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Greetings, colleagues!

Let me begin by thanking David White for reaching out to me when Dr. Cynthia de las Fuentes decided to leave the position of editor in order to join APA's Council of Representatives for Division 45 (Society for the Psychological Study of Culture, Ethnicity, and Race). Congratulations, Cynthia! I would like to also extend a public thank-you to Drs. de las Fuentes, Brian Stagner, Celeste Riley, Jeanette Madkins, Eden Schmeichel, and Gretchen Nobel for their faithful guidance in helping me decide whether to accept the position of editor for the Texas Psychologist. Dr. Stagner and Dr. de las Fuentes, thank you as well for our talks concerning the ins and outs of my new role at TPA.

Those of you who know me well know that I am not one to take the lead on something unless I can make it my own. So, when asked to step in as editor, I came in like a hurricane with many ideas. I began honing my goals for the journal by (some were unattainable) thinking of how I have used the Texas Psychologist, and whether there may be reasonable changes that would make the journal more appealing to all Texas psychologists. In consultation with the team (Lauren Witt, David White) and past editors, Brian and Cynthia, I whittled the ideas down to those focused on creating columns that would be attractive to a broad readership. The aim is to publish articles that fit into the following categories, each represented by an ongoing column: Independent Practice; Ethics; Multicultural Diversity; Forensic Issues; and Student and Early Career.

In addition to the columns, and in keeping with our 2017 President, Dr. Carol Grothues’ theme, Growing Psychology, the Texas Psychologist (TP) for 2017 will highlight how psychology is growing in Texas. The definition of growth, in my mind, is broad. Psychology can continue to expand in Texas in a number of ways, whether it be through psychologists engaging in the provision of cross-discipline training, psychologists volunteering their time and energy in advocacy efforts, psychologists creating new niches for the field and encouraging students to broaden their interests and activities (including those of the business of practice), or by simply educating Texans on what psychologists do. In these ways and more, we will build our profession. To highlight this evolution, TP will spotlight at least one local area society, student, or Texas psychologist per issue and show how this person or entity is forwarding psychology in our state. I anticipate the year will bring a host of inspiring ideas. In the current issue, Sam Houston Area Psychological Society (SHAPA) shares their efforts. Thank you to Drs. Henderson, Elliot, Conroy, and Massey, and graduate students, Ms. Mattos and Ms. Formon from the SHAPA for being the first LAS to submit your story and for contributing to the growth of our profession.

In this issue's Forensic/Legal column, Dr. Floyd Jennings explores a common difficulty faced by those of us who do forensic work, an area of psychology that has grown tremendously in recent years. In his article entitled, Psychologists as Expert Witnesses: A Plea for Neutrality, Dr. Jennings discusses the neutral role that psychologists should ethically adhere to when involved in a forensic matter, and how this role often conflicts with attorneys' duties for due diligence on the part of their client. He offers sage advice on handling the pitfalls associated with taking sides, and how to avoid doing so in the first place.

In this issue's Multicultural column, you will find an enlightening piece by Ms. Anna Abate, a clinical psychology doctoral graduate student from Sam Houston State University, entitled, Racial Disparity in the Justice System: Moving Forward for Youth. Ms. Abate offers an analysis of the probable effects of internalized biases (whether through race discrimination or internalized racism) on self-efficacy and self-esteem of youth. She offers suggestions on how psychologists can affect change in this growing concern.
Finally, while the changes I would like to make to the TP are good in theory, I have come to understand that it will be a work in progress, because of the lack of submissions typically received. Thus, as our 2017 TPA President stated in her piece What is TPA Doing?!: “We could do nothing without you!” Your TPA Leadership team and many of your colleagues are working tirelessly on your behalf, writing educative pieces, talking with legislators, and making personal connections with their legislators and community members for the betterment of our practices, our training programs, and our future.

I hope you enjoy this issue of the TP and that you find it useful. Please remember, however, just as TPA can do nothing without you, as your new TP editor, I can publish nothing without YOU! I invite all students, academics, independent practice folks, closeted authors, to get out your computers and start writing. I NEED YOU, the TP NEEDS YOU; TPA NEEDS YOU! Please consider helping me to enhance and elevate this journal to be increasingly useful to us all and the public! I look forward to seeing your submissions in any of the column areas or spotlight focus on your LAS, a student, or a Texas psychologist, and hearing your feedback. I will look forward to getting to know many of you in my new role as your editor.

Thank you!
Jennifer

From the President

What is TPA Doing?!?!?!

Carol A. Grothues, Ph.D.
Independent Practice
Dripping Springs, Texas

This question has been asked of me multiple times already this year in light of the significant changes facing psychologists in Texas, and the frustration many of us are feeling. I have tried to respond to emails and phone calls to answer this question, but decided that it would probably be best to provide a summary of all that TPA is doing – and plans to do this legislative session.

We successfully crafted a definition for the practice of psychology that was approved by a workgroup of diverse stakeholders, and obtained a sponsor to file it. Representative Garnet Coleman (D-Houston), a long-time champion for mental healthcare issues in Texas, filed HB 3266, which redefines the practice of psychology and includes vital elements like “diagnosis,” our ability to consult, perform neuropsychological assessment, and provide psychological expertise and services in legal proceedings.

We obtained sponsors for additional legislative agenda items: prescriptive authority (HB 593) and protection from civil liability for reporting of gun violence (HB 1616). Special thanks to Dr. Cheryl Hall and Dr. Rebecca Hamlin for seeking and developing the relationship with legislators to move them to sponsor such important legislation.

We successfully found a sponsor for the PSYPACT bill – an interjurisdictional compact bill that will allow unlimited telepsychology across state lines and temporary in-person psychological practice in another state (up to 30 days/year), for psychologists only. Developed by ASPPB, this compact will go into effect when the bill passes in at least 7 states. Specific rules governing these issues will be developed by each state board but will hopefully add
Submit an article

*The Texas Psychologist* is seeking submissions for its upcoming 2017 issues. We are seeking content in the following areas: Independent Practice; Ethics; Multicultural Diversity; Forensic Issues; and Student and Early Career. Collaborations with students are encouraged. 1000-2000 word count; APA Style. Send to drjenniferrockett@gmail.com. Article deadlines for the upcoming issues are as follows:

**Summer issue: June 2nd | Fall issue: August 11th | Winter (2018) issue: December 1st**

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continuity of care for patients who move across state lines and increase access to care, as well as make it more feasible for forensic psychologists to perform evaluations in other states.

