

***The Monterey County Chapter***  
California Association of Marriage and Family Therapists

**July / August 2023 Newsletter**



**Benefits to MC-CAMFT Membership:**

- Reduced fees at our events
- Invitation to our Members only annual gatherings
- Access to Members only Salons, which are intimate workshop offerings taught by fellow Members
- Periodic Newsletter with relevant CAMFT information and Member created writing
- Opportunity to contribute your writing to our Newsletter, including things such as a column, book review, workshop or conference review, poem, opinion piece or article
- Free advertising in our Newsletter and “Classifieds” section of our website
- Inclusion in our “Find a Therapist” website directory
- Access to Member and Announcements Forum on our website where you can seek feedback from other members and post things to the community
- Opportunity to submit a proposal to host a Salon for our Members
- Option to join us on the Board as a volunteer committee chair or ad hoc committee member
- Opportunity for MC-CAMFT to co-sponsor your workshop, so you can offer CEUs to your attendees
- Free Mentoring by experienced clinicians
- Invitation to suggest any member activity you find interesting, and we’ll consider it!

**Benefits to MC-CAMFT Website:**

- ◇ Current Member Directory
- ◇ Classifieds Page for Members
- ◇ Chapter Board Contact
- ◇ Specialized Forums
- ◇ Online Newsletter
- ◇ Networking Opportunities
- ◇ Chapter Documents Access
- ◇ Sponsorship Opportunities
- ◇ Membership Information

***MC-CAMFT CALENDAR***

***LUNCHEON & CE EVENT***

***Event: Working with Neurodivergent Clients and Persons on the Autism Spectrum***

***Presenter: Tricia Lara, LMFT***

***Date/Time: Oct. 6th, 2023 / 11:30 am-2:30 pm***

***Location: TBD***

***CAMFT ZOOM WEBINAR CE EVENT***

***Event: CAMFT Webinar: Recordkeeping & Working With Clients In the Legal System***

***Date/Time: Oct. 27th / 9:00 am - 4:15 pm***

***Location: Online***

***In This Issue...***

2023 Board/Committee	pg. 2
President’s Message	pg. 3
Upcoming Events	pg. 4
Member Spotlight	pg. 5
Road to Licensure	pg. 6-7
Couples Corner	pg. 8
Guest Article	pg. 9-10
Member Ads	pg. 11
Newsletter Deadlines	pg. 12

# 2023 MC-CAMFT Board Roster

## 2023 Board of Directors - Officers -

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[amy@heartsinline.com](mailto:amy@heartsinline.com)

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## 2023 - Committee Chairs -

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### Hospitality Chair:

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### Pre-Licensed 3,000 Hr. Club Chair

Catherine Rodriguez, LMFT  
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### Continuing Education (Co) Chairs:

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### Membership Chair: OPEN

### Public Relations Chair: OPEN

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CAMFT Facebook page.

*Amy Snyder*



*2023 Board President*

*Dear MCCAMFT community,*

*As we welcome the summer season, we find ourselves with an opportunity for renewal and rejuvenation. It is in this spirit that our board of directors begins our work towards strengthening the foundation of our chapter and renewing our procedures. This year, we began our mission to breathe new life into the chapter following the challenges of the pandemic. Along the way, we have encountered some bumps in the road that require our attention, and we discovered some changes that need to be implemented. We are now at the 6 month mark. This is where we take a breath and step back for a new perspective and reevaluation. We have decided to pause our CE events for the summer months and focus our time and energy on updating our operations, procedure and bi-laws. Our CE events will continue in September and October and will include a Narrative Therapy Salon, a presentation on working with clients on the autism spectrum, and a full day Law and Ethics workshop. We look forward to settling back into event season in September.*

*While we are hard at work strengthening our operations, we will still be offering our monthly Psych Hike. This is a great way to connect with the community in an informal and fun way and share your feedback about what you would like to see offered by the chapter. We love hearing from our members as we tromp through nature.*

