



The Oregon Association for Marriage and Family Therapy

President's Corner: From Another Corner of the Country

By Marcus E. Berglund, LMFT
OAMFT President

This newsletter arrives in your mailboxes with bittersweet sentiments on my part. I am deeply saddened that this is the last time I will be writing to you as your OAMFT president, as my wife, Rachel, son, Miles, and I are moving to Massachusetts.

Death of loved ones can alter one's perspective and add a sense of urgency to connect with and savor those most meaningful to us. The death of Rachel's grandfather this last July added a sense of immediacy for Rachel to be physically closer to family members on the east coast with whom she already is extremely emotionally close. Time became more of the essence in wanting to see loved ones more than a time or two a year.

Add to this scenario the joyous and long-desired news that burst on the scene two days after Rachel's grandfather died: Rachel and I are expecting our first child! Not only did the cycle of individual and family life come to fruition in two-day's time, but the need to be around as much family as possible became more than a good idea; it became an imperative.

I am grieving leaving Oregon. Yet, as much as we love and feel a part of Oregon (Miles is 8th generation Oregonian), it would be hypocritical for me, especially as a family therapist, to not support my partner in being closer to almost all of her family. As we thought about the possibilities, I realized that this was another homecoming for me, too. My dad moved to MA in 1970, and I began to realize how many childhood memories I have from there when I'd visit him. Furthermore, Miles will have 8 of 10 grandparents within easy travel to him, I will get to know my brother and sister, Curtis and Tirrill, as adults (they are 21 and 24 years younger respectively than me and live in Boston) and I will actually live in the same state as my dad for the first time since I was 8! All of a sudden, relational nurturance of the familial variety was not to be just at Rachel's beckoned call, but Miles' and mine, as well. An experience of loss was concurrently filled with connective opportunity.

Ironically, the OAMFT Board and I discussed having a grief-themed newsletter early in the year after Michael White died.

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See page 10 for information on the upcoming AAMFT Annual Conference in Memphis, TN:

"Ethical & Legal Challenges in Contemporary Family Therapy"

Find us on the web at:

www.oamft.org



Editorial Policy

The **NETWORK NEWS** is the official newsletter of the Oregon Association for Marriage and Family Therapy (OAMFT), and is published four times each year in Summer, Fall, Winter, and Spring. OAMFT is a state division of the American Association for Marriage and Therapy (AAMFT), 112 South Alfred Street Alexandria, VA, 22314-3061, www.aamft.org. Membership in OAMFT and subscription to the newsletter is provided to Oregon professionals upon their meeting the minimum educational and clinical requirements for membership in the national organization, AAMFT. Copies of the *Network News* can be made available to nonmembers upon request to the Editor.

Articles submitted by mail must be in Microsoft Word (or compatible program) and submitted by mail on a CD. Articles may also be submitted via email. See contact info below. Photographs must be submitted in .jpeg format and ready for use (no editing necessary). If return of materials is desired, please send a self-addressed envelope with sufficient return postage.

EDITORIAL POLICY: Opinions expressed by the Editorial staff of the *Network News*, in articles published and Letters to the Editor, do not necessarily reflect the views of AAMFT, the OAMFT Officers and Board of Directors or the OAMFT membership.

NETWORK NEWS OAMFT

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and Referral Service Voice Mail: 503.227.1330
(Voicemail checked on a weekly basis.)

News items, articles of interest to MFTs, responses to published articles, and letters to the Editor are invited and welcomed!

Do you have a job posting to share? Please email us at oamftboard@gmail.com with the information. All job postings are free in the Network News!

Address Change??

Update your new contact information on AAMFT's website @ www.aamft.org.

OAMFT uses the AAMFT online database to send Oregon members information, such as this newsletter, Network News.

Stay updated on your state's association by keeping your address current at AAMFT.