☑️ The TPA Legislative Committee, a committee of 14 member volunteers, meet by conference call every Monday during the Legislative Session to review all bills relevant to mental health and psychologists. They vote weekly to determine action of support, opposition, or seeking amendment – especially to include more psychologists in policy making situations. There are more than 4000 bills introduced each session – and we estimate that this committee will need to carefully review 100-150 bills, and continue to monitor a significant number of these.

☑️ We continue to organize and plan our strategy to deal with (1) consolidation of TSBEP; (2) the loss of the oral exam and post-doctoral experience requirement, (3) LSSPs wanting to expand their practice to private schools, and (4) LPAs seeking independent practice.

☑️ We will organize and host three Legislative Days at the Capitol, encouraging psychologists to come to Austin to meet face-to-face with their legislator to discuss important legislative issues. We will also recruit psychologists to testify during vital hearings and make immediate phone calls as needed through action alerts.

☑️ We also helped advocate for federal legislation. TPA and the APAPO team up to send Texas leaders to the Practice Leadership Conference (PLC; formerly the State Leadership Conference) each year. We had nine representatives attend PLC this year and we learned that our issues of consolidation were affecting many other state psychology boards.

☑️ We participated in Hill visits to advocate for including psychologists in the Medicare definition of physician, and this year we expressed a need to maintain the “good parts” of the Affordable Care Act as the government is moving to repeal and replace this act—especially maintaining mental health parity. There has been a significant increase in the number of individuals who can now receive therapy and substance abuse treatment since the implementation of ACA, and any change that reduces this is a move backward, not forward.

☑️ Other TPA committees continue to work in areas outside of Legislative efforts. Our membership committee is busy reaching out to those members who did not renew as well as seeking new membership. We want to find ways to increase membership because that is the ONLY way we can make a difference with these issues we face legislatively and at the policy level (i.e., reimbursement rates). We have a Practical Practice Committee chaired by our Director of Professional Affairs, Dr. Brain Stagner, to provide members immediate information about issues that affect the daily practice of psychology. We also have a Convention Planning committee, chaired by Dr. Sydney Kroll, who are working on soliciting strong program submissions for convention and inviting speakers we want to hear from that would improve our professional development.

TPA is busiest during the Legislative Session, but works year-round, every year, to accomplish these tasks. I completely understand why many psychologists feel frustrated with the changes we are being forced to deal with this year – I share your frustration. TPA is the only organization in this state that is working to deal with these issues. However, TPA membership reflects only ONE-FIFTH of the licensed psychologists in Texas. Yes, that means that you are paying dues and giving time to help maintain the profession for the other 80% who do not think it is worthwhile to support their state association. This rate is appalling to me and we have struggled for years trying to figure out how to help psychologists understand the importance of supporting their guild organization – and how clearly that works for physicians, chiropractors, and dentists.

We have two primary sources of revenue for TPA – membership and convention. If we want to increase our power, we have to increase our resources and this means revenue. We do not want to continue increasing dues costs; we want to increase the number of dues providers. The Platinum Advocate Membership has been an enormous benefit for TPA and platinum advocates believe that it is personally beneficial as well. We are TPA. While we have outstanding staff managing administrative issues, they account for only four individuals working for TPA. The rest of TPA are all volunteers; members who believe in our profession, maintaining standards of care, and working to ensure access of quality mental health care to Texans. YOU can help be the change you want to see in TPA. TPA is you.

Thank you, members, for your support. We could do nothing without you.

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The Platinum Advocate Membership means revenue. We do not want to have to increase our resources and this reflects only ONE-FIFTH of the licensed psychologists in this state that is working to deal with the Medicare definition of physician, and this year we expressed a need to maintain the “good parts” of the Affordable Care Act as the government is moving to repeal and replace this act—especially maintaining mental health parity. There has been a significant increase in the number of individuals who can now receive therapy and substance abuse treatment since the implementation of ACA, and any change that reduces this is a move backward, not forward.

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Thank you, members, for your support. We could do nothing without you.
Growing in 2017

Jo Vendl, Psy.D.
Texas Psychological Foundation President
Independent Practice
Austin, Texas

The Texas Psychological Foundation is energized and focusing our efforts on growth in 2017. With two new board members, who were introduced in last month’s issue, and ongoing momentum from a very successful 2016, we are setting big goals for growing the reach of our foundation this year. The board is focusing on community connection and building relationships through several points of contact.

University departments of psychology are where we plan to begin growing our connections to community. We all began our careers as students in psychology programs, and some of us continue to be connected through serving as department professors and chairs. The Foundation Board is dedicating themselves to contacting program directors, training directors, advisors, and student advocacy groups to better serve the students in psychology programs. We plan to host social events, put on professional workshops, mentor students, and connect with professors and chairs to ensure we are supporting students in all possible ways. We are also making these connections to generate more buzz about our awards and the poster presentation sessions in order to give more financial support to students conducting unique research in our field.

Social media is another area where we as a board are focusing our growing efforts. With the help of a social media savvy board member, Dr. Marsha Sargeant, our Facebook, Twitter, and LinkedIn pages are once again active. Please find us as @TxPsychFoundation where we will feature articles, award updates, and event details throughout the year.

We need to hear from the TPA membership community if you are a professor, department chair, internship director, or otherwise involved with students in psychology programs. The growth of our connections with departments often depends on a personal relationship. Please contact the board president if you would like us to host a professional workshop, meeting, social hour or other event with your students to provide advice, professional resources, and information about the profession of psychology and the Foundation’s annual awards and grant opportunities.

2017 Legislative Days

April 12 and May 5

Join TPA at the Capitol. Register online at www.texaspsych.org
The Sam Houston Area Psychological Association (SHAPA) is a Local Area Society that comprises psychologists from Walker, Montgomery, and surrounding counties. With members from both private practice and academic settings, the group strives to actualize and enjoy the professional rewards of both academic and applied psychology. SHAPA has benefited considerably from the synergy of the science-practice connection, along with the leadership provided by individual members. At present the association focuses on a number of key principles including professional development (PD); legislative awareness, with a recent eye toward advocacy; generativity, in terms of supporting student development; and social enjoyment and networking. The group atmosphere is relaxed and open, providing members with an environment in which they can consult one another on ethical issues, develop new skills, and locate other professional resources. SHAPA meetings are characterized by having a meal (including wine) along with a PD opportunity, offering continuing education credits often focusing on ethics and issues related to cultural diversity.

