed that psychologists oversee those doing testing. This resulted in an immediate negative reaction from other health professionals. Then carefully drafted another to maintain relationship with other professions.

Discussion around decision making in test use -- who will use tests and what tests will be used. Decisions are made by non-psychologists because the psychologist has to report to non-psychologist. Psychologists might become involved in overseeing those who are not trained properly, but have a lot responsibility but not a lot of power. After report is finished the psychologist may not know how the report is used.

Issues with trying to find the proper tests to measure the right things. Often it's an overall profile approach. Which is also what happens in the school system – a shotgun approach with no concern for the individual issues, nuances and context of the results. Universities use tests many different ways. Intelligence tests – called aptitude tests that are administered, scored, and interpreted by non-psychologists. Should be done by psychologists because they are very intricate. Tests have become so misused that they have lost their value. Unless overseen by those with training results are worthless.

Problem is that we should exactly define what one is. Put “psychological” in the title. Can we define psychological tests? No. What are we left with – a process to doing psychological testing. If the test is called a psychological test then the Act would come into play and we could say definitely that they should or should not be used by non-psychologists.

Under Policy 75, people are vetted as to whether they can offer a service to Nova Scotians, as long as they meet fairly loose criteria. The public thinks they will be referred to psychologist but don't get a psychologist. Then there is the pay issue. If you are poor you get what you get. What about those who are completely unregulated? Doesn't mean they can't do therapy – but there is nothing to protect unregulated practice in Nova Scotia. Attitude is that assessment is going to be quicker, more to the point, cheaper if they don't go to a psychologist.

Formulating a Plan of Action

- Let's be clear within the psychology profession to ensure that all psychologist understand.
- Protection for the public as a key message.
- Consumers are in powerless position, might lose child, not get a job. That's not the route to go.
- We need to lobby MLAs and government ministers. Can we get Departments of Community Services, Education, and Health to clean up policies with a set of standards?
- Communication & coordination with other regulated professionals – create a consensus about non-regulated professions in Policy 75 and then do a group presentation to government.
- Who can we influence? Who are our allies? Identify who are the key policyholders and the key stakeholders and identify what they need to know.

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APA COUNCIL REPORT - Sex, Religion, and Record Keeping

After much debate, APA Council passed a strongly worded resolution supporting the theory of evolution and opposing the teaching of "intelligent design" as part of science curriculum.

The matter came up at the February meeting of the Council of Representatives in Washington, which I attended on behalf of APNS. APA's support for the theory of evolution came in response to an increasing intrusion into the school curriculum by the Christian right, particularly in the American bible belt. One representative from a southern state said that science teachers are required to paste stickers on the cover of science texts stating: "Evolution is only a theory."

The resolution was drafted by The Committee on Animal Research and Ethics (CARE) because of what it perceived as "a recent resurgence of anti-evolutionary theory activism". Various other scientific groups have drafted similar resolutions concerning the theory of evolution and/or the teaching of intelligent design, including the American Assn for the Advancement of Science.

There was no vocal support for the teaching of creationism or intelligent design in science classes at Council, but there was considerable debate about the fallout of the proposed resolution.

Representatives from some states said that such a stand will lose clients for psychological services, hitting psychologists in the pocket book and depriving potential clients of needed services. Legislators whose support is needed on other issues (such as prescription privileges) may be alienated by APA's public stand on this issue. To deal with such concerns, a variety of amendments were proposed that would either weaken the resolution or mollify those who might be offended by it. Those who advocated a strong stand on the matter argued against any watering down of the resolution. Finally, Past President Gerry Koocher noted that the number of possible amendments was infinite, and he moved to cut off debate. That motion passed, as did the vote of the original. APA has taken the position that "The science,

practice, and application of psychology depend on science education and the culture of evidence and critical thought to which it contributes.

