

North Carolina Family Therapist



Strengthening family, couple, and individual health

North Carolina Association for Marriage and Family Therapy

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P O Box 98073

Raleigh, NC 27624

Toll free 877-862-2638

Local 919-518-1919

cam@nc.rr.com

From the President's Desk— Karen Caldwell, PhD, LMFT

It continues to be an honor for me to serve NCAMFT, an organization that has provided me with a professional home for many years. The mission of NCAMFT is to promote the profession of MFT in order to improve the health and well being of families, couples, and individuals. We continue to focus our efforts on meeting our three strategic plan goals: (1) to have strong involved membership among licensed MFTs, (2) to increase the influence, recognition & parity of MFTs, and (3) to increase organizational involvement of members.

A special thank you to Board members who recently have completed their terms of service as of December 2009: Angela Lamson, Past President; Adina Hertzberg, Treasurer; Keeley Pratt, Student/ Associate Rep from the East; B. Anne Hancock, South Central Chapter Director and Irene Lazarus, Newsletter Editor

A special time during the annual conference this year was the Awards Program in which we recognized a

number of individuals who have made significant contributions to the profession of MFT and to families in North Carolina. Maria M. Velazquez-Constas received the Champion of the Family Award for her advocacy efforts with the Hispanic



community. Jack Mulgrew received the David and Vera Mace Award for his 40+ years of teaching marriage and family therapy at Appalachian State University. The Outstanding Contribution Award went to Irene Lazarus for her many years of service to the NCAMFT members as Newsletter Editor. Two

legislators were recipients of the Legislative Award, and both were important advocates for the update to the NCLMFT statutes in 2009 and for family friendly legislation in North Carolina: (1) Dr. John England is Representative for Cleveland and Rutherford Counties, and (2) Senator Steve Goss represents the 45th District in the State of North Carolina (Alexander, Ashe, Watauga and Wilkes Counties). The recipient of the Graduate Student Research Award this year was Lisa Tyndall of East Carolina University for her research titled "The State of Medical Family Therapy: A Modified Delphi Study." We extend a special "thank you" to all these award recipients for their efforts.



Gil Beeson presented Maria Velazquez-Constas the 2010 Champion of the Family Award



Chris Rodriguez presented Lisa Tyndall the 2010 Research Award

“Sexual Health” A Hot Topic for NCAMFT in 2010 Internal Family Systems Coming in 2011 Emma Wallace, LMFT

Sallie Foley left a memorable impression on anyone who attended our annual conference this year! Wow! Not only was the topic hot, but she was so energetic and passionate about her work that it would have been almost impossible not to have “caught the spirit.” She got very good reviews on the evaluations and one attendee said, “This was the best conference in [their] 24 years of practice.” Some reported, however, that they were overwhelmed by too much detail in two days and would have enjoyed more audience participation. The evaluations were primarily excellent and many wish she could return for “Part II.” The evals were not quite so positive regarding the conference center, however. We did not anticipate so many people and were aware that the meeting space was entirely too small. The other complaints about the hotel will be taken into consideration. Thanks to all of you who commented for your remarks.

We are fortunate to have secured Dr. Richard Schwartz as our presenter for next year’s conference.



Dr. Schwartz earned his Ph.D. in Marriage and Family Therapy from Purdue University. He is the coauthor, with Michael Nichols, of “*Family Therapy: Concepts and Methods*,” the most widely used family therapy text in the U.S. Dr. Schwartz developed Internal Family Systems (IFS) in response to clients’ descriptions of experiencing various parts – many extremes – within themselves. He noticed that when these parts felt safe and had their concerns addressed, they were less disruptive and would accede to the wise leadership of the “Self.” In 2000, Dr. Schwartz founded the Center for Self Leadership in Oak Park, IL, which

offers three levels of training, national and international workshops for both professionals and the general public, an annual conference, publications, and video resources. He is a featured speaker for many national psychotherapy organizations and a fellow of AAMFT. He has published four books and over fifty articles about IFS. His latest book using IFS for couples is entitled, “*You are the One You’ve Been Waiting For*.” We will meet in the Charlotte area in 2011 and the meeting place will be announced at a later date.