ADVERTISE in the NETWORK NEWS

Advertise your programs, practice, conferences, job openings or office rental space. Display advertising must be submitted print-ready and prepaid at the following rates (add \$35 if setup is required):

<i>Full page:</i>	<i>\$150</i>	<i>Half page:</i>	<i>\$125</i>
<i>1/4 page:</i>	<i>\$75</i>	<i>Business card size:</i>	<i>\$35</i>

Classified ad rate: \$35 per 75 words (\$35 minimum charge). Discounts for multiple issue advertising. The Editor reserves the right to reject, abridge or modify any advertising or other submitted material as deemed appropriate and necessary.

President's Corner Cont'd.

By Marcus E. Berglund, LMFT
OAMFT President

(Continued from page 1)

It has been such a devastating couple of years for family therapy in terms of pioneers dying, including, Tom Andersen, Insoo Kim Berg, Ivan Boszormenyi-Nagy, Steve de Shazer, Jay Haley, Paul Watzlawick, Michael White, and Lyman Wynne. The influences of these amazing contributors and shapers of the field cannot be overstated.

We as family therapists are all indebted to them and stand on their shoulders in advancing the MFT field.

But death and loss, like all other things when viewed through a systemic lens, are not just sad events. The "both/and" perspective would have us see that there is much to be grieved and mourned, while still much also to be learned and celebrated in what had been and the exciting new opportunities and contexts that have subsequently arisen.

It has truly been an honor to serve on the OMAFT Board the last eight years. The MFT field is still small enough to run in to one another at events, and certainly email allows continued contact as if still in the same physical community. I plan to be involved as much as needed in legislative efforts in MA and will relay to OR leaders how the legislative cause here might be helped. Ironically, MA had a consumer choice bill die via Mitt Romney's last gubernatorial action - a veto. Thus, I will be in familiar territory when it comes to close calls!

Speaking of legislative matters, but with NO close calls, Representative Peter Buckley overwhelmingly won the vote for the OAMFT award for the outstanding contribution to the MFT field in Oregon, and I had the honor of giving him the award on the Capitol steps in Salem. (See adjoining picture.) He communicated his appreciation and vowed continued perseverance for 2009's version of mental health consumer choice and protection. He will be among the countless MFTs and those supportive of MFTs whom I will sorely miss, yet hope to see again in the future.

Please stay in contact; we must walk our talk of relational connection within and beyond the MFT community. My systemic best to you all, now and forever.



Marcus E. Berglund, LMFT

Farewell to MFT Pioneers

By Stephanie Miller, LMFT
OAMFT Treasurer

Over fifty years has passed since the field of family therapy emerged in the United States as a revolutionary approach to deal with human problems. Family therapy's founding pioneers were charismatic mavericks who were disenchanted with the traditional individually oriented mental health models. The field of MFT has already lost such pioneering generation leaders as Nathan Ackerman (1908-1971), Milton Erickson (1902-1980), Gregory Bateson (1904-1980), Virginia Satir (1916-1988), Murray Bowen (1913-1990), Harold Goolishian (1924-1991), Carl Whitaker (1912-1995), John Weakland (1919-1995), and Edwin Friedman (1932-1996). More recently in the last couple of years, we have had notable losses of contributors to the founding of family therapy. To attempt to chronicle the biography of any of these seminal thinkers would not do justice to many of their contributions. Suffice it to say that their contributions have been enormous and the legacy of each will continue to influence us in years to come ▲

Steve deShazer

(June 25, 1940-September 11, 2005)

Insoo Kim Berg

(July 25, 1934-January 10, 2007)

Ivan Boszormenyi-Nagy

(May 19, 1920-January 28, 2007)

Jay Haley

(July 19, 1923-February 13, 2007)

Paul Watzlawick

(July 24, 1921-March 31, 2007)

Tom Andersen

(1936-May 15, 2007)

Lyman Wynne

(September 17, 1923-January 17, 2008)

Michael White

(December 29, 1948-April 4, 2008)

President's Corner

By Shelley Hanson, MA, LPC, LMFT
OAMFT President

Hello AAMFT Members of Oregon!

Following his heart back to one of his places of origin, President Marcus Berglund has left his position with OAMFT and moved back to Massachusetts. This has been a dream of his for quite some time, and although his absence will surely be felt by us all, we wish him the very best in his new beginnings on the east coast. We know that his passion for marriage and family therapy will continue on and we'll no doubt hear from him or run across him at future events! Marcus' work as our Legislative Chair person was unparalleled, and we now will look to all of us to fill that need and advocate on behalf of MFTs throughout our state.