Evolutionary theory is one of the most powerful elements of contemporary science." Intelligent Design, on the other hand, "has not withstood the scrutiny of scientific peer review of its empirical, conceptual, or epistemological bases and thus is not properly regarded as a scientific theory." APA "joins other leading scholarly organizations in opposing the teaching of Intelligent Design as a scientific theory." For more info on this, go to: <http://www.apa.org/releases/IntelligentDesign.pdf>

Sexualization of Girls and Women

Council endorsed an APA task force report on the sexualization of girls and women; the report was then released at a press conference with excellent press coverage. The report defines sexualization as occurring when a person's value comes only from her or his sexual appeal or behaviour to the exclusion of other characteristics, and when a person is portrayed as a sex object.

The APA report blamed the media, especially advertising, for an increase in sexualization that includes very young girls. It gave a host of examples from magazines, television, the internet, video games and music videos, and merchandising in general: young girls dressed as sex objects (French maid costumes are now available in preteen sizes), dolls with sexual clothing such as fishnet stockings (Barbie is now available in a "bling-bling" style), thongs marketed to seven-year-olds, adult models dressed as girls (e.g. a pop star dressed as a school girl with her shirt unbuttoned, licking a lollipop).

According to the report, sexualization can lead to a lack of confidence in one's body, depression and eating disorders. It has an impact on cognitive functioning and healthy sexual development. Sexualization was implicated in increases in the use of plastic surgery, smoking in young teenagers, and failure to use condoms during sex. *Continued on page 12*

Reports

APA COUNCIL REPORT - Sex, Religion, and Record Keeping (continued from page 11)

Increased cigarette use may occur, in part, because girls believe smoking will help them control their weight.

Although increasing sexualization of young girls was a major focus of the report, sexualization of boys and young women were also discussed. The report noted that young males have posed provocatively in underwear ads. With regard to young women, evidence was cited indicating that women thought to be "sexy" were more likely to be discriminated against when applying for skilled jobs, but not when applying to be receptionists.

The report, which was hailed by APA Council, made a number of recommendations. It called on parents, school officials, and health professionals to be alert for the potential impact on girls and young women of the current climate of sexualization. Parents were encouraged to talk to their daughters about the choices girls make in clothing, or to point out objectionable portrayals of women on television. Parents of boys should consider how early sexualization affects their sons. Later in life, heterosexual men are more likely to experience satisfaction with their romantic relationships when they do not objectify women. It advised that sex education programs teach children media literacy skills, including information about the negative effects of images portraying girls as sex objects. The task force called on governments to reduce the use of sexualized images in the media and advertising.

Some Other Matters

Council approved revisions to APA's Record Keeping Guidelines, which updated the guidelines based on new communications and record-keeping technologies. For more on this: www.apa.org/practice/recordkeeping.html.

Council approved new Guidelines for Psychological Practice with Girls and Women. www.apa.org/about/division/girlsandwomen.pdf.

Council passed without dissent a strong resolution against laws that discriminate on the basis of sexual orientation. In the current era of social

conservatism there has been an increase in legislation targeting gays, lesbians, and bisexuals. These laws generally restrict access to rights and services on the basis of sexual orientation.

This resolution raised a potential problem for some representatives: when APA passes such motions, what are local associations expected to do? What resources might be available from APA? How can the inevitable negative publicity in some jurisdictions be countered? Council decided to consider this matter of local impact further, but separate from the resolution against discrimination on the basis of sexual orientation.

Another item of business on which I reported earlier, by e-mail, was the decision by Council to stop APA accreditation of academic programs in Canada. It was felt that this job is well done by the CPA Committee on Accreditation, and fielding joint teams for dual accreditation is redundant, a waste of time, and unnecessarily insulting to the Canadian accreditation process.

The American Psychological Association has 145,000 members. More than 68% of its funds come from publishing journals and books and associated licensing; only 14% comes from dues. The organization is governed by its Council, assisted by the Board of Directors and the Executive Committee. Council meets twice a year: In February in Washington DC, and in August during the APA convention – this year in San Francisco. There are 162 members of Council representing 50 divisions and states and territories.

I am beginning my three-year term as the Nova Scotia rep. In addition to Council itself, I attended a number of caucuses held contiguously: the Caucus for State/Territorial/Provincial Associations, the Scientist-Practitioner Caucus, and the Public Interest Caucus. For more information on any item from Council, feel free to contact me at poneill@accesswave.ca.