*On a somber note, I would like to express our deepest apologies for the cancellation of our previously scheduled event on July 15th. Unfortunately, unforeseen circumstances arose that made it impossible to proceed as planned. We deeply regret any inconvenience caused and assure you that we remain fully committed to delivering valuable events that align with our community's needs.*

*As we move forward, let us remember the strength and resilience that defines our community. Together, we possess the power to uplift, heal, and transform lives. I encourage each one of you to share your unique insights, ideas, and experiences, as we embark on this exciting phase of rejuvenation and growth. By harnessing the collective wisdom and energy of our members, we can overcome any challenges that come our way.*

*Should you have any questions, suggestions, or contributions, please do not hesitate to reach out to us. Your feedback is invaluable as we shape the future of our chapter.*

*Thank you for your unwavering support, dedication, and commitment to the well-being of our community. Together, let us continue to spread light, empathy, and healing in all that we do.*

*Warm regards,*

*Amy Snyder, LMFT*



# Upcoming Events

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***Friday October 6th, 2023 / 11:30am - 2:30pm***



**Tricia Lara, LMFT - Working with Neurodivergent Clients and Persons on the Autism Spectrum**

*\*Please keep an eye out on the MC-CAMFT Website and the September/October Newsletter for more information. MC-CAMFT is excited to have local therapist and CAMFT member, Tricia Lara, provide an in-depth and thoughtful presentation on working with Neurodivergent Clients and Persons on the Autism Spectrum.*

***Friday October 27th, 2023 / 9:00am - 4:15pm***

**State CAMFT presents an All-Day Zoom Presentation on Law & Ethics with multiple presenters:**



***Sara Jasper, Esq. - CAMFT Staff Attorney***

During this three-hour workshop CAMFT Staff Attorney, Sara Jasper, will review the basic legal and ethical requirements for recordkeeping. She will also identify additional requirements for providers who practice via telehealth and/or are contracted with a managed care network. Finally, Ms. Jasper will discuss the need for communicating with patients about record keeping standards and practices throughout the course of treatment and why having a clear, sound and sustainable approach to record-keeping is therefore essential.



***Michael Griffin, Esq., LCSW - CAMFT Staff Attorney***

This 1.5 - hour workshop will provide an overview of legal and ethical issues which commonly arise when working with clients who are involved in the legal system. The workshop will discuss the importance of clearly defining the therapist's role and client expectations at the start of treatment, including expectations concerning the therapist's possible participation in the client's legal matter. Issues such as letter writing, offering one's opinion to the court, and the therapist's responsibility to the legal system, as expressed in the Code of Ethics, will also be considered. Vignette examples will be utilized, as time allows.



***Alain Montgomery, Esq. - CAMFT Staff Attorney***

Therapists are often asked to write letters, fill out forms and offer professional opinions on behalf of clients. During this three hour presentation, CAMFT Staff Attorney Alain Montgomery will review key legal and ethical standards for therapists to consider before writing a letter or filling out a form for a client and discuss how to manage the potential outcome of having to respond to a subpoena and/or testify as a witness in a legal proceeding which could result from having rendered a professional opinion on behalf of a client.

# Member Spotlight

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## ***Lori Galperin, MSW, LCSW***



Lori is a clinician here on the Peninsula and Senior Therapist and Co-founder of Harmony Place Monterey. Lori began her professional career 36+ years ago, after graduating from Tulane University Graduate School of Social Work in New Orleans. She has co-founded and co-directed numerous programs over the years – in New Orleans, St. Louis, Kansas City, Los Angeles and finally, as of 10 years ago, here, in the area she fell in love with 25 years prior. Her areas of clinical focus, writing and teaching include: sexual and relational therapy with couples, sexual trauma and compulsivity, eating disorders and the convergence of these arenas with mood, anxiety and other co-occurring disorders.

Over the years, she has co-authored journal articles and book chapters and is currently working on a book project. The book is designed to bring together the pieces that have shown themselves to be most integral to the therapeutic process of recovery and growth.