So this now becomes my first letter as President, as I step into the role and by-pass my one-and-a-half remaining years as President-Elect. This is an exciting and daunting speculation but my four years on the board will help to serve and inform me. I am ever-grateful for the stellar members on this board who are hardworking and dedicated to the cause and know they will continue to inform and guide our decisions as we seek to faithfully serve the members of Oregon.

What lies on my horizon in the near future is attendance of the **AAMFT Annual Conference, being held October 30th – November 2nd in beautiful Memphis, TN.** The conference is entitled this year, *Ethical and Legal Challenges in Contemporary Family Therapy*. I am really looking forward to learning under this great umbrella of AAMFT and hope that many of you might join me. Please introduce yourselves to me at the conference, or send me a quick email to let me know you are attending; I would love to make connection with you while we are there! I spoke of "daunting" in the above paragraph and so I have a confession to make: the daunting part is the costume party at the conference! That's right, a judged, dressed-up, Halloween costume party and Elvis is already taken. If I dressed at Virginia Satir and linked everyone in a long extended rope, do you think anyone would figure it out? It's just a thought...

Lastly, we decided as a board a number of months ago to focus this Newsletter on the concepts of loss as we head into the holidays. Many clinicians face both their own personal losses during this time, and many of our clients have yet to go through milestone-holidays after a loss this year. As marriage and family therapists, grief, loss, pain, and a faint glimmer of hope are true systems work as we reach to help our clients create meaning in the midst of pain. Perhaps this is a time for us as peers and colleagues, to remem-

ber to support one another more significantly – more purposefully, even – to encourage one another along during months that are often filled with expectations, memories and mixed emotions.

I consider it a great privilege to serve the OAMFT members and hope to serve you well as President. Please feel free to contact me with suggestions, questions, comments, etc., and please join us for our monthly board meetings (a listing is available in this Newsletter on page 9; and always available on our website), we'd love to have you!

Best to all,

Shelley A. Hanson, MA, LPC, LMFT,
President OAMFT



GEORGE FOX UNIVERSITY

*The OAMFT Board wishes
to thank George Fox
University for hosting the
September OAMFT Board
meeting!*

Job Posting:

Salem Pastoral Counseling

Salem Pastoral Counseling Center is seeking a licensed therapist to join our current staff of 7. We are an ecumenical center serving the Salem area since 1980. For information about our center, please visit our website at www.salempastoralcounseling.org.

If you are a licensed therapist in Oregon seeking to join a well-established practice, please send a letter of interest and résumé to:

Bob Lewies, Co-Director
Salem Pastoral Counseling Center
565 Union St NE Suite 100
Salem, OR 97301

Avoiding Liability Bulletin

By Richard S. Leslie, J.D.

Attorney at Law—"At the Intersection of Law and Psychotherapy"

This article was provided by CPH & Associates and can also be found online at: <http://cphins.com/LegalResources/tabid/65/Default.aspx>

CONFLICTS

In the July 2008 issue of the *Avoiding Liability Bulletin*, which was devoted to the topics of conflict and conflict of interest, I asked readers to ponder each of the following true or false questions and indicated that I would address them in a future issue of the Bulletin. My brief answers to these questions follow below. As I stated in the July Bulletin, the answer to each of these questions may vary from state to state, or perhaps, by profession. Additionally, I stated that reasonable minds may differ as to the correct or most appropriate answer. The answers that follow reflect my views only. They should not be taken as legal advice in any particular situation that may be encountered by a therapist or counselor. In such situations, therapists or counselors will want to consult with a colleague and/or with an attorney. State law or regulation may impact upon some answers, as will the ethical standards that may be applicable in a particular case.

Question #1 - It is not unlawful for a therapist or counselor to let his or her clients know that his or her recently published book about parenting is available for purchase from the office manager.