Despite being fairly small in numbers compared to other LAS’s in the state, SHAPA has had notable influence on the practice of psychology in Texas through the leadership of individual SHAPA members, as well as the services they have provided to other practicing professionals. Several of SHAPA’s members have been involved in local, state, and national activities related to the practice of psychology. Beyond providing PD opportunities for members, SHAPA has organized and provided a number of PD workshops at TPA. Workshop topics have included the nuts and bolts of private practice, a practitioner’s guide to empirically supported treatments, how to stay out of trouble with the Texas State Board of Examiners of Psychologists, and an introduction to proposed changes in board laws regarding the practice of supervision. In recent years, SHAPA as an organization and its members have consistently been involved in legislative advocacy and recently have voted as an association to register official opposition to Senate Bill 6 (the “bathroom bill”), along with TPA and the Houston Psychological Association.

SHAPA began in the early 1980s, comprised primarily of private practitioners in the greater Montgomery County area, and was originally named the Montgomery County Psychological Association. It initially functioned primarily as a networking opportunity and venue for PD; however, it slowly began to shift its emphasis to the areas noted above. SHAPA’s legislative/advocacy emphasis began through the influence of Dr. Paul Burney, a politically well-connected professional doing a second career in psychology. A natural networker, Dr. Burney developed many relationships, including political ones. Dr. Burney connected with similar-minded individuals, such as Drs. Ron Massey (primary presenter on 8 joint SHAPA workshops presented at TPA), Rebecca Hamlin (began the Disaster Response Network), and Mary Alice Conroy (began the Forensic Special Interest Group in 2002 and was the first Director when it became the TPA Division of Forensic Practice in 2005), and provided mentorship in this area. Dr. Burney’s influence on the private practitioners as well as Dr. Conroy’s influence with fellow professors and students interested in the future of professional psychology training and practice in Texas ensured that the members of SHAPA were aware of the most pressing legislative issues, as well as equipped to address them through venues such as Legislative Day. This level of legislative awareness and involvement continues today, as we plan for yet another Legislative Day and discuss ways that we can be heard on issues that impact our practice.

In the early 2000s, academics, primarily from Sam Houston State University, who were interested in professional practice issues became involved in the LAS. This connection gave rise not only to a name change (officially named SHAPA in September, 2006) but to an emphasis on student development. Solidifying the academic-practice partnership resulted in three tangible impacts on students affiliated with the association, all of which continue to the present day: (1) students have gained practicum experience and provided services under the supervision of SHAPA members; (2) student externs with a policy/legislative bent provide service to the organization each
year (see the student extern perspective below); and (3) the SHAPA membership provides funding for students to attend the TPA convention each year. All of these actions, which show a dedication to developing strong future members of the psychology profession, set SHAPA apart from many other local area societies.

Perhaps the impact of SHAPA’s focus on student development and future success of professional psychologists is best noted by one of the students themselves. When asked to describe the impact of SHAPA on her career development, Laurel Mattos, a current SHAPA extern and Sam Houston State University Graduate Student provided the following:

During my third year in the clinical psychology doctoral program, I transition from a clinical practicum placement at our program’s Psychological Services Center (where I was constantly surrounded by supervisors and students with whom to discuss cases and ask questions) to the local probation department. There, I was often the only psychologist in the building, and although I was surrounded by warm and welcoming probation staff, I keenly felt the loss of a community of my peers. This experience impressed upon me the importance of professional communities, or having a group with common interests and expertise with whom to share ideas and learn from, and propelled me to apply to serve as SHAPA student extern. Thus far, my experience in SHAPA has exceeded my expectations. Students within SHAPA are treated as professionals and colleagues, and as student extern I have been given significant responsibilities. Serving SHAPA is more than a line on my CV - it has given me the opportunity to build relationships with members of our field and learn from a diverse group of individuals. I have learned clinical and ethical issues from individuals with much more experience than myself – recently, I saw this directly impact my clinical practice when I was able to apply knowledge gained in a talk on working with LGBTQQ individuals just days later while meeting with a transgender client. While it was this clinical collaboration that initially drew me to SHAPA, since serving my interest and involvement in professional issues and public policy has grown substantially. I have had the opportunity to meet important members of TPA, advocate to my local state representatives, and will be able to join in Legislative Day this spring. Becoming a member of SHAPA has prepared me to be a more knowledgeable and active psychologist, and I will carry these lessons with me as I start my career.

Want to connect with your local area society?

If you’re interested in getting involved in your own local area society, visit the LAS page of TPA’s website to contact your area’s LAS president.

www.texaspsyc.org/?LocalAreaSocieties
The deaths of Michael Brown, Freddie Gray, Eric Garner, Sandra Bland, and many more have (most recently) prompted numerous concerns of police bias against Black and minority individuals. In fact, there has been a considerable amount of research on criminal justice decision-making in recent decades, and several researchers have investigated the extent to which offender race plays a role in criminal justice decision-making (Wu, 2016). It is well documented that racial/ethnic groups are differentially involved in the justice system (McNulty & Bellair, 2003), and higher rates of incarceration of adult Black Americans than White Americans has led to research regarding racial differences within the legal system, specifically racial biases (Rattan, Levine, Dweck, & Eberhardt, 2012).

Offender and defendant race and ethnicity has been found to play a significant role in criminal justice decision-making. For instance, research has found that Black and Hispanic males are significantly more likely to be incarcerated and receive longer sentences than similarly situated White males (Steffensmeier & Demuth, 2006). Research analyzing statewide sentencing outcomes in Pennsylvania for 1989-1992 found that young, Black males were sentenced more harshly than any other group and that race was most influential in the sentencing decisions of younger rather than older males (Steffensmeier, Ulmer, & Kramer, 1998).

As many arrests in the United States do not go beyond the charging phase or even to sentencing in front of judges or juries, research has also been conducted to examine the extent to which an offender’s race affects prosecutorial decisions. Overall, an offender’s race and ethnicity was found to play a significant role in prosecutors’ decisions to file a charge or pursue a full prosecution (Wu, 2016). More specifically, Black and Hispanic offenders faced greater odds of being charged or fully prosecuted than White offenders (Wu, 2016). These differences are found in youth as well. For example, it has been found that compared with White youths, Black and Hispanic youth were significantly more likely to be sentenced to prison instead of jail and jail instead of probation, while White offenders (compared with Black and Hispanic youths) were more likely to be sentenced to probation instead of incarceration (Jordan & Freiburger, 2010).