Thank all of you for being such good supporters of NCAMFT. I look forward to seeing you next year!

NCAMFT
2011 Annual Conference
Internal Family Systems
Richard Schwartz, PhD
February 24—26, 2011
Embassy Suites
Concord,
North Carolina

Free Member Ads (up to 35 words per ad)

Office space available in North Raleigh. Therapists occupy the majority of the suite. Single office available for one year lease term and an additional office is available for 3 days per week. Flexible arrangements will be considered to support your practice start up. Call 919-451-1719 or email info@shrinc.net.

Professional Practice Report by Chad Jordan, LMFT

Another year has passed and as we look at 2010, the environment seems promising for our profession. We all know that being an MFT doesn't come easy and we continue to face challenges of exclusion at the Federal and State levels. However, momentum is on our side. We are revisiting discussions locally with the Office of State Personnel and we plan to build on the 2009 achievement with the Veterans Administration job classification for LMFTs. Here's to a productive year and, as always, I am here for you as your Professional Practice Chair. So, please let me know of the issues you are facing in our profession and we will work together to resolve.

Highlights

2010 Recommendations to the Legislative Oversight Committee by the Professional Association Council (PAC)

- Establish a process for standardized certification of all non-licensed direct care staff
- Add provisionally licensed to Licensed Professional definition
- Keep H codes as a permanent reimbursement method (**one year extension of H codes just announced!!**)

Federal and State Budget Cuts

- Impacting clients, by way of losing services, employees losing jobs, employers losing revenue and independent practitioners rates cut approx 5%
- Advocacy engines: The Coalition is a conglomerate of citizens and organizations that advocate for continued funding of public mh/dd/sas programs (thecoalitionnc.org). You may complete online surveys until June 30th 2010

Medicaid

- Community Support phased out, the State is allowing Case Management components of community support until adequate replacement services are approved by CMS
- CST, IIH, MST, Day Treatment, SAIOP, ACTT still viable services for MFTS
- Critical Access Behavioral Health Agency (CABHA): a new category of provider; supports one stop shop for comprehensive service array
 - Yet another attempt to get a grip on mental health reform
 - Requires a Medical Director: a physician, must be 1/2 time employee of agency/Clinical Director: must be a licensed professional
 - Job opportunities for LMFTs as clinical director
 - Be sure to check out the agency history and reputation
 - Intent to impose more clinical oversight/ethics and structure
 - Smaller agencies struggle as model supports larger organizations

Office of State Personnel (legislative focus for 2010)

- Working with Jon Carr (NCAMFT lobbyist) to address issue of MFT exclusion from NC OSP classifications and job opportunities.
- Critical time to revisit issue in NC with Federal movement on VA job classification for MFT

First Level Involuntary Commitment Pilot

- MFTs excluded from this pilot and we address with our lobbyist, yet we are looking at cost/benefit as a legislative initiative.

Before & After Disaster Work

Sandra Wartski, PsyD, NC DRN Coordinator

Preparing for Disaster Deployment Use the APA DRN Resource Webpage

This past year, American Psychological Association (APA) DRN developed an online resource page containing a variety of documents you can refer to prior to going out on disaster assignment, or anytime you are interested. To access the Disaster Response Network Online Resources webpage, go to <https://apateamsites.apa.org/sites/drn/>. The login is APAIN\apa4drn and the password is Help4You (case sensitive)*. Volunteers do not need to be APA members to access this website.

Following Disaster Work Take the DRN Survey

Take a moment to tell us about your recent disaster-related activities (response, trainings, drills, meetings, etc) at www.surveymonkey.com/drn. The survey allows APA to gather important data to keep the DRN program running, and takes only a moment to complete. Our NC DRN benefits greatly from the APA DRN activities. Volunteers do not need to be APA members to take the survey.