TRUE - Therapists and counselors sometimes sell books, tapes, or other products that are related to their practices. When doing so, they must be careful to avoid exploitation (or the appearance thereof) or any feeling on the part of the client that there is an expectation of purchase. The sale or promotion of products or services, other than the treatment that the client came for, should be done thoughtfully and selectively. If care is not taken, it may appear that the counselor or therapist is furthering his or her own financial interests at the expense of the client. I have sometimes counseled therapists, who had products to sell that were expected to have wide appeal, to sell their products to the general public in some other locale or by some other means than at and through their private practices.

Question #2 - Once a conflict arises between a therapist or counselor and the client, immediate termination is necessary in order to avoid liability.

FALSE - Conflicts do arise during the course of counseling or therapy, and part of the clinical process involves dealing with and working through a variety of conflicts. While termi-

nation may be appropriate in some circumstances, not all conflicts need to be resolved by immediate termination. Even where termination is appropriate, the manner in which it is done can also result in problems for the therapist or counselor. Perhaps one or two sessions with the client will resolve the conflict or provide appropriate closure. Some conflicts may be of a minor or inconsequential nature, and others may be more serious. Even with respect to serious conflicts, immediate termination could in some cases lead to allegations of abandonment. Clinical and/or legal consultation would be wise if one is faced with a serious conflict. (I have previously written more on the issue of termination, which can be found in the *Avoiding Liability Bulletin* "Archives" on this website. The items are entitled "Termination - Who Is the Patient" and "Termination of Treatment.")

Question #3 - An agreement between two counselors or therapists to refer clients to each other whenever either is faced with a conflict may itself present a conflict.

TRUE - Such an arrangement appears to be unlawful. Some states have laws that essentially prohibit the payment of any consideration as compensation or inducement for referring clients or patients to any person. Violation of such a law may constitute a crime. Such a mutual agreement to refer would seemingly mean that referrals would not be made based upon the particular needs of the patient, but rather, the financial needs or interests of the therapists or counselors involved. Referrals ought to be made after careful thought about what the needs of the patient are and not on the basis of some prior agreement, whether formalized in writing or the result of an informal arrangement, between the two practitioners.

Question #4 - If a client reveals that he backed his car into the counselor or therapist's car in the office parking lot and caused significant damage, the counselor or therapist may be required to report this information to a governmental entity and reveal the name of the patient.

TRUE - In most states, there are laws that require a motorist to file a report with the Department of Motor Vehicles, or some other-named governmental entity, when the motorist is involved in a vehicular accident. These state laws will vary in detail, so careful analysis is necessary. Does the law apply to owners of vehicles or only to drivers? Does the accident have to occur on a highway or street in order to be reportable? Is there an exception for accidents occurring on private property? Must there be a personal injury or is vehicle damage

(Continued on page 9)

The Path to Licensure: Finding Supervision

By Lara Barnes, MFT
Student Board Member

Finally after months of interviews and anxious waiting you have gotten the job. All set to move out of your tiny grad school flat, being newly employed means that even repaying student loans doesn't look so bad (for the moment). You have a job, maybe a new place, a new city, you even have downloaded the paperwork for licensure.....then the last challenge hits, you still have to retain a supervisor.

THE CHALLENGE

Currently in Oregon, there are only 27 AAMFT approved supervisors. Many of these folks are clustered around the MFT schools, in Eugene and Portland. With those schools graduating more than twice that number per year many supervisors are saturated with supervisees and unable to meet the need. How then do we guarantee MFT's get quality clinical supervision? After all, the OBLPCT's guidelines appear strict. Potential supervisors must:

1. Have specific training in the systemic approach.
 2. Have completed at least five years clinical experience as a marriage and family therapist.
 3. Have completed at least 30 clock hours of supervisor training.
 4. Hold a state license as a marriage and family therapist or similar.
- OR

Be approved as a supervisor by AAMFT, NBCC (National Board for Certified Counselors) or AAPC (American Association of Professional Counselors).