The effects of race and ethnicity on decision-making have also been studied in police officers. In a computer simulation that asked participants to make quick decisions about whether or not to shoot a potentially threatening individual, unarmed Black targets were more readily shot than White targets (Correll et al., 2007). Furthermore, using data from 125,000 pedestrian stops by the New York Police Department over a 15-month period, researchers found Black and Hispanic individuals were stopped more frequently than White individuals, even after controlling for precinct variability and race-specific estimates of crime (Gelman, Fagan, & Kiss, 2007). Research on arrest decision-making has found that in encounters without complainants, the suspect’s race had a direct impact on decisions to arrest, with Black suspects arrested more (Smith, Visher, & Davidson, 1984). Furthermore, research suggests Black youth are more vulnerable to police contacts than are Hispanic youth, who are more at risk than Whites (Fine & Cauffman, 2015).

Given these reported biases, it should come as no surprise that racial and ethnic groups differ in their perceptions of the legal system, with Blacks typically holding more negative views (Lee, Steinberg, Piquero, & Knight, 2011; Reitzel & Piquero, 2006). Research from Fine and Cauffman (2015) found that Black youth view the justice system as the least legitimate and most cynically, followed by Latino youth and then White youth.

Rates of offending also differ by race/ethnicity. The rates of involvement in serious violence are higher for Blacks than Whites (Morenoff, 2005), and McNulty and Bellair (2003) found that Black, Hispanic, and Native American adolescents reported significantly higher involvement in serious violence than White adolescents. Taken together, what do these racial biases, differences in perception of the justice system, and differences in offending patterns mean, especially for youth and juvenile
offenders? It could be that minority youth (and adults) internalize this bias, which may ultimately impact their self-efficacy and self-esteem. For instance, it may be that knowledge of a bias in the justice system leads to negative perceptions of the justice system which then produce internalized racism that in turn increases offending behavior in minority youth. In fact, internalized racism has been found to be a risk factor and key predictor for major components of the propensity for violence in Black youth (Bryant, 2011).

Furthermore, exposure to racial discrimination may impact offending patterns as it can decrease self-esteem and self-efficacy in youth, with lower levels of self-efficacy associated with risky behaviors such as aggression (Sanders-Phillips, Settles-Reaves, Walker, & Brownlow, 2009). Additionally, research suggests that maladaptive behavior may derive from increased perceptions of discrimination or internalization of minority status (Gil, Vega, & Dimas, 1994). Specifically, in a study of male Hispanic adolescents, researchers found that low self-esteem stems from acculturative strains (Gil et al., 1994). As a result, acculturative stressors such as perceived discrimination may then lead to aggression through lowered self-esteem. In fact, research has found that acculturation processes impact Hispanic youth’s aggressive behaviors (Smokowski, David-Ferdon, & Stroupe, 2011). Further, using a sample of serious juvenile offenders, one study examined relations between perceptions of the legal system, perceptions of chances for success, and recidivism, specifically examining racial differences (Abate & Venta, under review). The results indicated that, in Black and Hispanic juvenile offenders, but not White, perceptions of chances for success mediated the relation between perceptions of the legal system and recidivism, indicating that negative perceptions of procedural justice may drive decreased perceptions of chances for success, which, in turn, explains future recidivism in ethnic minority adolescents (Abate & Venta, under review).

What can psychologists do?

1. Work to Create Systemic Change. Through research and advocacy, Texas psychologists are in a position to document disparities within the criminal justice system and advocate for those impacted by biases policies. Advocacy efforts include reaching out to legislators and providing training and consultation to law enforcement and the judicial system. Consider presenting at a criminal justice and law conference.

2. Empower Ethnic Minority Youth. Psychologists work with youth to combat internalized racism by developing interventions that foster beliefs in youth that they are capable of success. Self-empowerment and self-affirmation are paired with providing youth with tools for externalizing acts of bias and discrimination.

References


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Overview:
Psychologists are often seduced or convinced to become advocates in judicial proceedings when neutrality is a far wiser course.

When psychologists become involved with the courts as experts (issues of subpoenas and court orders appertaining to releases of information notwithstanding) there are very frequent, near-inherent, ethical conflicts. In the following, I will review this issue and speak about the role of experts that leads into areas of conflict. This is a work in progress, and comments, and differences of opinion, are both sought and welcomed. But first, some background:

Legal Issues Related to Experts:
Tex. R. Evid. 702 states:
A witness who is qualified as an expert by knowledge, skill, experience, training, or education may testify in the form of an opinion or otherwise if the expert's scientific, technical, or other specialized knowledge will help the trier of fact to understand the evidence or to determine a fact in issue.

There are different types of witnesses: Fact witness and expert witnesses. And experts may be testifying or non-testifying. In addition, experts may be court-ordered or retained. Each of these options comes with ethical baggage. For example, psychologists – though they may be classified as experts – many times testify as fact witnesses. This is true in both civil and criminal matters where the psychologist is treating a party to the proceedings and is asked to describe the purposes, course of treatment and diagnosis – though not related to the issue before the court. Such may occur in a family law case, other civil case, or in a criminal case. The expert is not, in these circumstances, opining upon an issue before the court, as such. Psychologists may serve as evaluators or treaters – both under court order, and with differing rules that apply.

I would argue that the primary function of experts, is to assist the trier of fact – either the judge or jury. That issue is a dominant factor in understanding the role of the psychologist, as we move through the following discussion.

It may be a relief to know a bit about witness immunity. Traditionally, expert witnesses enjoyed absolute immunity for utterances in a juridical proceeding. And in general that is the case; however, there are limitations. That is, experts who offer testimony in court proceedings are immune from liability to a certain degree. For example, in Bird v. W.C.W., 868 S.W.2d 767 (Tex. 1994), the witness wrongly diagnosed a child as having been abused by his father – but was held not liable to the, then, supposed perpetrator for having reported the suspected abuse. In James v. Brown, 637 S.W.2d 914 (Tex. 1982) the court held that the doctor's communications to the court of their diagnosis could not serve as the basis of a defamation action, no matter how negligently the diagnoses were made! But the court opened the door to damages on others grounds. Consider Deatherage v. Examining Board of Psychology, 948 P2d 828 (Wash. 1997) where the Washington Supreme Court held on the single issue of witness immunity that such immunity cannot be raised as a defense to a state licensing board's initiation of a professional disciplinary proceeding. In short, you may not be liable in a civil suit but to the Board liable for misconduct.

In addition, there issues about confidentiality and privilege that apply when psychologists testify, but those issues are beyond the scope of these comments save to note that there is essentially no privilege in criminal proceedings save that appertaining to substance abuse information. The provisions of Texas Health and Safety Code Chapter 611 can be read by all, but the limitations on releasing information apply only in civil proceedings.

Differing Roles of Psychologists and Lawyers
Lawyers are unabashedly advocates for their clients; psychologists are not advocates in
An advocate, in the discharge of his duty, knows but one person in all the world, and that person is his client.