Respectively submitted
Patrick O'Neill, Ph.D.

PSYCHOLOGICALLY HEALTHY AWARDS - February 7, 2007

Two Nova Scotia organizations received APA Psychologically Healthy Workplace Awards from the APNS and the CN Centre for Occupational Health & Safety. The College of Registered Nurses of Nova Scotia and Scotiabank's Atlantic Customer Contact Centre (Halifax) will be recognized at an Awards Ceremony on February 8th at the World Trade & Convention Centre.

"In this time of high job stress and increasing demands on employees, these workplaces have made it a priority to create environments that are sensitive to the health and well-being of their employees," says Arla Day, the Canada Research Chair of Industrial/Organizational Psychology at Saint Mary's University, and chair of the Psychologically Healthy Workplace Committee. "It's great to see organizations 'getting things right,' and we want to reward these organizations by highlighting their best practices, and encourage other organizations to follow suit."

The Psychologically Healthy Workplace Award was created to recognize organizations that

understand the link between employee health and well-being and organizational performance. Award winners implement a variety of workplace practices in an active effort to create a positive work environment. Five Nova Scotian organizations were recognized in 2005, with one of the organizations, Secunda Marine Ltd, going on to receive a Best Practices Award at the International Psychologically Healthy Workplace Award ceremony in Washington, DC last March. Secunda was the only Canadian organization at the ceremony recognized for their work in developing a healthy workplace.

The judging process for the award was conducted by a multidisciplinary team with workplace and health experts from Saint Mary's, Dalhousie, and private practice. This team rated organizations through their written applications, interviews, employee surveys, and site visits. Each organization was judged on criteria including employee involvement, health and safety, employee growth and development, work-life balance, and employee recognition.

Continued on page 14



Welcomes its Latest Members

**Nicole Forgeron
Marc-Robert d'Entremont**

**Jennifer Stapleton
Janice Evans Marc Kepner**

We would like to thank the membership for supporting APNS in its efforts to promote the interests of Nova Scotia psychologists through advocacy, continuing education and the support of special interests in the field.

Reports

PSYCHOLOGICALLY HEALTHY AWARDS February 7, 2007 (continued from page 13)

The College of Registered Nurses of Nova Scotia was recognized for its focus on employees: employees are involved in decision making and are empowered and recognized for their accomplishments. Shaun Newsome, a Halifax-based consultant, was impressed by the commitment of the College to providing a psychologically healthy workplace for its employees. "It was an easy decision to nominate them for an award; the number of staff-driven initiatives in key areas and the level of employee commitment to these initiatives was very remarkable." These views were echoed by Donna Assh, a clinical psychologist in independent practice, who was impressed by the involvement and organizational pride demonstrated by the employees.

Linda Hamilton, Executive Director of the College, said she was "thrilled that the College is receiving this recognition after three years of dedicated work by our staff. It is especially significant because we advocate for positive nursing practice environments. Now, I can confidently say that the College is 'walking the talk'...that our organization is a model for others."

When you think of a typical call centre, "calm, beautiful, & uplifting" aren't the first words to come to your mind. But that is exactly how Dalhousie clinical psychologist David Mensink described the atmosphere at Scotiabank's Atlantic Customer Contact Centre (Halifax). This Centre was recognized for its supportive atmosphere, career advancement policies, and vibrant team environment, which have resulted high employee morale and low turnover. "Our business is all about the people" says Dave Dobrosky, Vice President, "our team is working to create a culture

where employees are valued and feel supported in their roles."

"These accomplishments are amazing in any organization, but are especially outstanding in a competitive customer service-based industry, in which the health of workers typically is overlooked" notes Debra Gilin, professor at Saint Mary's University, and specialist in organizational conflict management.