Yet, what is left unsaid may be just as important. After all, many new graduates never have LMFT supervision let alone an AAMFT-accredited supervisor. Because OBLPCT allows NBCC and AAPC accreditation, and those with "similar" training, the actual pool of potential supervisors is much larger. In fact, although there are only 21 supervisors listed through the Oregon Counseling Association (ORCA) the total of potential supervisors exceeds one hundred with the addition of nearly seventy licensed clinical social workers (LCSWs). New MFT's can receive clinical oversight from almost any type of clinician provided they have received adequate supervision training and have had at least some coursework (or continuing education) in systems theory. This is true because ongoing legislative battles about what a "therapist" and specifically what a "marriage and family therapist" are have gone unresolved. Thus, the terms apply to anyone doing therapy or anyone working with couples or

families. This can include psychologists, psychiatrics and many different types mental health care workers.

THE IMPLICATIONS

So in the end does this help or hinder us as a profession? On the one hand allowing more new graduates to find jobs with built in supervision means reduced cost, a facilitation of cross discipline collaboration, not to mention an ease in finding an open supervision slot. On the other, it means that the newest generation may not be learning from their MFT elders, and in some sense may loose touch with those roots. To this end, some have suggested rewriting the requirements to loosen the

"Currently in Oregon, there are only 27 AAMFT-approved supervisors."

rules about LMFTs supervising MFTs by adopting AAMFT standards used by other states. The debate, how-

ever, continues.

THE RULES

In the end, whether you get supervision from the LCSW at your job or drive to the local U for an LMFT, the Oregon BLPCT's rules are the same. Supervision must happen at least twice a month for part-timers (45 hours or less per month) and at least three times for everyone else. Supervision must be 90% face to face, and at least 50% individual. For groups the gang cannot be larger than 6. Finally, be sure your supervision is happening with proximity to the client contact as the hours are reported per month. If you find yourself an hour behind make it up by the 31st or the month's total might be voided.

Downloading the packet from the state website (www.oregon.gov/OBLPCT) and filling out the forms is quick and easy. If you have questions regarding this process contact Martha Steen, the OBLPCT Intake Coordinator, at 503-378-5499, Ext. 33.

For further discussion about the supervisor question, or to weigh in on the debate, visit OAMFT's new Google group. Log-in information available though the website or on page 12. ▲

Important Contact Information:

OAMFT: oamftboard@gmail.com or 503-227-1330

OBLPCT: lpc.lmft@state.or.us or 503-378-5499

AAMFT: www.aamft.org or 703-838-9808

Exploring Ambiguous Grief and Loss

By Holly Beckman, MA, LPC
OAMFT Board Member

Change is inevitable. It generally marks the ending to the way things have been and opens the door to something different and new. Sometimes change is welcome, and sometimes it is traumatic. Nevertheless, change always includes an element of loss and adjustment. We in the field of marriage and family therapy are grieving the loss of some of our founding fathers (Michael White, 1942-2008). Within our state organization of OAMFT, we are grieving the move of our president, Marcus Berglund. As of the writing of this article, New Orleans is anticipating yet another potentially catastrophic natural disaster due to an approaching hurricane. Clearly the levels of loss associated with each of these events will differ by the amount of impact on a person and other variables that are too diverse to categorize. While the ordinary feelings associated with grief and loss may range from sadness to anger to guilt to numbness, anxiety, fear, relief, and peace, each person's experience of these feelings is unique in its scope and expression. Loss and grief are as complex and diverse as the situations and the people who must adapt to the changes life presents.



As marriage and family therapists, it is important to distinguish and name the different kinds of grief and losses people experience. According to leading researcher Dr. Pauline Boss, the grief process is complicated with ambiguity. She states that human relationships are traumatic when characterized by ambiguous loss, which cannot be clearly defined or where closure is impossible. Boss identifies two types of ambiguous loss: 1) where there is physical absence and psychological presence, for example when someone is kidnapped or lost in a natural disaster or when a parent is absent due to divorce, and 2) when there is a physical presence but a psychological absence, for example a family with a loved one who suffers with mental illness or where there has been a traumatic brain injury. In these cases, ambiguous loss stops

the grief process and paralyzes family functioning. Often there is no end in sight and confusion about how to move forward. Complicating the pain is a lack of social support for these families in their grief process as the loss may be unrecognizable to others, including mental health professionals. The first step, according to Pauline Boss, is for therapists to begin to identify the ambiguous loss in their own lives, so that when this is accomplished, we, the therapists, will be more likely to identify these kinds of losses for our clients.