Lori says: *“I keep choosing to construct programs, because as challenging as it is, nothing has more potency than the healing power of: therapeutic community.”*

## ***Dr. Julia Smith, LPCC, NCC***



Hello. I am Julia Smith, a Licensed Professional Clinical Counselor with a Doctor of Education degree in Counseling from the University of Missouri-St. Louis and 30 years of clinical experience. My commitment to mental health reflects my passion for nurturing the ongoing process of psychological and social development.

Given the instrumental importance of autonomy for decisive action in development and progress in therapy, I launched qualitative research to see how it manifests in personal decision-making amid dilemmas in care between self and attachments. Results showed a significant association between relationship context and the ability to be autonomous. Key relationships hindered or generated autonomy, often occurring in subtle ways. I continued data collection to observe the qualities that support autonomy. Key dynamics included self-respect, respect for others, empathy, compassion, and an absence of control.

My research findings have become integral in my perspective and approach when working with clients. Along with my psychodynamic orientation, I incorporate Interpersonal Process, Gestalt, Family Systems, and CBT therapies. My clinical background includes working with individuals and couples to address anxiety, depression, relationship problems, ADHD, grief and loss, trauma, advancing years, and the military. In addition, I am certified as an Autism Spectrum Disorder Clinical Specialist. I have also served as an Assistant Professor of Counseling until returning to full time clinical practice.

In following my career path, an unanticipated discovery was my interest in stone sculpting. Like the work of therapy, I see a parallel between stone sculpting and development. Just as there is potential form and movement to be expressed within each individual, there is form and movement to emerge within stone. I meet with individuals via telehealth and my website can be found at

<https://drjuliasmith.com>

## Road to Licensure / Phase 6: *Therapist Development and Self-Care*

*-Submitted by Catherine Rodriguez, LMFT*

Welcome to Part 6 of the MC-CAMFT Road to Licensure article series! I'm Catherine Rodriguez, your 2023 Pre-Licensed Board Chair.

This series is adapted from the 2022 version of CAMFT's Master Checklist for MFT Licensure as well as other BBS resources for AMFTs, APCCs, and ASWs. Be sure to check with the BBS and CAMFT often to ensure you have the most current information, as it is an ever-evolving process. We'll do our best here to provide you with the most up-to-date information on the Road to Licensure. On the BBS website, you will notice the phrase "Ultimately, it is the responsibility of the applicant to comply with all requirements for licensure." While this is true, there is plenty of support available for you. My goal in this series is to empower you to know where to go for resources and support.

On the CAMFT website <https://www.camft.org> under the Pre-Licensed Corner, you'll find The Master Checklist for MFT Licensure (updated for 2022). You must be a member to access this, but it's an invaluable resource along with many other resources available from CAMFT for Pre-Licensed members.

Over the course of the year, these articles have addressed these topics in the Phases of Licensure: 1) Grad School & Traineeships, 2) Upon Graduation, 3) Gaining Hours of Experience, 4) Application for Exams and Licensure, 5) Licensure and Beyond and 6) Therapist Development and Self-Care. These articles will have links to websites that you can access for the specific support that you need. Please feel free to contact me for guidance or to give feedback on how we can best serve you.

You've now made it through to licensure. Hearty congratulations to you! I hope that you took the time to celebrate that amazing accomplishment. I imagine that it was at least a four-year-long journey for you, and if you're like me, even longer (it took me nearly eight years from start to finish!). By this time, you've probably made some decisions about your future career, and have begun the journey whether at a community mental health agency, county organization, or private practice.

But it's not done yet! In fact, through the course of this series of articles, I've come to realize that there is an undercurrent that we haven't yet discussed. What we've addressed in this series are the nuts and bolts of the process, the steps that you have to go through along the way. What we haven't really discussed are the emotional components of this journey, the parallel process of what you go through in your own life and inner world to become a psychotherapist. Let's explore some of that in this article.

First, what is the parallel process of therapy? This refers to the therapist's experience in the therapeutic relationship that mirrors the client's experiences, thoughts, or feelings in parallel to working with clients. It may be the specific countertransference of what's happening in the room with clients, where what they are presenting is similar to something you've experienced in your own life. Or it may be the broader experience of what's happening in your life outside of the therapy room and how that might come into your work. It could also be considered the developmental process you're experiencing in parallel to your work as a therapist. Let's look more closely at that last element.