DISASTER NEWS

- **FEMA Press Release on Triumph over Tragedy video**
<http://www.fema.gov/news/newsrelease.fema?id=48574>
These documentary videos chronicle the recovery from severe natural disasters in Iowa in 2008.
- **Information about the mental health care costs following disasters**
<http://www.nimh.nih.gov/science-news/2009/economic-analysis-estimates-cost-of-providing-comprehensive-mental-health-care-following-disasters.shtml>
- The NY Times Magazine has a fascinating article from August 27, 2009: **Strained by Katrina, a Hospital Faced Deadly Choices**. Author Sheri Fink explores how some overtired doctors and nurses in New Orleans injected patients with drugs following Hurricane Katrina. Were they trying to comfort patients - or hasten their deaths?
- **"Ten Years Later, Hurricane Floyd's Mark Remains"**: <http://www.wral.com/weather/hurricanes/story/6010713/>

RESOURCES

Hurricanes

- **Tips to Strengthen Your Emotional Well-Being Before the Arrival of a Hurricane**
<http://www.apahelpcenter.org/articles/article.php?id=182>
- **ARC Preparing for Events: Hurricanes**
<http://www.redcross.org/portal/site/en/menuitem.86f46a12f382290517a8f210b80f78a0/?vgnnextoid=ffb5e821cbdf9110VgnVCM1000002bf3870aRCRD&vgnnextfmt=default>
- **National Hurricane Center Hurricane Resources** -
<http://www.nhc.noaa.gov/HAW2/english/intro.shtml> - This consumer website offers information on hurricane history, hurricane hazards, and what people can do to prepare.

H1N1

With H1N1 returning to the headlines full force, here are a few news items & a reminder about some helpful links containing accurate & up-to-date information.

- Wake County launched a new website dealing with H1N1 & seasonal flu - **ReadyWake!Flu** : <http://www.wakegov.com/flu>
- Statements by HHS Secretary Kathleen Sebelius and DHS Secretary Janet Napolitano on WHO Decision to Declare Novel H1N1 Virus Outbreak a Pandemic :
<http://www.hhs.gov/news/press/2009pres/06/20090611a.html>



Before & After Disaster Work— continued

- **World now at the start of 2009 influenza pandemic – Statement of World Health Organization:**
http://www.who.int/mediacentre/news/statements/2009/h1n1_pandemic_phase6_20090611/en/index.html
- **From the Vault** - 1976 Swine Flu Journal Article "The Swine Flu Affair: Decision-Making on a Slippery Disease" - National Academies Press publication on the 1976 swine flu epidemic: <http://www.nap.edu/catalog/12660.html>

Resources

- **Centers for Disease Control**
<http://www.cdc.gov/swineflu/>
- **Centers for Disease Control (Spanish)**
<http://www.cdc.gov/swineflu/espanol/>
- **Department of Health and Human Services**
<http://www.hhs.gov/>
- **US Food & Drug Administration – Swine Influenza (Flu)**
<http://www.fda.gov/NewsEvents/PublicHealthFocus/ucm150305.htm>
- **Flu.gov**
<http://www.flu.gov/>
- **AHRQ Resources for Pandemic Influenza Preparedness**
<http://www.ahrq.gov/prep/swineflu.htm>
- **World Health Organization – Swine influenza**
<http://www.who.int/csr/disease/swineflu/en/index.html>
- **NIH Medline Plus**
<http://www.nlm.nih.gov/medlineplus/swineflu.html>
- **NC Pandemic Influenza Plan**
<http://www.epi.state.nc.us/epi/gcdc/pandemic.html>
- **NC DHHS**
<http://www.ncdhhs.gov/>

Media Coverage

- **NY Times H1N1 Page**
http://topics.nytimes.com/top/reference/timestopics/subjects/i/influenza/swine_influenza/index.html?WT.mc_id=NYT-E-I-NYT-E-AT-0909-L3
- **LA Times H1N1 Coverage**
<http://www.latimes.com/features/health/sci-swine-flu-sg,0,484244.storygallery>
- **Atlanta Journal Constitution Coverage**
http://projects.ajc.com/pages/h1n1/?cxntlid=daylf_tpct
- **CBS News Coverage**
http://www.cbsnews.com/2718-204_162-218.html
- **ABC News Coverage**
<http://abcnews.go.com/Health/SwineFluNews/>
- **MSNBC Coverage**
<http://www.msnbc.msn.com/id/30503740/ns/health-health>