As Autumn approaches and is swiftly followed by significant holidays such as Veteran's Day, Thanksgiving, Hanukkah, Christmas and New Years – just to name a few – ambiguous loss may be a primarily significant issue for therapists and/or clients. Just as Texas and Louisiana are preparing now for the arrival of another hurricane, it is best too, if we prepare for doing important work.

For further exploration of this topic Pauline Boss has written several books on this subject: **Loss, Trauma, and Resilience**, W.W. Norton, 2006; **Ambiguous Loss**, Harvard University Press, 1999; **Family Stress: Classic and Contemporary Readings**, Sage Publications, 2003; **Family Stress Management**, Sage Publications, 2002. Source: <http://www.ambiguousloss.com/>.

▲

Are you signed up to receive legislative alerts from AAMFT? If not, the Family TEAM Website is a great way to stay current on issues that affect your work as an MFT. To sign up for alerts, go to www.aamft.org, click "Legislation & Policy", then select "Family TEAM Website" and log-in to proceed.

Movie Reviews

By OAMFT Board Members

“Elizabethtown”

Starring Orlando Bloom and Kirsten Dunst this movie traces the bond that two strangers can create amidst their chaotic lives. Bloom, newly single and unemployed, leaves his plush Portland surroundings to mourn his father in his rural Kentucky hometown. Unaware of the family he'll find there, he reaches out to the only person who will listen. Dunst, an insightful flight attendant, sets the stage for a lesson on appreciation, love and second chances at life.

- Submitted by Lara Barnes, MFT ▲

“P.S. I Love You”

Starring Hillary Swank, Gerard Butler, Harry Connick Jr, Kathy Bates.

Set in New York City, a young American wife, Holly, who is married to an older, care-free Irishman, Gerry, must come to grips with her husband's premature death. Though seemingly a “downer” of a way to begin a movie after the initial scene of a blissful love and connection between the two of them, the film takes a twist when Holly receives a birthday cake that says in the icing, “Happy Birthday, My Love, Love Gerry” With the cake is a gift of a tape recorder that says, “Play Me.”

After hitting the “play” button, Holly hears, “I know it sounds a little bit morbid. I just don't like the idea that I'm not going to be there to see you freak out over turning 30. But I have a plan: I'll be sending you letters. Just go along with me on this 'cause the thing is I just can't say 'goodbye' yet.”

Handwritten notes with requests related to shared experiences and embarking on new adventures arrive with regularity: go out with girlfriends to celebrate her 30th b-day (instead of staying home sullen over his death), save yourself bruises and buy a bedside lamp, get a disco diva outfit and karaoke, go on trip to Ireland with closest friends (itinerary already pre-planned by Gerry), etc..

In essence, he was encouraging new adventures and experiences that could help her deal with his death and find her new self in the process. Another note reads: “My leather jacket is for you. I always loved the way that looked on you. But the rest of my stuff – you don't need it. Make some SPACE in that bloody apartment for yourself; it's time, baby.” Scenes of these shared experiences entwine with new adventures requested by Gerry that bring to life the 3-dimensionality (warts and wondrous memories) of each

other, individually and relationally. I notnd with the phrase, “PS I Love You.” They serve as a recursive bridge between past, present, and future, inviting all involved to embrace memories AND move on to new beginnings. They are not mutually exclusive.



A scene that epitomizes Gerry's belief about death takes place at a NYC memorial for Irish famine victims, where Gerry would take Holly to eat Irish corn beef sandwiches, saying, “The best way to honor the dead - show them how well we're doing.” He later tells in tape, ““Don't be afraid to fall in love again. I will always love you.””

This is a wise and poignant invitation/declaration to be sure, and one that combines the mourning and the fresh horizons possible when deaths of loved ones occur (much like a healthy attachment where children, when securely attached, can venture further and further from their parental figures). I praise this film in deftly handling death, a subject that is typically taboo in the U.S., much less Hollywood.”