When you entered graduate school, you expected to get a thorough education that prepares you for a career in the mental health field. You might have found that in fact, it's only the beginning. Now you will have to work to cultivate your professional identity and development. This includes exploring the following:

- 1) Why do I do this work? What is my mission in doing therapy?***
- 2) Who do I work best with?***
- 3) What are the presenting issues for which I am most interested and passionate?***
- 4) What theoretical approaches work best for me and my clients?***

The answers to these questions don't come all at once, but through experience as well as advanced training. You can, however, reflect on these questions to get a sense for what emerges so far. It can involve identifying what you DON'T want in your career. That's important information, as it helps to point in the direction of what you DO want.

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It is crucial to explore these questions as they help in determining what clients and cases you would agree to take on and what you might decline. Wait, did I just say decline? You may feel like taking on clients or cases is mandatory, but it's important to know when to say no. Knowing what cases you'll say yes and no to can help to avoid or minimize burnout. If you say yes to cases and clients for which you don't have interest or skill, the likelihood of burnout will increase. You can be intentional about what you say yes to and harness your energy toward the clients and cases for which you have the most interest and passion. While you may be limited in making those choices at first, you can be aware of where your energy gets drained or recharged, and plan for the self-care you'll need to refuel your resources (more on this below).

In addition, as you're getting started in your career, you may also be feeling a degree of Imposter Syndrome when you encounter new clients and cases. Each brings a unique constellation of presenting issues and life experiences, and you may feel inadequate as a therapist and aren't sure what to do for them. As a Clinical Supervisor, I actually worry a bit when a new therapist doesn't experience this. There is a fairly steep learning curve to becoming a master-level therapist, and we aren't necessarily informed of that when we start out on this journey. I remember one professor I had in graduate school who mentioned in passing that it takes 10 years before you feel comfortable knowing what to do in the moment in the room with a client. 10 years!!

I like to reframe Imposter Syndrome as Beginner / Learner Practice. You cannot be expected to know everything when you meet a new client or condition. And here you are, working with a real human being who is suffering, and you really want to help them feel better. Remember that you already have the requisite education and training to meet them where they are. You already provide your clients with empathy, compassion, and "unconditional positive regard," as coined by Carl Rogers. The common factors of therapy are truly where the healing is found. Providing a client with an attuned therapeutic relationship within a safe healing space where they feel seen and heard gives them a "corrective emotional experience."

And yes, you will likely need additional training to gain specific skills for treating clients with different presenting issues. This is where knowing who and what you most enjoy working with is important. As you clarify your interests, you can create a learning roadmap to plan for the training and research to engage in over your career to gain the advanced skills and build the expertise you want. For example, if you have interest in working with teen clients with panic disorder, you can search for appropriate training and research in that area.

"Deliberate practice" is a concept that involves intentionally focusing on improving your clinical skills and knowledge by identifying areas for growth and development. Engaging in deliberate practice can lead to better therapeutic outcomes for clients. This can be achieved through reflecting on sessions using audio or video recordings, seeking consultation or supervision, and self-reflection to identify specific skills or techniques to enhance. An excellent resource for this is a book called *Deliberate Practice for Psychotherapists, A Guide to Improving Clinical Effectiveness* by Tony Rousmaniere.

By this time in your career, you've probably experienced a degree of compassion and empathy fatigue, especially when you don't fully know what you're doing or how you're working. It can be additionally draining when you work with more challenging cases and clients. You've heard that self-care is critical for your well-being and for reducing burn-out. It's often referred to but not with much specificity. How do you really go about planning your self-care? It's more than just a bubble bath or a day off. What truly replenishes you? See if you can come up with at least one way to recharge your energy in each of the following domains: Emotional, Mental, Intellectual, Occupational, Physical, Spiritual, Relational, Social, Environmental, and Cultural. Keep in mind that your work is one aspect within your whole life. It takes intention and commitment to create an overall balance in all the domains of your life. It certainly isn't easy with the many demands and challenges you will encounter. CAMFT has a page for Therapist Self-Care Resources to help achieve a more satisfying life/work balance. <http://www.camft.org/self-care>

Scheduling and taking time off as a psychotherapist are also necessary for a balanced life. You might look over the year ahead and identify when time off would work best for you. I once had a therapist who took off the whole summer so that she could spend time with her children. You can give your clients a schedule each year, with the caveat that the schedule is subject to change and you will notify them well ahead of time of when you plan to be away.