A Few Words from the Elections Committee by Melissa Parlier, MA, LMFT, Elections Committee Chair

The NCAMFT Board of Directors is an all-volunteer board that provides leadership to the state division in its mission to promote the profession of Marriage and Family Therapy in order to improve the health and well being of families, couples and individuals. Volunteering your time and talents through service on the NCAMFT Board of Directors provides an opportunity to give back to your profession and to the community. The Elections Committee is currently recruiting nominees for this year's election for the following positions:

President Elect
Treasurer
Student/Associate Rep. West
Southeast Chapter Director
Mid-Central Chapter Director
Northwest Chapter Director

A call for nominations will be mailed in May. Members are welcome to nominate themselves or others who are willing to serve on the Board if elected.

Questions may be emailed to
mparlier@crossnoreschool.org.

Volunteers Needed to Assist with Returning National Guard!

Volunteers needed! More than 4000 of your NC National Guard recently returned from a one year deployment to Iraq. Help support the NC National Guardsmen and their families at an upcoming Yellow Ribbon event. This event will be held May 13-16, 2010 at the Koury Center in Greensboro. If interested, please contact Alice Dean, State Child and Youth Coordinator with the NC National Guard @ 919-664-7616



CHAPTER Contact Information

Capital Chapter

Position is available, for additional information please contact the NCAMFT office.

North Central Chapter

Theresa Palmer, MSW, LMFT
(336)721-7619
tpalmer@tchome.org

Mid-Central Chapter

Joanna Warren, MS, LMFT
336-228-0787
joanna_leigh_2000@yahoo.com

Northeast Chapter

Ruth Cox, PhD, LMFT
252-670-4499
ruthpcox@msn.com

Southeast Chapter

Jerry Powell, DMin, LMFT
powjerry@gmail.com

Southwest Chapter

Trip Woodard, MSW, LMFT
828-681-0513
wescom@bellsouth.net

Northwest Chapter

Joan Zimmerman, MA, LMFT
thezims@charter.net

South Central Chapter

Pearl Wong, PhD
704.945.7344
pearl.wong@pfeiffer.edu

The North Carolina Family Therapist Newsletter

Editor

Deborah Klinger, LMFT
dklinger@pizzadreams.com

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Paid Announcement

**THE GOOD LIFE:
LIVING A LIFE FREE OF IMAGINED LIMITATIONS
AND SELF-DESTRUCTIVE PATTERNS**

The presenters for these events are faculty of The Glendon Association in Santa Barbara, California. They are Lisa Firestone, Ph.D. and Joyce Catlett, M.A. The event is coordinated through the Northwest Area Health Education Center.

April 28, 29, & 30, 2010

Davidson County Community College Conference Center

Goal: The goal of this activity is to educate mental health professionals and individuals working within the community by addressing the roots of the social problems of suicide, child abuse and troubled interpersonal relationships.

Who Should Participate: This activity is planned for Physicians, Physician Assistants, Nurse Practitioners, Pharmacists, Nurses, Psychologists, Clergy, Social Workers, Allied, Mental and Public Health Professionals.

Overview of Workshops:

The Ethics of Interpersonal Relationships

Wednesday, April 28, 5-9:15pm

\$50

Human rights issues, values and ethics are rarely addressed when considering how individuals interact in their closest associations. This workshop addresses this important issue introducing a theoretical model to help better understand the sources of intolerance and toxic behaviors acted out between intimate partners. The presenters demonstrate methods for identifying and challenging destructive thoughts underlying these harmful actions.

Beyond Death Anxiety: Achieving Life Affirming Death Awareness **Thursday April 29, 8am-1:15pm**

\$75

This workshop explores problems dealing with the realization of our own mortality and the denial of death and identifies specific defenses against death anxiety that limit one's life. The presenters describe methods for challenging these defenses and suggest ways of living with an awareness of a finite existence that enhances life experiences and the quality of interpersonal relationships.

Overcoming the Fear of Intimacy

Thursday April 29, 5-9:15pm

\$50

This workshop presents a model, Separation Theory, that integrates psychodynamic, existential, and family systems frameworks in a way that can help couples better understand the barriers to achieving and sustaining intimacy in their closest personal relationships. The workshop also introduces an innovative, cognitive, affective, behavioral methodology - Voice Therapy – for treating couples.