To save that client by all means and expedients, and at all hazards and costs to other persons, and, among them, to himself, is his first and only duty; and in performing this duty he must not regard the alarm, the torments, the destruction which he may bring upon others. 3

For, psychologists, on the other hand, subjects of forensic evaluation are not patients or clients; 4 for whom a host of duties would arise. And the tone or thrust of the Specialty Guidelines for Forensic Psychology 5 are quite different that the Disciplinary Rules for attorneys. For example, consider the language of Rules 101 and 102 – emphasizing "accuracy, honesty and truthfulness in the science, teaching and practice of forensic psychology"; or the necessity for impartiality, striving to be unbiased, and avoiding "partisan presentation." Examiners are encouraged to "focus upon legally relevant factors;" 6 as well as present alternative interpretations of data. Board rules specifically prohibit advocacy (in the legal sense as appertaining to a role in a legal proceeding).

Lawyers, however, see psychologists – and other experts – as merely tools in the creation of a narrative that will exculpate their defendant (in criminal proceedings) or lend credibility to the position espoused by either the plaintiff or defendant in civil matters. That psychologists would be interested in "the truth" is often said to be naive; for "that's not the way the system works." Consequently, in criminal proceedings, defense counsel may eschew a county agency that provides competency and sanity evaluations as inherently biased; e.g. "The just work for the state." Responses I have heard include, "We want our own examiners" – both so that information would not have to be shared, as would be the case in an independent court-ordered examination, but because a retained expert is thought to be more malleable and likely to produce a report that would aid the party retaining him or her.

As a result, both parties in legal proceedings often obtain retained experts – some testifying and others who review materials that would assist in impeaching the opposing expert.

A Plea for Neutrality

I would argue that the profession will be far better served in the long term if psychologists refuse to become tools of either party in a legal proceeding. Neutrality is not an absolutist goal, but a reasonable goal. Psychologists should have nothing at stake in the outcome of a legal matter – but if a witness, then we may have much at stake in terms of the necessity to present information clearly, fairly and without either rancor or hauteur. This does not mean that one is unbiased, but that the essence of being a professional is not lack of bias, but that one knows their own biases and can either suspend them in a specific context, or hold a bias which favors neither side. For example, and from a slightly different perspective, psychologists may choose to be biased not in favor of either party, but in terms of the court and the necessity to serve the court well in presenting information – in truly serving the interests of justice by assisting the trier of fact.

But, sometimes, experts become enamored off their own role and contribution and while legal opinions are rarely humorous (or pithy) there is a wonderful comment in Graham v. State, 556 S.W.2d 941 (Tex. Crim. App. 1978) where the court pointed out that legal decisions are not strictly medical, and were they so "they would be tried in hospitals and not courts." Psychologists are not interested, or should not be interested, in "creating a narrative", as would be defense counsel, or in bolstering a specific outcome.

To be sure, the siren call of fiscal rewards is sometimes such that psychologists go to great length to uphold or strengthen the case of the party who has sought their assistance. To so do is to contribute to the oft held beliefs that opinions are purchasable, that experts are played by counsel like musical instruments producing a specific tune or cadence upon command, and indeed there are thousands of experts who literally make their living solely based upon providing testimony in legal proceedings. Or as was said by authors in a law review journal: 7

Experts who come across as measured and impartial are unlikely to be chosen by either side. Thus, "[a] fool with a small flair for acting and mathematics might be a more successful witness than say, Einstein…..There is a general consensus that the "expert witness industry has grown exponentially and with it the misuse of experts as mere partisan. Mouthpieces."

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1 See references to eschewing advocacy in 22 TAC §465.18
2 Tex. Disciplinary Rules Prof’l Conduct, Preamble
3 The Trial of Queen of England in the House of Lords 1820 3 (1821)
4 22 TAC §465.1(8)
6 Rule 10.01
7 The full quote reads: The issue is not strictly medical, and expert witnesses, although capable of giving testimony that may aid the jury in its determination of the ultimate issue, are not capable of dictating determination of that issue. Only the jury can join the non-medical components that must also be considered in deciding the ultimate issue. That ultimate issue of criminal responsibility is beyond the province of expert witnesses. Were it otherwise, the issue would be tried in hospitals rather than the courts. Graham at 949.
8 Sonenshein, David; Fitzpatrick, Charles. The Problem of Partisan Experts and the Potential for Reform Through Concurrent Evidence, 32 Rev. Litig. 1, UT School of Law, Austin, Tx.
9 22 TAC §465.18
Tips on Maintaining Neutrality

First, I would encourage the expert to be court appointed – preferably paid by the court rather than either party. But, if the order is ex parte, then in the agreement with counsel it is important to iterate that “regardless of the fact that I am retained by you, my primary loyalty is to the court and to assist the trier of fact. Unlike you, I am not an advocate for your client, but an advocate for the truth as best I see it.”

And, if court appointed as an examiner, then the rules must be clear as to who is the recipient of any information gained in the course of the evaluation. In cases involving competency to stand trial, for example, there is a statute which states that nothing gained in the course of the evaluation may be used in any subsequent criminal proceeding – unless the defendant has opened the door.

In the case where the psychologist is providing treatment, it is helpful – in advance – to have the rules specified as to the recipient of any information or record, and stated clearly that the psychologist is not providing any assistance on the ultimate issue before the court, such as determination of parental rights, as a psychologist may be a treater or evaluator but not both in the same case. Similarly, the recipient of any report generated by the psychologist should be identified in advance, as well as the ownership of the records.

Finally, in the case where the psychologist is reviewing records and reports in a civil matter and not expected to testify, common courtesy – maybe, uncommon courtesy should apply such that the psychologists formal - and informal – comments should be respectful, attentive to detail, and empirically based.

The profession of Psychology is strictly regulated under the Psychologists’ Licensing Act (3 Tex. Occ. Code § 501, 1999). Only those who meet the standards set forth by this Act, and the standards of the Texas State Board of Examiners of Psychologists (TSBEP), are eligible for licensure. Becoming a Licensed Psychologist is no easy feat. According to a document produced by the Texas Psychological Association, licensees are required to obtain a doctoral degree [4-6 years of organized graduate study in psychology in an American Psychological Association (APA)-accredited program], pass the Examination for Professional Practice in Psychology (EPPP), pass the Jurisprudence Examination, obtain at least 3,500 supervised practice hours (one must be after conferral or completion of the doctoral degree), and pass an oral examination (“Steps to Becoming a Psychologist,” n.d.) with the goal of protecting the public against unqualified psychologists. Is the training for psychologists sufficient? Are there unnecessary requirements preventing new psychologists from entering the pipeline? The State of Texas 85th Legislature Sunset Advisory Commission addresses these concerns with proposals for new legislation (“Sunset Advisory Commission: Staff Report,” 2016) that may affect the standards for psychologists to be licensed in the State of Texas. One specific step they are trying to eliminate is the oral examination by removing the statutory authority of the TSBEP to administer oral examinations (“Texas Psychology Board Under State Scrutiny,” 2016).