As mentioned earlier in this series, personal psychotherapy is another important element in self-care, as well as in client care. This is another way of working through the parallel processes in all of the areas mentioned above, particularly with countertransference and the challenges you meet in your personal life.

Last but not least, be sure to sign up for membership in state and local CAMFT, for resources, information, community, and support on your Road to Licensure. Check here <https://mccamft.org> for member benefits on the MC-CAMFT website. Congratulations again on completing your Road to Licensure!



## Couples Corner

offered by EFT trained therapist Amy Somers

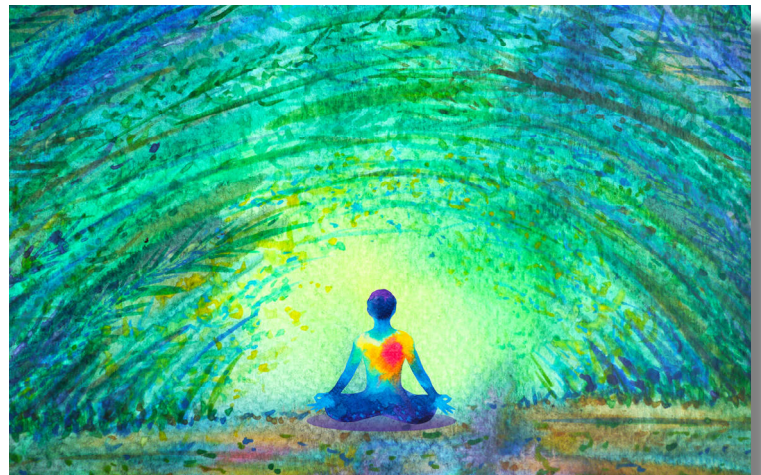
I may have mentioned this before. If I have, please bear with me, it's worth repeating. I want to talk about a little thing called Chai Chat. This is where my husband and I meet daily and pay tribute to our Third, our secure attachment. It's like putting money in the bank of the relationship. We are rich in relationship dollars at this point! My husband recently got too jacked up on chai (we were drinking this brilliant Sherpa Chai from Boulder, CO that is out of this world) and the caffeine worked against us in the end. So, I switched us to green tea matcha. Maybe we need call it Matcha Meet. Anyway, we gather daily, even when we are crazy busy. Even when we only have 5-10 minutes.

We sit with our steaming cup of goodness, we look in each other's eyes, and speak from a heart space. We share how we're feeling, what challenges we will face (or have faced) for the day, week, month, and year. We share fears, sadness, joys, funnies, love, whatever connects us on a deeper level. It's easy to get caught up in the doings of the day. In fact, most times when we meet in the morning, my husband has been up for several hours, sometimes even 4 hours or more. He gets excited to see me, very high energy (remember he's a pursuer), and wants to share what he's been doing. His masculine energy greets me with lists of doings, plans for the day or what needs to be fixed/done. I sit down on the couch and look out the huge triangle glass windows at the redwoods. "Shhhhhhhh," I say, "The trees are talking. Listen to the birds, hear the wind. Watch the sunlight fall through the evergreen branches! Look at the fog come tumbling in. Smell the sea." He comes into being. He comes into heart space and reaches for my hand. From this quiet place, we connect.