Suicide: What Professionals Need to Know

Friday, April 30, 8am-1:30pm

\$75

Recent headlines have described suicide as an "epidemic." With the tragedies associated with the current financial crisis, a need clearly exists for more extensive training for psychotherapists in the management and treatment of suicidal clients.

Register for all sessions and save \$25

Student Fee for any session \$35

Student Fee for all sessions \$120

For more information and to register online go to www.northwestahec.org

DRN Training Is Like Good Insurance: We Want It, But We Don't Want to Use It

by Sandra Wartski, PsyD, NC DRN Coordinator

The Disaster Response Network (DRN) continues to promote our disaster mental health training as a convenient, effective way to become trained to be a disaster mental health responder during times of disaster. As you have hopefully heard advertised over the past two years, our combination training of on-line didactic modules and live simulation workshops have been running smoothly. Our on-line modules have even been recognized on a national level, with Massachusetts, British Columbia, & Georgia currently in the process of adapting our NC training modules in order to train DRN members in their regions. International adaptation may even be somewhere on the horizon, as I recently responded to an email from someone in Australia who had heard about our training!

Despite a well-developed program, we continue to experience lower than expected participant numbers in our workshops. Many have signed up for registration of the on-line modules, but many fewer are completed. Several workshops have been offered over the past two years, but several have had to run with low numbers of participants and some have had to be canceled due to low numbers. As I was recently lamenting about this to Dr. John Simpson, a DRN colleague, fellow psychologist and friend, he put forth an appropriate rhetorical question, "How often would we seek training we don't want to use?"

John Simpson, Ph.D. observed of DRN training, "It needs to go

into our thinking as the professional skills version of homeowner's insurance or CPR." I found John's apt analogy to be on target. It is true that many of us truly hope to not need disaster response skills, but realistically we know that disasters, small or large, are unfortunately part of life. It seems to be the nature of this field that there is difficulty maintaining interest when we are in a non-emergency state. Many organizations, such as the American Red Cross, face these same types of issues, and the NC DRN is no different. Having most mental health professionals fully trained in this arena prior to any disasters striking would be ideal but reality suggests that the majority of volunteers come out looking to help after a large disaster. Knowing that the training is ready to go when a larger emergency situation arises is a relief.

John, who resides in Charlotte, has been an asset to the DRN for many years. Aside from being an active disaster volunteer and instructor, John provides the ongoing push to make the NC DRN better. I have often thought of him as the "DRN idea man" who is passionate about our state's DRN. It is he who is continually searching the web for the latest disaster trainings or other disaster-related organizations with whom we might coordinate or liaison. It was he who initially made the contact with the UNC's Center for Public Preparedness in the Department of Public Health so that the DRN could have the necessary technological assistance for putting together our on-line

training modules. As we searched for ways to not have DRN training limited by geography, John found tangible and viable ways to make this a reality. John has also provided his wisdom during the wake of disasters, such as when I communicated with him during the operating of the Wake County shelter after displaced residents from Hurricane Katrina arrived into Raleigh. As Charlotte was a week or two ahead of Raleigh in terms of stages of sheltering, he provided insights and support during an inordinately stressful, confusing time.

Given some of the lower numbers than anticipated in terms of response to our new and exciting DRN training, John is suggesting a new paradigm. As an adept user of analogies, he points out, "Put sidewalks where people walk, not where we think they should walk." He is urging us to consider whether more extensive training of a handful of individuals would more appropriate use of our energies. Perhaps we figure out how we allow several interested mental health professionals in NC to do the state of the art, high tech types of training that may involve simulation trainings. It is then these individuals who would be best positioned to train others within our state when larger number of volunteers need training following a large scale disaster. Asking all people to be similarly trained in advanced methods may be unrealistic and unnecessary.

Another area the DRN is continuing to put forth energy is in the continual refinement of our

DRN Training Is Like Good Insurance: We Want It, But We Don't Want to Use It—continued

live simulation workshops. Much of the disaster training field is becoming increasingly aware of the importance of simulation experiences.