Student + Early Career

Oral Exam: Rite of Passage, Road Block, or Vital Requirement to Assess Competency to Practice Psychology

Kyle A. McCall, B.A.
Director of Communications, Texas Psychological Association Student Division
Rite of Passage

The oral exam has been a time-honored tradition since 1987 (“Sunset Advisory Commission: Staff Report,” 2016) in the competency evaluation of psychologists in the State of Texas. Even experienced psychologists from other states must meet the same license requirements to be licensed as a psychologist in Texas (3 Tex. Occ. Code § 501.262) which means an oral examination is required to be taken either in Texas or in the state where the individual holds their license.

Speaking with psychologists in a variety of settings, I found that many see this portion of the process as a rite of passage. They were required to go through this requirement, therefore, others should be as well. In addition, it was largely expressed that every psychologist should be held to the same standards as psychologists before them to ensure continuity of high standards which is the hallmark of the profession.

Although this sentiment is understandable, is it enough to say, “We’ve always done it this way so why change it?” Unfortunately, it is not. In rebuttal, I have heard psychologists argue that the current way of evaluating competency is not broken, so why try to adjust it? Although this is believed by many, others argue to the contrary (“Sunset Advisory Commission Email,” 2016; “Texas Psychology Board Under State Scrutiny,” 2016; “Another blow to ASPPB-driven board in Texas,” 2017; “Decision Meeting Material,” 2017).

Road Block

The Modern Psychologist reports in their article, “Texas Psychology Board Under State Scrutiny, Recommends Eliminating ASPPB Anti-Competitive Practices” that the TSBEP unnecessarily limits psychologists from entering the pipeline (2016). They argue in the same article that psychologists already go through rigorous training and multiple levels of screening that are fair, whereas, the oral exam creates a “bottleneck entry into the profession” citing number of exams offered per year (“Important Dates,” n.d.), issues with staffing the exams (“Urgent: Oral Examiners Needed,” n.d.), and concerns about fairness and consistency in the administration of the exam. The Chief of Operations for the Modern Psychologist said in an email to the Sunset Advisory Commission, regarding the TSBEP, that “the Oral Exam is an extremely outdated practice that only protects incumbent psychologists from the competition by delaying entrance to the market, to otherwise well-qualified providers,” (2016). The individuals supporting change desire a fairer and more consistent process, removing hurdles that psychologists face when entering the field.

In a 2016 Sunset Advisory Commission Report Staff, the Commission also argued that candidates have already met “rigorous educational, training, and testing requirements” arguably making them qualified to be licensed. In addition, they found that the “oral exam does not consistently evaluate entry-level competency” and has “minimal value” due to the high passage rates (90% over the past four fiscal years) and inconsistency in the examination practices despite protections that have been put in place over the years such as pre-formulated questions and TSBEP work-groups. Overall, the exam is inconsistent, relying on the examiners judgement of candidates’ responses in an exam that requires non-standardized answers. Another fear of the examination is that candidates are only interested in achieving the minimal passing score (Goldberg & Young, 2015) because there is no benefit to achieving the highest possible score or demonstrating highest level of competency. By taking risks and going above and beyond, they risk negative marks on an evaluation which could lower their score.

Furthermore, in the same aforementioned report, the Sunset Advisory Commission suggested removing the barrier of the oral exam to make the licensing process fairer, remove undue barriers to entering the profession, and increase reciprocity and mobility for psychologists interested in practicing in Texas. The Sunset Advisory Commission found that in 2013 half of the states used oral exams in their licensing process. Since then, 11 states removed this portion of the licensing process leaving 14 states remaining. Of those states, only eight used oral exams for the entire process leaving 14 states remaining. Of those states, only eight test the candidates’ competency to practice whereas the other six only use the exam to test jurisprudence. Removing the oral exam requirement would increase reciprocity and address the mental health workforce shortage in Texas.

The Texas Psychological Association said in their 2017 article, “How Psychologists Can Help Alleviate the Texas Mental Health Workforce Shortage” that “there are not enough licensed mental health professionals to meet the needs of Texas citizens’. The Texas Department State Health Services (DHHS) found in their 2014 report that in 2013 there were 566 active, licensed psychologists in the State of Texas indicating a clinical specialty with an average ratio of 47,111 Texans per clinical psychologist in the state. This report also indicated that over two-thirds practiced in Harris, Dallas, Tarrant, Bexar, and Travis counties (the five most populous) making the average citizen-to-clinical psychologist ratio 1:36,232 in those counties leaving the rest of Texas at a 1:86,277 ratio. In addition, DHHS found that “21.0% of Texas' clinical psychologists were 65 or older while another 27.2% were between 55 and 64 years of age. Thus once more, a sizable proportion of the profession (48.2%) will be of retirement age by 2023.”

In response to the need for more psychologists to enter the field, and the rationale given by many sources to eliminate the oral board exam, the recommendation from the Sunset Advisory Committee can be understood. After speaking to a small number of students currently in APA-Accredited Clinical Psychology programs (12 total), I found that their feelings were consistent with the Sunset Advisory Committee and all agreed this requirement should be eliminated.

Vital Requirement

Despite such heavy opposition from many sources, the Texas Psychological Association is holding steadfast with their position to keep the oral board examination as it is currently (“TPA Legislative Alert,” n.d.). The TPAs official position in the ‘alert’, along with talking-points given to their members, is that the, “TSBEP needs to continue to utilize this competency exam as a requirement for licensure” rationalizing that “psychology is a profession that requires face-to-face interaction. It is important that qualified licensed psychologists be required to take this competency exam as it tests a candidate’s ability to successfully interact with clients.”

The TPAs stance is not unfounded. In Goldberg and colleagues’ 2011
The TPAs efforts and concern for the field is admirable. They desire that the psychologists in the State of Texas are held to the highest standard making them some of the most elite mental health professionals in the field today. They fear that by removing the oral exam, the individuals entering the field may not be as qualified and could present a risk to the public. Oral exams in psychology were developed to identify people who have mastered skills needed at an entry level and are competent enough so the public may be protected from unsafe practices (Novy & Kopel, 1996). Even though many oppose, most can agree that protecting the public is of the utmost importance, as is ensuring that each licensed psychologist is competent in their practice.