It's easy to share love from the heart space. It's much more difficult to share fear, sadness, doubt, or any of the less popular emotions. These are basement dwellers that we as a culture almost never invite upstairs and seldom give them airtime. They also bring a certain shortcut to closeness, to connection. Sharing your deepest and darkest with your partner brings you to a vulnerability that also lives in the heart. There is nothing to fix, nothing to do, just listen. Holding space for these shadow messengers is all you need to do. Welcome them in with your partner. Let your horrors hit the light of day and bounce around a bit, they will eventually usher themselves out. Rumi was positive that honoring the dark ones clears you out for some new delight. I hope so. At the very least, the heart feels lighter. At the most, you are connected in to a second heart that will beat for you, even when yours feels like it cannot. A synergy bigger than the parts.

One of our couples met at 4:30 in the morning because it was the only time had. They had kids, life, busy-busy. Sometimes they had a cup of tea and watched the mist rise from the cups and just held hands, not a word. Sometimes they spoke about struggles and fears. They talked about the death of one partner quite a bit. Sometimes they painted together. They created whatever space they needed on that day and did so consistently (Did I emphasize the consistency part? Commitment to meeting is key.) It worked! Their money in the bank grew and grew and they eventually graduated themselves. They were amazing. I was so inspired by their reaching for each other in the early morning hours when most people slept, and the sun had yet to appear. To me it emphasized their commitment to their Third in a fresh and daring way. It felt like a beam of light at an extremely dark period. It was hope in a cup.

Back to Chai Chat, or Matcha Meet or Coffee Tawk. Whatever you name it, it really means sacred space. Calling in your higher self for deep connection with your partner. This will provide the foundation of your day, of your life, with the Third. If it's too hard to find something to talk about, share three things you love about your partner. Draw some cards from a deck and make up some rules. Maybe don't talk at all, sit side by side and hold hands and stare out the window. Find your rhythm. Be brave. You might giggle. You might feel silly. It's okay. Out of your comfort zone means you're in the right place. You don't have to drink anything, maybe just experience skin to skin, whatever works. I invite you to try this daily ritual and see what it brings. Bottoms up!





### Borderline Rage

#### Why it is so intense and how you can respond.

Daniel S. Lobel Ph.D. -My Side of the Couch

-Individuals with BPD often experience periods of rage which cause them to lash out at others.

-The rage is often associated with a perceived challenge to their idealized self-image.

-These outbursts are very damaging to relationships. Understanding where the lashing out comes from informs two strategies for minimizing conflict.

A common symptom of Borderline Personality Disorder (BPD) is rageful lashing out at others. These rages often appear to be precipitated by minor issues or even manufactured issues. Targets of these rages, often relatives or others who are close, feel beaten up by these episodes while wondering what they might have done wrong that warranted such aggressive reactions. These episodes are very challenging to relationships; they always damage relationships and sometimes end them. Understanding the underlying mechanisms that produce disproportionate anger and rage offers strategies to maintain relationships with individuals with BPD symptoms while minimizing your hurt.

Individuals with symptoms of BPD suffer from unstable mood, self-perception, and relationships. The way they treat others is affected by these changes, which can occur quickly and sometimes without identifiable provocation. They can go from jovial to hostile in an instant at any time. These changes often occur abruptly because BPD causes those afflicted to view the world in binary, or black-and-white, concepts. Their view of themselves is vulnerable to shifting from an idealized or grandiose view to self-loathing. During the idealized self-view, they are sometimes seen as narcissistic, as they express grandiosity and insist that they are correct even while others disagree. During the loathing, or devalued state, they may resort to self-mutilation or other forms of self-harm or dishonor. In many situations borderline rage is actually driven by a need to eliminate any evidence that conflicts with the idealized self or confirms the devalued self. This is demonstrated in the following dialogue between Zoe, who has symptoms of BPD and her mother.\*

*Mom: Zoe, do you know where my car keys are?*

*Zoe: How would I know?*

*Mom: You use the car sometimes.*

*Zoe: So, if there is a problem, it must be me.*

*Mom: I didn't say that.*

*Zoe: Now you are gaslighting me.*

*Mom: Why are you acting this way?*

*Zoe: I don't need to use your car anymore. I am not a thief or a liar.*

*Mom: I didn't accuse you of anything. I was just asking about the car key.*

*Zoe: You lost your car key and you are blaming me. Great parenting.*

Zoe's need to continuously reinforce her idealized self-view causes her to be overly vigilant, or outright paranoid about slights from others. For this reason, she heard her mother's neutral question about the car keys as accusation that she is flawed. Zoe attacks the perceived accusation, and her mother, to defend her idealized self-image in an effort to neutralize the threat.