In a recent study conducted by Saint Mary's researchers, Lori Francis and Kevin Kelloway, about 50% of Nova Scotia employees reported work-family conflict, with over 60% of them reporting high workloads, and over 70% reporting high conflict. About 10% of these employees also reported that they had been a victim of workplace violence and aggression. "These things can lead to long-term negative health outcomes. It is up to the companies who employ individuals, as well as the employees themselves, to look for ways to reduce the amount of job stress. These two award-winning organizations should be commended for their work in promoting healthy workplaces" notes one of the study's authors, Lori Francis.

According to a 2004 poll by the American Psychological Association, two-thirds of both men and women say work has a significant impact on their stress level, and one in four has missed work because of stress.

For more information about the Psychologically Healthy Workplace Award, which is supported by the APA, the CN Centre for Occupational Health & Safety, APNS, and Saint Mary's University, please contact Dr. Arla Day at Arla.Day@smu.ca.



*Psychologically Healthy
Workplace Award*

ISSUES STRATEGY WORKSHOP ~ SUMMARY OF DISCUSSIONS (continued from page 10)

What other groups are regulated? Social workers, psychologists and the Canadian Certified Counselors. Do they share common concerns? Pitting ourselves against other professions is not the way to go. If we did we could anticipate a backlash from CCC. Also we are seen as self-serving unless we involve other groups. Working with other groups also makes the issue clear. It is not just the expertise argument. Protection for public (liability) is something government understands. Must convince government that service providers must be accountable.

Other stakeholders:

- Does Blue Cross have some criteria that we could use? Might they be an ally? Sun Life? In the past tried to educate insurance companies, but not effective. They are most swayed by policyholders than by groups. We need to encourage those covered to speak up.
- But some insurance agencies have asked for input. What can and how do we give them info?
- What about nurses and occupational therapists and other regulated health professionals?
- Hospitals? Unions? Which ones would be ours friends? CUPE?

Things we might do:

- Status of Omnibus legislation in NS? There is a report about it – got deferred because Mental Health Act put it off. Should follow up on it.
- Letter to government – inform government of our plans and concerns ask for their input; a joint letter from APNS /NSBEP and others? Tell them “We are planning a public awareness campaign.” Ask: What do they want to protect, how can they help to solve it?
- What would be the collective will about moving on a Scope of Practice Act? Updating the Act? The government isn’t going to put into the legislation anything that won’t work

for them. Our Act may have some scope of practice in it. Have a test case to get 1 – 2 out there and show they have violated the Act. Exploring the scope of practice question and looking at what activities are going on in unregulated sense.

- Need a communications plan that would include press releases, press conference, fact sheets, catchy title, website links, place where people could submit comments, ListServ so members can discuss, APNS newsletter questionnaire, presentations that would be done by psychologists across NS regions. Contact service clubs around province to do these presentations. Dean Perry is APNS Public Education Rep and can organize “canned presentations” to take on the road.
- All possible stakeholders should be contacted.
- Identify which jobs are APNS or NSBEP
- APNS job postings – should be only those seeking psychologists.
- Gerald: CPAP is going meet with test manufacturers – an approach from all regulatory bodies.

On the following page (Page 16), we have compiled a summary of Key Issues and Action Steps from Moderator David Pilon’s flip chart.

These will be reviewed and addressed by the working committee. If you are interested in getting involved, you are invited to join the working group. Contact the APNS office at apns@apns.ca or phone 902-422-9183

Continued on page 16

ISSUES STRATEGY WORKSHOP ~ SUMMARY OF DISCUSSIONS (continued from page 15)

Key Ideas Discussed:

- With respect to our advocacy actions (test-user qualifications, Policy 75, etc.), who do we educate? Public? Government? Insurance Companies?
- Test vs. context of test/assessment (Combating the notion that a test is an assessment)
- The importance of highlighting “competency” in many advocacy activities
- Promoting the concept of “informed consent”
- The role of a Psychologist’s oversight in an assessment situation when someone else is administering the tests
- Our ethics code guides us
- Safeguards on distribution of test data
- What makes a test a psychological test?
- We can always learn from what other jurisdictions do
- Insurance companies as an “ally”
- Is there government policy regarding user qualifications
- The notion that professions “own” a body of knowledge
- The “generalist” therapist in mental health
- APNS ought to have traveling strategy workshops
- Title vs. scope of practice limitations and consequences
- CPAP activities
- Working with unions