Technological advances in recent years which increase the on-line training options do leave out a vital component: live person interaction and simulation experiences. This latter notion is part of why the NC DRN has set up the training requirements as we have, with Part I being the on-line didactic training and Part II being the live simulation workshops. We want individuals to have both before they are considered to be fully trained. We have had fun conjuring up ways in which we can bring the sights, sounds, smells and touch of disaster into the training situation. Among the props I brought to the last live simulation training I did were my rotting compost bucket, a bag of (dead) bugs, annoying loud siren sounds, crying baby noise, sleeping bags, and vivid pictures of destruction. "It's like perfume," John comments, "You can tell someone about it, but it's not until you smell it that you get what it is."

There are, of course, many other organizations who are able to develop simulation training in a much more advanced format. The US Marine Corps, for example, has their Infantry Immersion Training in which Marines train to get a true experience of what things would be like in mock Afghan villages. The mock village is very authentic, but the Marines are safe and can learn from mistakes without putting themselves or others in harm's way. Realism has been maintained in the terrain, apartment buildings, mosques, streets, and even the fake explosive devices. There are actual Afghans hired to "act" in the village, including "good guys," "bad guys" and "normal citizens" who make the town come alive with authentic language and daily life routines. Some of the villagers have injuries (with fake blood) so Marines have to evaluate and react in "real" situations. There is authentic-like ammunition (like paint ball) utilized, so there are no injuries but you can hear and feel if you have been "hit." What a fabulous experience it would be for DRN members to be able to immerse in such a mock village for training. John would likely approve of such an experience, because, as he says, "If someone doesn't break a sweat, we haven't done enough."

When I asked John what has influenced his spirit of ongoing passion for this field, he

referenced psychologist, Nicholas Hobbs. Hobbs wrote about being able to "give psychology away," and John reports being heavily influenced by some of his reading in graduate school. John describes disaster work as "taking me back to my philosophical and spiritual roots." He is clearly invested in finding ways to put what we do as mental health professionals into accessible use for others. John worries that we often undersell our profession and aren't often clear to others how psychologists can be helpful in a myriad of situations. John is ever poised to keep chipping away at changing this.

So, how will the NC DRN respond to all of this? I suspect there are several ways:

1. Utilize the insurance analogy to our benefit. In considering additional advertising options, it may behoove the DRN to remind people of how DRN training is a tool for use in future disasters and that having some knowledge will likely benefit others and yourself at some point.
2. Prepare for the impact of a large disaster. I have come to accept that when big disasters emerges, there will undoubtedly be a number of spontaneous interested volunteers who will be eager to assist but will need training first. The more fine-tuned the training and the more vivid the live workshops, the better.
3. Remind others that smaller disasters abound all around us. Although it is the larger disasters which make the news and the large footprint events which bring out lots of volunteers, there are unfortunately fires, shootings, drownings and other tragedies which occur on a weekly basis. These may not seem quite as "sexy," as is said in disaster lingo, but disaster mental health assistance is needed for these events as well.
4. Keep wise and experienced instructors involved and well-trained. Individuals, like John, who are passionate in the field of disaster mental health are vital to ongoing growth and improvement of our organization.

For more information on DRN activities and resources, see the related article in this newsletter.



Strengthening family, couple, and individual health

NCAMFT
P O Box 98073
Raleigh, NC 27624
877-8NCAMFT

Newsletter To Go Green!

This is our last hard-copy edition of the NCAMFT newsletter. Future editions will be sent electronically via email. In order to make the transition as fluid as possible, NCAMFT needs to be sure we have your current or preferred email address. Please review your mailing address label above and make any changes to your email address on the postcard enclosed and mail it to the office.

If you don't have or don't like email, you have the option of continuing to receive the newsletter the good old-fashioned way. Simply indicate on the form that you'd like to opt-in to stick with hard copy, and send the form back to us.

Please get the forms in the mail **no later than April 30**, so that we have your information before our next newsletter goes out. Thanks very much!

-Deborah Klinger, MA, LMFT
Newsletter Editor