- Submitted by Marcus E. Berglund, LMFT ▲

“Fun with Dick and Jane”

Extremely poignant in our current economy, this remake film with Jim Carrey and Tia Leone' is a painful and laugh-filled look at the American dream gone awry. As the main character's deal with corporate shutdown and a crashing housing market, they embrace radical and comical methods to ensure their financial safety. But the film also takes on the system: how corporate greed can cripple the everyday person. This movie might be helpful for those facing such times currently and lend a perspective that we've been through this before and survived; we will survive again.

- Submitted by: Shelley A. Hanson, MA, LPC, LMFT ▲

Avoiding Liability Bulletin Cont'd.

By Richard S. Leslie, J.D.

Attorney at Law—"At the Intersection of Law and Psychotherapy"

(Continued from page 5)

over a certain amount enough to trigger a report? As an example, California law requires the *driver* of a motor vehicle to file a report within 10 days following a motor vehicle accident (including some which occur "off-highway") that has resulted in damage to the property of any person in



excess of \$750. If the facts in the question took place in California, then luckily for the therapist or counselor, a report would not have to be filed by the practitioner because he or she was not the *driver* of the motor vehicle. If the incident took place elsewhere, the therapist or counselor could be placed in the awkward position, depending upon the specific circumstances, of being required to report.

Question #5 – If a counselor or therapist is convinced by the circumstances that a client is responsible for burglarizing the counselor or therapist's office and taking a patient file, it would be permissible for the counselor or therapist to report the burglary to the police and to reveal the identity of the suspected burglar.

TRUE – If a client commits a crime against a therapist or counselor, the practitioner is not prohibited from reporting the crime and the identity of the actor. Generally, health care practitioners are permitted to report the crimes committed against them – whether to their person or their property. If the law were otherwise, health care practitioners could have crimes committed against them and be without recourse. Sometimes the crime is committed in the presence of the therapist or counselor, or there may be an admission (after the fact) by the patient or client, or there may have been a prior threat by the patient or client. The practitioner must be very careful, in situations like this, that he or she is using good judgment before making disclosures to the police regarding the suspect's identity. Disclosing the identity upon mere suspicion is unwise. The "evidence" of the patient's guilt must be substantial before a disclosure can be safely made. Additionally, the therapist must take care to limit the amount of information (relative to treatment issues) given to the police. ▲

Dates for Upcoming OAMFT Board Meetings:

October 11th

Office of Deanne Faby

November 15th

Office of Shelley Hanson & Holly Beckman

**No Board Meeting in
December**

*For time and location details,
please check the website at
[www.oamft.org!](http://www.oamft.org)*

**Interested in MFT and
Legislative Process? Please
contact the OAMFT at
oamftboard@gmail.com.
We are seeking a Legislative
Chair person who can
advocate on behalf of MFTs
in Oregon.**

ADVERTISING SECTION

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Memphis, Tennessee • October 30 - November 2, 2008

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&

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Two Training Workshops with three world renowned clinician Trainers from Gestalt Associates Training Los Angeles: **Todd Burley, Ph.D. ABPP, Rita Resnick, Ph.D. and Robert W. Resnick, Ph.D** with additional GATLA faculty as registration requires. These workshops are open to therapists, counselors, allied professionals (clergy, OD consultants, nurses, etc.) as well as advanced graduate students enrolled in matriculated programs.

Each of these workshops will form the beginning of an annual 3-4 weekend series in Seattle. Dates to be determined. No commitment required for the series until **AFTER** the first workshop.

Gestalt Therapy: A Contemporary Approach

Todd Burley, Ph.D. ABPP
Rita Resnick, Ph.D.
Robert W. Resnick, Ph.D.

Gestalt Therapy today continues to stay vital, relevant and at the cutting edge of psychotherapy by integrating, with discrimination, both theoretical and research findings from cognitive psychology, neuroscience, chaos theory, phenomenology, field theory, post-modern theories, modern psychoanalysis and more. This is a deeply dialogic therapy in which the relationship between the client and the therapist is the "experience near" crucible for awareness to flourish and for choice and perhaps change to have its opportunity.

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