Furthermore, although there may be faults with the oral exam, the TSBEP is continually improving the process and implores everyone to understand that licensing boards face limited resources, but it is their responsibility to ensure reliability, validity, and fairness in their processes and hope that as they complete ongoing program and psychometric checks there will be more improvements and increased validity (Novy & Kopel, 1996) and desire “nothing less than a psychometrically adequate examination to be acceptable.” The TPA joins with the TSBEP to encourage others to trust the oral exam and assist with its implementation and development (“Why You Should be an Examiner for the TSBEP Oral Exam,” n.d.; “Urgent: Oral Examiners Needed,” n.d.). They are requesting members to reach out to the legislature and inform them they are willing to be a part of the solution.

By offering more qualified examiners and members to assist the TSBEP in improving the oral exam process, many arguments for removing the exam are stripped away.

Conclusion
Although I am a student that is not experienced in the field, I desire the best outcome for our profession that enables mobility of psychologists, allows a fair and consistent entry into the pipeline for license candidates by removing undue burdens, and, in the process, to allow psychologists to come together regardless of the outcome. If the oral exam is taken away, Texas will join other states not requiring this exam. It is the responsibility of everyone in the field, student or professional, to be an advocate for the profession and desire the best outcome. Everyone may not always be in agreement, but we can still work together for our common goal of serving the public regardless of the outcome.

References


Searching for Psychologist positions or for psychology professionals to fill an open position?

Texas Psychology Career Center
Find a Job. Fill a Position. It’s that Easy.

Most job seekers and employers are discovering the advantages of searching online for psychology jobs and qualified candidates to fill them. When it comes to making career connections, the mass market approach of the mega job boards may not be the best way to find what you need. Texas Psychological Association created the Texas Psychology Career Center to give employers and psychology position seeking professionals a better way to find each other and make that perfect fit.

**Job Seeker Benefits:**
- Free and confidential resume postings
- Automatic email notifications when new jobs match YOUR criteria
- Save up to 100 jobs to a folder in your account
- Upload up to 5 career-related documents
- Access to our diverse suite of career resources

**Employer Benefits:**
- Targeted advertising exposure
- Easy online job listing management
- Resume search included with job posting
- Automatic email notifications when job seekers match YOUR criteria
- Member discounts available

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Jo Vendl, Psy.D.
Charles Walker, Ph.D.
Lisa Weaver, Ph.D.
Patricia Weger, Ph.D.
Arlis Wood, Ph.D.
Miguel Ybarra, Ph.D.
Step 1 – Contact Information (Required)

First Name: ___________________ Last Name: ___________________
Preferred Mailing Address: _______________ Home Address: ____________________________________________________________
Business Address: ____________________________________________________________

Work Phone: ________________________ E-mail ____________________________ TSBEP license number __________________

Step 2 – Select your membership category (Required)

- $50.00 /mo  **Platinum Advocate:** Must be eligible as doctoral member per requirements listed below. Platinum membership affords added benefits and resources including: Discounted (50%) convention registration fee, 3 hours of online PD reimbursement up to $75, free doctor finder subscription, free PD at TPA Family Get-A-Way, special badging at convention, recognition in TPA publication and website, and free, unlimited phone consultation with TPA attorney.

- $28.33 /mo  **Member:** Requires a doctoral degree in psychology earned more than 7 years ago, which was conferred by an accredited graduate school, or doctoral level licensure by Texas State Board of Examiners of Psychologists (TSBEP) *if you are new to this category and are not licensed by TSBEP, you must provide a transcript of your college graduate work.

- $14.17 /mo  **Recent Graduate Member:** Requires a doctoral degree in psychology earned within past 7 years which was conferred by an accredited graduate school, or doctoral level licensure by (TSBEP) *if you are new to this category and are not licensed by TSBEP, you must provide a transcript of your college graduate work.

- $14.17 /mo  **Semi-Retired or Disabled Member:** Requires member to be at least 66 years old and/or disabled, working < 20 hours/week.

- $14.17 /mo  **Non-resident member:** Requires residency outside Texas and a doctoral degree in psychology which was conferred by an accredited graduate school, or doctoral level licensure by (TSBEP)

- $25.00 /yr  **Life:** Requires member to be 65 years or older and fully retired and have been a member of TPA for 10 or more continuous years

- $12.08 /mo  **Associate:** Requires a master’s degree in psychology earned more than 7 years ago, which was conferred by an accredited graduate school, or master’s level licensure by (TSBEP) *if you are new to this category and are not licensed by TSBEP, you must provide a transcript of your college graduate work.

- $6.04 /mo  **Recent Graduate Associate:** Requires a master’s degree in psychology earned within the past 7 years which was conferred by an accredited graduate school, or master’s level licensure by (TSBEP) *if you are new to this category and are not licensed by TSBEP, you must provide a transcript of your college graduate work.

- $30.00 /yr  **Student:** Requires current enrollment in a graduate or undergraduate program, in an accredited college or university, leading to a degree in psychology. ($30.00). Proof of current enrollment required (letter from faculty advisor or copy of current semester paid tuition receipt). Renewal/application is not complete without proof of current enrollment.

- Complimentary  **Pre-Doctoral Intern:** Requires written proof from supervisor/employer before membership will be activated. A brief letter/note your supervisor/employer indicating your status is required to be eligible for this category. This membership category is complimentary while you are considered a Pre-Doctoral Intern or employed as a Post-Doctoral Fellow and prior to licensure as a psychologist. Upon licensure, regular member rates will apply.

- Complimentary  **Post-Doctoral Fellow** Requires written proof from supervisor/employer before membership will be activated. *If you are renewing and experiencing extreme financial and/or medical difficulties and would like to apply for Special Consideration Dues status, please attach a detailed letter and $25.00 payment to this form. This status is not available to members who are applying rather than joining.

Step 3 – Select optional contributions

**TPA-PAC** All who contribute >=100 are eligible to vote in TPA-PAC elections

- $1,000  **Platinum Member**
- $500  **Gold Member**
- $250  **Silver Member**
- $100  **Voting Member**
- $___________  **Other**

**Texas Psychological Foundation** All contributions are tax deductible

- $1,000  **Centennial Member**
- $500  **Gold Member**
- $250  **Donor**
- $100  **Friend**
- $___________  **Other**

**Sunset Fund/Legislative Champion** These funds are earmarked solely for advocating the doctoral degree as the entry level into the profession of psychology and to prepare for our next sunset legislation.