Concrete Action Steps:

1. Carve out a further section in Policy 75 for Psychologists and psychological services
 2. Advocate with government for only “regulated” service providers within Policy 75*
 3. Identify key groups of insurance policy holders (e.g., government employees = Blue Cross, etc.)
 4. Identify key stakeholders with whom to advocate collectively (e.g., consumer groups, other professional groups, community groups, unions, etc) *
 5. APNS should not advertise “therapist” positions on APNS website
 6. Collect client complaints with insurance companies (APNS newsletter/email questionnaire to members)
 7. Encourage test developers to put “Psychological” in test titles
 8. Create a webpage list serve for APNS members who wish to pursue these advocacy discussions
 9. Explore scope of practice possibilities (i.e, test case, legal costs, etc.)*
 10. Always highlight the “protection of public” in advocacy activities
- * highly rated actions*

Thank you to everyone who participated in this lively discussion. APNS hopes to use this format to discuss other professional issues in future. If you have a topic that could be discussed in this type of meeting, and would attract attendance, please let APNS know.

Depression in Later Life Philippe Cappeliez, Ph.D.

Friday April 27, 2007

Prince Hall, Kings College, Halifax, NS

The workshop will cover the following domains:

- The nature of depression in later life: presentation, prevalence, risk factors, functional limitations
- Psychological theories of depression in later life
- Identifying and assessing depression in older adults
- Evidence-based psychological treatments with focus on cognitive-behavior therapy and reminiscence intervention
- Depression in dementia; psychological treatments in the context of long-term care

Its objective is to provide an overview of depression in later life, emphasizing the distinctive and unique characteristics of psychological practice with depressed older adults with a view of increasing the interest and the expertise of clinical psychologists in offering services to an aging population.



APNS Members \$125

Non-Members \$140

Student APNS Members \$40

Student Non-Members \$60

Philippe Cappeliez, Ph.D. (clinical psychology, McGill University) is professor of psychology and gerontology at the University of Ottawa since 1984. He is also a researcher affiliated with the Elisabeth Bruyère Research Institute in Ottawa which focuses on health of the elderly. His main research interests are in the domains of the functions of reminiscence for adaptation in later life, psychological treatments for depressed older adults, in particular reminiscence interventions, and health and depression in later life. His research is financially supported by the Social Sciences and Humanities Research Council and by the Canadian Institutes of Health Research. He is the author of 3 books, 21 book chapters, and 65 peer-reviewed articles, and has presented his work at numerous conferences in Canada, the USA and Europe.

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The spring semester meetings will be held on
Saturday, March 31 and Saturday, June 2, 2007.

Participants are welcome to attend one or both dates.
Requests for supervision of psychotherapy cases will be considered
on an individual basis.

For information and registration, please contact:

Katherine Warren, MD, FRCPC
255-5991 Spring Garden Road
Halifax, NS B3H 1Y6
Tel: (902) 444-7792
warrenkatherine@hotmail.com

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Date	Speaker	Topic
May 15	Joseph Byrne, Ph.D.	Nonverbal Learning Disability: Diagnosis and Therapeutic Intervention
June 12	Angela Larery, M.S.	Doctoral Candidate Relaxation
September 18	Cheryl Gilbert McCleod, Ph.D.	Getting Your Children To School When They Refuse To Go
October 23	Susan Jerrott, Ph.D.	Hands-On Strategies For Helping Children Who Have ADHD
November 20	Sharon Clark, Ph.D.	Seeking Common Ground: Managing Challenging Adolescent Behaviour
December 4	Joanne Gusella, Ph.D.	How To Talk To Teens About Weight In A Weight Obsessed World

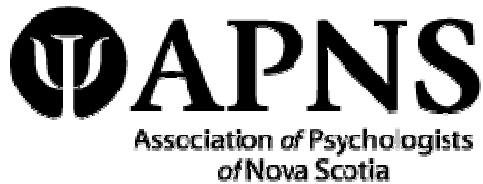
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