The concepts of idealization and devaluation are by definition distortions. Idealized means better than real and devalued means worse. Defending a distorted ideal requires further distortion of what is real. In the above example, Zoe distorts the meaning of what her mother is saying in order to create an opportunity to defend her image as one who never errs or does anything wrong. This is why individuals with symptoms of BPD are loathe to apologize for anything: If they acknowledge an error or a flaw, in their eyes they become worthless.

Understanding that Zoe has symptoms of BPD that cause her to be highly vigilant for any statements or actions that challenge her idealized self-view, her mother can use the following tools to minimize conflict without enabling unhealthy behavior.

### Preemptive Strategy

There are tools that you can use to mitigate some of the conflict before it occurs.

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Even in a situation where the individual with symptoms of BPD might have some responsibility, conflict can be minimized by focusing on your part in the transaction. For example, if Zoe's mother had just lent her the car and did not get the keys back yet, she can say, "Zoe, I forgot to ask you to give me the car keys back. May I have them?"

Like many people in relationships with individuals with BPD, you may find that conflicts sometimes ignite quickly and intensely seemingly without precipitant, or out of nowhere. When this happens, preemptive tools may no longer be available. This was the case for Zoe's mother. When Zoe said, "So, if there is a problem it must be me," her mood and her facial expression changed. Mom knew that Zoe was getting agitated. She tried to respond by saying "I didn't say that," but this only made Zoe more aggressive because she heard this as defensive and accused mom of gaslighting her.

If you find yourself in a conflict with someone with symptoms of BPD, you will minimize the intensity of the conflict by offering validation and contrition for hurting their feelings. When responding to Zoe, her mother might have said, “I see that what I said hurt you. I am so sorry. I did not mean to hurt you or cause distress. I meant to ask your help in finding my car keys.”

Individuals with symptoms of BPD often manifest instability of self that destabilizes their mood and behavior. Shifts in self-perception and mood often create conflict in relationships when they feel that their idealized sense of self is challenged in any way. This is often associated with aggressive lashing out. The above strategies can help to minimize these conflicts when utilized by those in relationships with these individuals.

\* Examples are constructed from aspects of different transactions involving different individuals.

# Borderline personality disorder

Key information for clinicians from the *Lancet* Seminar

## Diagnosis

Two models are recommended: the Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-5), and the International Classification of Diseases, 11th revision (ICD-11).

### DSM-5: borderline personality disorder

Maintains the traditional method of using nine **polythetic criteria**, of which **at least five must be met** to receive a diagnosis

✓

✓

✓

✓

✓

### ICD-11: borderline pattern

The general severity of a person's personality disorder and prominent personality traits are determined. A 'borderline pattern' can be specified.

–+

## Core assessment criteria used

Criterion	DSM-5	ICD-11
Fear of abandonment	✓	✓
Unstable relationships	✓	✓
Unstable self-image	✓	✓
Impulsivity	✓	✓
Self-harm	✓	✓
Mood instability	✓	✓
Feelings of emptiness	✓	✓
Inappropriate anger	✓	✓
Dissociation/transient paranoid ideation	✓	✓


## Other criteria

Six additional manifestations of borderline pattern are often seen, not all of which may be present in a given individual at a given time:


A view of the self as inadequate, bad, guilty, disgusting, and contemptible	✓
An experience of the self as profoundly different and isolated from others	✓
A painful sense of alienation and pervasive loneliness	✓
Proneness to rejection hypersensitivity	✓
Problems in establishing and maintaining consistent, appropriate levels of trust in interpersonal relationships	✓
Frequent misinterpretation of social signals	✓

## Core characteristics


BPD incorporates three core characteristic domains:



**Intense and rapidly changing emotions including impulsivity**



**Unstable and inconsistent self-identity**



**Problems with interpersonal relations**

Read the full Seminar at [www.thelancet.com](http://www.thelancet.com)

## Job Postings



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### *New Job Listings From Prelicensed.com*

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[Bilingual Therapeutic Visitation Clinician-Support Youth!](#)

[Mental Health Therapist - Birth to Five - King City - Seneca](#)



## Equip

[www.equip.health](http://www.equip.health)

Equip is hiring CA therapists for 20+ hours per week. All positions are salaried (guaranteed pay regardless of case-load) and come with health/dental/vision benefits, PTO, paid supervision and training, and remote work stipend. Salaries start at \$40k for 20hrs/week.

Learn more and apply at:

<https://equiphealth.recruitee.com/o/licensed-therapist>

## Member Ads

### *Is it time to create or update your website?*

MC-CAMFT webmaster, Katie Dutcher, specializes in creating beautiful and affordable websites with Square-space, and she's currently taking on a small number of new website clients.

For a free consultation, email Katie at:  
[hello@katiedutcher.com](mailto:hello@katiedutcher.com) or visit  
[www.katiedutcher.com/design](http://www.katiedutcher.com/design)

### ***\*SERVICE FOR CLINICIANS\****

*Do you have a guided meditation, imagery exercise, grounding/containment exercise, even a conference talk audio file that is full of ambient noise or not up to the quality you'd like?*

Contact:  
[ross@visceralrecords.net](mailto:ross@visceralrecords.net)  
for more info, samples of work, and/or pricing







**MC-CAMFT**  
**P.O. Box 3092 Monterey,**  
**CA 93942**  
**[www.mccamft.org](http://www.mccamft.org)**

## **NEWSLETTER ARTICLES AND CONTRIBUTIONS INVITED**

Make sure our newsletter reflects your experience as a clinician in our chapter. Contribute to your newsletter through book reviews, opinions, CEU experience, events, clinical expertise, announcements, successes or other relevant information.

***Contact Ross Farley III, LMFT, newsletter editor,***  
***[rossfarleyiii@gmail.com](mailto:rossfarleyiii@gmail.com), 831-313-4043***

## **NEWSLETTER ADVERTISING**

Advertisements including classifieds and flyers must be placed prior to the advertising deadline. All ads must obtain approval by the Newsletter Editor, Advertising Chair and the MC-CAMFT Board President.

Advertisements should be submitted by email attachment as a Word document with the exact wording desired. Submission and approval for all advertisements, including payment, is due by the 12th of the month preceding publication.

## **NEWSLETTER DEADLINES**

Newsletters are published at the beginning of the month, every other month (January/February, March/April, May/June, July/August, September/October, November/December). Deadline to contribute articles and advertisements is the 12th of the month preceding publication.

### **MC-CAMFT** **Mission Statement**

MC-CAMFT is dedicated to the advancement of marriage and family therapists, to the promotion of high standards of professional ethics and qualifications of its members, and to expanding the recognition and utilization of the profession in Monterey County.

## ***MC-CAMFT is pleased to acknowledge the service of its*** **PAST PRESIDENTS**

1989 Jane Ellerbe	2003 Lois Panziera
1990 Connie Yee	2004 Mary Sue Abernethy
1991 Joan Mortensen	2005 Elisabeth Wassenaar
1992 Mark Willison	2006 Mary McKenna
1993 Katherine Weller	2007 Brenda Lang
1994 Jerian Crosby	2008 Abby Bukofzer
1995 Janis "JC" Clark	2009 Eileen Nazzaro
1996 Steve Weiner	2010 Elizabeth Ramírez
1997 Mary Jane Melvin	2011 Heather Crimson
1998 Steve Mahoney	2012 Carolyn Kelleher
1999 Susan Ross	2013/14 Cheryl Fernandez
2000 Judy Masliyah	2014/15 Emily Lippincott
2001 Barrie O'Brien	2016/19 Kristine Jensen
2002 Stephen Braveman	2020/22 Jennifer Farley