- $100  **Legislative Champion**

**Doctoral Defense Fund** These funds are earmarked solely for defending the doctoral degree as the entry level into the profession of psychology from current and future litigation

- ____________  at your discretion

Step 4 – Select optional Division and Special Interest Group memberships - Must be completed annually for inclusion

**Divisions**

- Aging
- Social Justice Issues
- Military
- Neuropsychology
- Forensic Practice ($10 dues required)
- Psychologists in Schools ($10 dues required)
- Psychology of Women ($10 dues required)
- Psychopharmacology ($10 dues required)
- Psychology of Diversity ($10 dues required)

**Special Interest Groups**

- Bi-national Issues (US/Mexico)
- Child/Adolescent Issues
- Disaster Response Network
- Early Career Psychologists (<7 yrs in practice)
- Lesbian-Gay-Bisexual-Transgender Issues
- Intellectual and Developmental Disabilities

**Disaster Response** (check all that apply)

- Mental health volunteer with Red Cross
- You may contact me to provide mental health services following a disaster
- I am trained by Red Cross
- I am trained by Armed Forces
- I am trained by CISM
- I am trained by NOVA
Step 5 - Texas Psychological Association Doctor Locator Service

This section is to be completed only by TSBEPS Licensed Psychologists who wish to participate in TPA’s Doctor Locator Service. Fee: $25.00

Choose your TOP SIX Specialties general areas to best reflect your professional services (if more than six are chosen, only the first six will be listed in your profile)

- 0 Academic/Research Settings
- 0 ADD/ADHD
- 0 Aging/Gerontology
- 0 AIDS
- 0 Addictions/Substance Abuse
- 0 Anxiety/Panic/Phobia
- 0 Anger Man./Impulse Control
- 0 Assault/Rape
- 0 Autism/Aasperger’s
- 0 Body Dysmorphic Disorder
- 0 Bipolar/Mania
- 0 Brain Injury
- 0 Career/Vocational
- 0 Child/Adolescent Behavior
- 0 Child Custody Evaluation
- 0 Chronic Illness
- 0 Consultation/I-O
- 0 Couples Counseling
- 0 Crisis Intervention

Do you accept sliding scale?  Y      N

Client Ages Served:
- 0 Neuropsychological
- 0 Psychological
- 0 Immigration Issues
- 0 Custody

Languages (Proficient in) (Choose all that apply):
- 0 American Indian
- 0 Arabic
- 0 Chinese
- 0 English
- 0 French
- 0 German
- 0 Hebrew
- 0 Hindi
- 0 Hungarian
- 0 Italian
- 0 Japanese
- 0 Korean
- 0 Laotian
- 0 Lithuanian
- 0 Polish
- 0 Portuguese
- 0 Russian
- 0 Somali
- 0 Spanish
- 0 Somali
- 0 Spanish
- 0 Swedish
- 0 Tamil
- 0 Tagalog
- 0 Thai
- 0 Turkish
- 0 Urdu
- 0 Vietnamese
- 0 Yiddish
- 0 Other

Insurance Accepted: (Choose all that apply):
- 0 Aetna
- 0 AHP
- 0 Beech Street
- 0 Benesys
- 0 Blue Cross Blue Shield
- 0 CAPP
- 0 Cigna
- 0 ComPsych
- 0 Corp Health
- 0 Coventry
- 0 GEHA
- 0 Great West
- 0 Health Smart
- 0 Humana
- 0 Interplan
- 0 Magellan
- 0 Medicaid
- 0 Medicare -Adults
- 0 Medicare – Children
- 0 Medicare
- 0 MultiPlan
- 0 One Health
- 0 Pacificare
- 0 PPO Next
- 0 Preferred Health Network
- 0 Private Healthcare Systems
- 0 Secure Horizons
- 0 Tricare
- 0 Unicare
- 0 United Behavioral Health
- 0 United Healthcare
- 0 USA Managed Care
- 0 Value Options
- 0 Other

Evaluations Offered:
- 0 Academic/Research Settings
- 0 ADD/ADHD
- 0 Aging/Gerontology
- 0 AIDS
- 0 Addictions/Substance Abuse
- 0 Anxiety/Panic/Phobia
- 0 Anger Man./Impulse Control
- 0 Assault/Rape
- 0 Autism/Aasperger’s
- 0 Body Dysmorphic Disorder
- 0 Bipolar/Mania
- 0 Brain Injury
- 0 Career/Vocational
- 0 Child/Adolescent Behavior
- 0 Child Custody Evaluation
- 0 Chronic Illness
- 0 Consultation/I-O
- 0 Couples Counseling
- 0 Crisis Intervention

Do you accept sliding scale?  Y      N

Step 6 – Calculate your dues and choose payment method (Required)

**REQUIRED:**
- TPA Annual Dues (Required)

**OPTIONAL:**
- TPA Political Action Committee
- Texas Psychological Foundation
- Sunset Fund/Legislative Champion
- Doctoral Defense Fund
- Division Dues
- Doctor Locator

**TOTAL**

**Mail to:**Texas Psychological Association
1464 E. Whitestone Blvd, Ste. 401
Cedar Park, TX 78613

**Fax to:** (888) 511-1305

Please note: Dues to TPA are not deductible as a charitable contribution, but may be deductible as an ordinary and necessary business expense. A portion of dues and sustaining membership contributions, however, are not deductible as an ordinary and necessary business expense to the extent that TPA engages in lobbying. The deductible portion is 74%.
Their need for care doesn’t stop when they leave your office.

Case managers help patients navigate the health system by coordinating access to care related to their health conditions.

When your patients need extra support for their health conditions, refer them to case management services, a Medicaid benefit for children birth through age 20 and high-risk pregnant women.

Children enrolled in Medicaid (Traditional Fee-for-Service, STAR, and STAR Health) may be eligible. Patients enrolled in STAR Kids should first be referred to their health plan.

To refer your patient, call Texas Health Steps 1-877-THSteps or visit dshs.texas.gov/caseman

*Texas Health Steps is health care for children birth through age 20 who have Medicaid. Case Management can help families of children with special needs find and get services.*
My experience with TherapyNotes has been fantastic!

Firstly, the system is easy to navigate, thorough, flexible, and extremely clinically intuitive. Secondly, technical and customer support has been efficient, fast, and very personal. I am leaving another EHR system for TherapyNotes...gladly. I am very happy that you’ve created such a quality product. Thank you!

Dr. Christina Zampitella, FT, Licensed Clinical Psychologist

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